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Canada. Parliament. House of
Commons. Standing
Committee on health welfare
and social affairs.
Minutes of proceedings and
evidence 1968-69 No. 1-25



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HOUSE OF COMMONS
First Session—Twenty-eighth Parliament
1968

STANDING COMMITTEE
ON
HEALTH, WELFARE AND
SOCIAL AFFAIRS

Chairman: Mr. GASTON ISABELLE

PROCEEDINGS

No. 1-25

LIBRARY THURSDAY, OCTOBER 17, 1968-69

★ NOV - 6 1968 ★

UNIVERSITY OF TORONTO

INCLUDING

Appendix A

The items listed in the Revised Main Estimates for 1968-69, relating to Central Mortgage and Housing Corporation, to Consumer and Corporate Affairs, and to Medical Research Council.

ROGER DUHAMEL, F.R.S.C.
QUEEN'S PRINTER AND CONTROLLER OF STATIONERY
OTTAWA, 1968

STANDING COMMITTEE
ON
HEALTH, WELFARE AND SOCIAL AFFAIRS

Chairman: Mr. Gaston Isabelle

Vice-Chairman: Mr. Steve Otto
and Messrs.

Forget,
Fortin,
Foster,
Gendron,
Godin,
Guilbault,
Howe,

Knowles (Winnipeg-
North Centre),
MacInnis (Vancouver-
Kingsway) (Mrs.),
McBride,
Monteith,
Osler,

Ritchie,
Robinson,
Rochon,
Rynard,
Thomas (Maisonneuve),
Yewchuk—20.

(Quorum 11)

Gabrielle Savard,
Clerk of the Committee.

Note: Mr. Otto replaced Mr. Roy (Timmins) on October 15.



MINUTES OF PROCEEDINGS

ORDERS OF REFERENCE

HOUSE OF COMMONS
TUESDAY, October 8, 1968.

Resolved,—That the following Members do compose the Standing Committee on Health, Welfare and Social Affairs:

Messrs.

Forget,	Isabelle,	Osler,
Fortin,	Knowles (<i>Winnipeg</i>	Ritchie,
Foster,	<i>North Centre</i>),	Robinson,
Gendron,	MacInnis (<i>Vancouver-</i>	Rochon,
Godin,	<i>Kingsway</i>) (Mrs.),	Roy (<i>Timmins</i>),
Guilbault,	McBride,	Rynard,
Howe,	Monteith,	Thomas (<i>Maisonneuve</i>),
		Yewchuk—(20).

TUESDAY, October 15, 1968.

Ordered,—That the name of Mr. Otto be substituted for that of Mr. Roy (*Timmins*) on the Standing Committee on Health, Welfare and Social Affairs.

WEDNESDAY, October 16, 1968.

Ordered,—That, saving always the powers of the Committee of Supply in relation to the voting of public moneys, the items listed in the Revised Main Estimates for 1968-69, relating to Central Mortgage and Housing Corporation, Consumer and Corporate Affairs and the Medical Research Council, be withdrawn from the Committee of Supply and referred to the Standing Committee on Health, Welfare and Social Affairs.

ATTEST:

ALISTAIR FRASER,
The Clerk of the House of Commons.

MINUTES OF PROCEEDINGS

THURSDAY, October 17, 1968.

(1)

The Standing Committee on Health, Welfare, and Social Affairs met this day at 11:35 a.m. for organization purposes.

Members present: Messrs. Forget, Foster, Gendron, Godin, Guilbault, Howe, Isabelle, Knowles (*Winnipeg North Centre*), McBride, Osler, Otto, Ritchie, Robinson, Rochon, Rynard, Thomas (*Maisonneuve*) and Yewchuk—(17).

The Clerk attending and having called for nominations, Mr. Foster moved, seconded by Mr. Forget, that Mr. Isabelle be Chairman of the Committee.

On motion of Mr. Knowles,

Agreed,—That nominations be closed.

Mr. Isabelle was declared elected as Chairman; he took the Chair and thanked the members of the Committee for the honour bestowed upon him.

On motion of Mr. Guilbault, seconded by Mr. Robinson,

Resolved,—That Mr. Otto be elected Vice-Chairman.

On motion of Mr. Knowles, seconded by Mr. Foster,

Resolved,—That the Subcommittee on Agenda and Procedure be comprised of the Chairman, the Vice-Chairman and four other members appointed by the Chairman after consultation with the Whips of the different parties.

On motion of Mr. Thomas, seconded by Mr. Forget,

Resolved,—That the Committee print 750 copies in English and 350 copies in French of its Minutes of Proceedings and Evidence.

Agreed,—That the items listed in the Revised Main Estimates for 1968-69, relating to Central Mortgage and Housing Corporation, to Consumer and Corporate Affairs, and to the Medical Research Council, referred to the Committee on October 16, be printed as an Appendix to the Committee's Proceedings (*See Appendix A*).

At 11:55 a.m. the Committee adjourned to the call of the Chair.

Gabrielle Savard,
Clerk of the Committee.

APPENDIX "A"

REVISED ESTIMATES, 1968-69

No. of Vote	Service	1968-69	1967-68	Change	
				Increase	Decrease
		\$	\$	\$	\$
	A—DEPARTMENT (Continued)				
	RAILWAYS AND STEAMSHIPS				
15	Payments to the Canadian National Railway Company (hereinafter called the Company) upon applications approved by the Minister of Transport made by the Company to the Minister of Finance, to be applied by the Company in payment of the deficits, certified by the auditors of the Company, arising in the operations in the calendar year 1968 in respect of the following: (i) Canadian National Railways System, (subject to recovery therefrom of accountable advances made to the Company from the Consolidated Revenue Fund) (ii) Ferry Services: Newfoundland Ferry and Terminals; Prince Edward Island Ferry and Terminals and Yarmouth, N.S.—Bar Harbour, Maine, U.S.A. (Details, page 516).....	39,293,000	36,397,600	2,895,400	
20	Construction or Acquisition of Buildings, Works and Land, Dock and Terminal Facilities, including improvements to Terminal Facilities owned by Newfoundland, and of Vessels and Related Equipment as listed in the Details of the Estimates provided that Treasury Board may increase or decrease the amounts within the Vote to be expended on individually listed projects (Details, page 517).....	8,338,000	24,527,000	.....	16,189,000
25	Payments, grants and contributions in the amounts and subject to the terms specified in the sub-vote titles listed in the Details of the Estimates (Details, page 519).....	21,855,000	23,047,100	.....	1,192,100
(S)	Payments to the Canadian National Railway Company in respect of the termination of the collection of tolls on the Victoria Bridge, Montreal (Details, page 521).....	850,000	806,000	44,000	
(S)	Subsidy in respect of the construction of a line of railway at or near Grimshaw, in the province of Alberta, to Great Slave Lake in the Northwest Territories (Details, page 521)...	1,500,000	2,500,000	.....	1,000,000
		71,836,000	87,277,700	.....	15,441,700
	AIR SERVICES				
30	Administration, Operation and Maintenance including the administration of the Aeronautics Act and Regulations issued thereunder and authority, notwithstanding the Financial Administration Act, to make commitments for the current fiscal year for this Vote not to exceed a total amount of \$131,314,600 and to spend revenue received during the current fiscal year (Details, page 521).....	92,573,600	115,782,000	.....	23,208,400

No. of Vote	Service	1968-69	1967-68	Change	
				Increase	Decrease
		\$	\$	\$	\$
	B—CENTRAL MORTGAGE AND HOUSING CORPORATION*				
45	To reimburse Central Mortgage and Housing Corporation for expenditures on housing research and community planning, for the amounts of loans for sewage treatment projects forgiven to a Province, municipality or municipal sewerage corporation, for contributions made for an urban renewal scheme or pursuant to an urban renewal agreement, for losses resulting from the operation of public housing projects, and for net losses resulting from the sale of mortgages from its portfolio (Details, page 535).....	38,100,000	25,300,000	12,800,000	
45					

*Formerly reporting through the Minister of Labour

Positions (man-years)		Details of Services	Amount	
1968-69	1967-68		1968-69	1967-68
			\$	\$
		B—CENTRAL MORTGAGE AND HOUSING CORPORATION		
		Vote 45—To reimburse Central Mortgage and Housing Corporation for expenditures on housing research and community planning, for the amounts of loans for sewage treatment projects forgiven to a Province, municipality or municipal sewerage corporation, for contributions made for an urban renewal scheme or pursuant to an urban renewal agreement, for losses resulting from the operation of public housing projects, and for net losses resulting from the sale of mortgages from its portfolio		
		TO REIMBURSE CENTRAL MORTGAGE AND HOUSING CORPORATION FOR HOUSING RESEARCH AND COMMUNITY PLANNING AS CONTEMPLATED BY PART V OF THE NATIONAL HOUSING ACT, 1954..... (12)	3,800,000	1,800,000
		Expenditure		
		1965-66..... \$ 1,489,904		
		1966-67..... 2,171,932		
		1967-68 (estimated)..... 3,100,000		
		TO REIMBURSE CENTRAL MORTGAGE AND HOUSING CORPORATION FOR LOSSES RESULTING FROM THE OPERATION OF PUBLIC HOUSING PROJECTS UNDERTAKEN UNDER PART VI, NATIONAL HOUSING ACT, 1954..... (12)	4,200,000	3,000,000
		Expenditure		
		1965-66..... \$ 1,976,649		
		1966-67..... 2,109,457		
		1967-68 (estimated)..... 2,800,000		
		TO REIMBURSE CENTRAL MORTGAGE AND HOUSING CORPORATION FOR THE AMOUNTS OF LOANS FOR SEWAGE TREATMENT PROJECTS FORGIVEN TO A PROVINCE, MUNICIPALITY OR MUNICIPAL SEWERAGE CORPORATION PURSUANT TO SECTION 36G OF THE NATIONAL HOUSING ACT, 1954..... (12)	8,000,000	7,000,000
		Expenditure		
		1965-66..... \$ 10,513,153		
		1966-67..... 7,898,965		
		1967-68 (estimated)..... 8,000,000		

Positions (man-years)		Details of Services	Amount	
1968-69	1967-68		1968-69	1967-68
		B--CENTRAL MORTGAGE AND HOUSING CORPORATION (Continued)	\$	\$
		Vote 45 (Continued)		
		TO REIMBURSE CENTRAL MORTGAGE AND HOUSING CORPORATION FOR CONTRIBUTIONS MADE FOR AN URBAN RENEWAL SCHEME OR PURSUANT TO AN URBAN RENEWAL AGREEMENT UNDER SECTION 23 ^{1/2} NATIONAL HOUSING ACT, 1954..... (12)	22,100,000	13,000,000
		Expenditure		
		1965-66..... \$ 4,902,418		
		1966-67..... 6,632,832		
		1967-68 (estimated)..... 8,000,000		
		ITEM NOT REQUIRED FOR 1968-69		
		To reimburse Central Mortgage and Housing Corporation pursuant to Section 5, and Section 24(b) of the Central Mortgage and Housing Corporation Act, for net losses resulting from the sale of mortgages from its portfolio..... (12)		500,000
		Total, Vote 45.....	38,100,000	25,300,000
		Expenditure		
		1965-66..... \$ 19,567,685		
		1966-67..... 18,813,186		
		1967-68 (estimated)..... 21,900,000		

CONSUMER AND CORPORATE AFFAIRS

No. of Vote	Service	1968-69	1967-68	Change	
				Increase	Decrease
		\$	\$	\$	\$
(S)	Minister of Consumer and Corporate Affairs— Salary and Motor Car Allowance (Details, page 57).....	17,000	17,000		
1	Departmental Administration (Details, page 57).....	907,400	625,100	282,300	
5	Bankruptcy Act—Administration (Details, page 58).....	931,100	734,000	197,100	
10	Combines Investigation Act—Administration (Details, page 59).....	1,354,200	1,241,200	113,000	
15	Corporations Branch (Details, page 60).....	280,000	239,200	40,800	
20	Patent Division, Copyright and Industrial De- signs Division and Trade Marks Office in- cluding contributions to the International Office for the Protection of Literary and Artistic Works and the International Office for the Protection of Industrial Property (De- tails, page 61).....	4,522,400	4,158,500	363,900	
25	Consumer Affairs Branch including a Grant of \$30,000 to the Consumers Association of Canada (Details, page 64).....	6,004,400	4,323,200	1,681,200	
		13,999,500	11,321,200	2,678,300	
	SUMMARY				
	To be voted.....	13,999,500	11,321,200	2,678,300	
	Authorized by Statute.....	17,000	17,000		
		14,016,500	11,338,200	2,678,300	

Positions (man-years)		Details of Services	Amount	
1968-69	1967-68		1968-69	1967-68
			\$	\$
		Approximate Value of Major Services not included in these Estimates		
		Accommodation (provided by the Department of Public Works).....	729,300	602,000
		Accounting and cheque issue services (Comptroller of the Treasury).....	88,200	105,000
		Contributions to Superannuation Account (Treasury Board).....	474,500	391,900
		Contributions to Canada Pension Plan Account and Quebec Pension Plan Account (Treasury Board)...	59,800	53,400
		Employee surgical-medical insurance premiums (Treasury Board).....	14,000	33,900
		Employee compensation payments (Department of Labour).....	400	400
		Carrying of franked mail (Post Office Department)....	37,300	54,000
			1,403,500	1,240,600
		Statutory—Minister of Consumer and Corporate Affairs—Salary and Motor Car Allowance		
		Salary.....(1)	15,000	15,000
		Motor Car Allowance.....(1)	2,000	2,000
			17,000	17,000
		Vote 1—Departmental Administration		
		Salaried Positions:		
		Executive, Scientific and Professional:		
1	1	Deputy Minister (\$26,500)		
1		Senior Officer 3 (\$20,500-\$25,750)		
1		Senior Officer 2 (\$18,500-\$23,500)		
1	1	Senior Officer 1 (\$16,500-\$21,250)		
		(\$8,000-\$10,000)		
1		Administrative and Foreign Service:		
1		(\$18,000-\$21,000)		
1		(\$16,000-\$18,000)		
2	1	(\$14,000-\$16,000)		
4	2	(\$12,000-\$14,000)		
3	2	(\$10,000-\$12,000)		
9	6	(\$ 8,000-\$10,000)		
2	1	(\$ 6,000-\$ 8,000)		
		Technical, Operational and Service:		
	1	(\$ 6,000-\$ 8,000)		
1		(\$ 4,000-\$ 6,000)		
		Administrative Support:		
13	4	(\$ 6,000-\$ 8,000)		
53	42	(\$ 4,000-\$ 6,000)		
10	19	(Under \$4,000)		
103	80			
(103)	(80)	Continuing Establishment.....	647,300	527,100
(4)	(4)	Casuals and Others.....	12,000	12,000
(107)	(84)	Salaries and Wages.....(1)	659,300	539,100
		Travelling Expenses.....(2)	17,000	10,000
		Freight, Express and Cartage.....(2)	3,400	400
		Postage.....(2)	200	100
		Telephones and Telegrams.....(2)	17,000	14,000

Positions (man-years)		Details of Services	Amount	
1968-69	1967-68		1968-69	1967-68
			\$	\$
		Vote 1 (Continued)		
		Publication of Departmental Reports.....(3)	1,500	1,500
		Professional and Special Services.....(4)	53,000	27,000
		Rental of Office Equipment.....(5)	10,000	3,500
		Repairs of Office Furniture and Equipment.....(6)	500	
		Office Stationery, Supplies and Equipment.....(7)	34,000	21,000
		Acquisition of Furniture and Fixtures.....(9)	9,000	7,500
		Canada's share of the expenses of The Canadian Committee on Mutual Funds and Investment Contracts.....(12)	101,500	
		Sundries.....(12)	1,000	1,000
			907,400	625,100
		Expenditure Revenue		
		1965-66..... \$ \$		
		1966-67..... 370,706 23,242		
		1967-68 (estimated)..... 891,878 25,100		
		Vote 5—Bankruptcy Act—Administration		
		Salaried Positions:		
		Executive, Scientific and Professional:		
		Superintendent of Bankruptcy (\$20,750)		
		Administrative and Foreign Service:		
		(\$16,000-\$18,000)		
1	1			
3	1	(\$14,000-\$16,000)		
3	2	(\$12,000-\$14,000)		
7		(\$10,000-\$12,000)		
4		(\$8,000-\$10,000)		
16	14	(\$6,000-\$8,000)		
1				
		Technical Operational and Service:		
7	3	(\$12,000-\$14,000)		
13	7	(\$10,000-\$12,000)		
	12	(\$8,000-\$10,000)		
		Administrative Support:		
2	1	(\$6,000-\$8,000)		
40	29	(\$4,000-\$6,000)		
9	1	(Under \$4,000)		
106	71			
(106)	(71)	Continuing Establishment.....	707,100	567,800
(1)	(1)	Casuals and Others.....	3,000	3,000
(107)	(72)			
		Salaries and Wages.....(1)	710,100	570,800
		Travelling Expenses.....(2)	35,000	23,500
		Travelling Expenses of Judges and other Court Officials attending Bankruptcy Conferences.....(2)	4,500	4,500
		Postage.....(2)	1,500	1,000
		Telephones and Telegrams.....(2)	15,000	12,000
		Publication of Annual Report and Other Material....(3)	10,000	
		Professional and Special Services.....(4)	116,500	87,500
		Rental of Office Equipment.....(5)	6,000	3,100
		Office Stationery, Supplies and Equipment.....(7)	30,000	24,100
		Acquisition of Furniture and Fixtures.....(9)	2,000	2,000
		Sundries.....(12)	500	500
			931,100	734,000

Positions (man-years)		Details of Services	Amount	
1968-69	1967-68		1968-69	1967-68
			\$	\$
		Vote 5 (Continued)		
		Expenditure Revenue		
		1965-66..... \$ 143,437 \$ 277,937		
		1966-67..... 274,733 285,316		
		1967-68 (estimated)..... 762,500 315,000		
		Vote 10—Combines Investigation Act—Adminis- tration		
		OFFICE OF INVESTIGATION AND RESEARCH		
		Salaried Positions:		
		Executive, Scientific and Professional:		
		Director of Investigation and Research (\$24,250)		
		Deputy Director of Investigation and Research		
		(\$21,840-\$22,880)		
		(\$18,000-\$21,000)		
		Administrative and Foreign Service:		
		(\$16,000-\$18,000)		
		(\$14,000-\$16,000)		
		(\$12,000-\$14,000)		
		(\$8,000-\$10,000)		
		(\$6,000-\$8,000)		
		Technical, Operational and Service:		
		(\$6,000-\$8,000)		
		(\$4,000-\$6,000)		
		Administrative Support:		
		(\$6,000-\$8,000)		
		(\$4,000-\$6,000)		
		(Under \$4,000)		
1	1			
2	2			
5	5			
11	8			
7	7			
13	11			
5	9			
11				
2	5			
5				
5	6			
44	45			
1	3			
112	102			
(112)	(102)			
		Salaries.....(1)	902,900	855,000
		Unemployment Insurance Contributions and Other		
		Benefits.....(1)	100	100
		Memberships.....(1)	1,000	700
		Travelling Expenses.....(2)	42,000	40,000
		Freight, Express and Cartage.....(2)	8,500	300
		Postage.....(2)	900	700
		Telephones and Telegrams.....(2)	15,000	7,000
		Publication of Departmental Reports and Other		
		Material.....(3)	14,500	14,500
		Professional and Special Services.....(4)	1,500	1,500
		Fees and Expenses of Legal Counsel, Reporters,		
		Witnesses and Other Special Assistants.....(4)	185,000	150,000
		Rental of Office Equipment.....(5)	13,000	11,000
		Repairs of Office Furniture and Equipment.....(6)	500	500
		Office Stationery, Supplies and Equipment.....(7)	25,500	19,500
		Furniture and Fixtures.....(9)	7,500	7,500
		Sundries.....(12)	500	500
			1,218,400	1,108,800
		Expenditure		
		1965-66..... \$ 712,982		
		1966-67..... 919,878		
		1967-68 (estimated)..... 1,095,700		

Positions (man-years)		Details of Services	Amount	
1968-69	1967-68		1968-69	1967-68
			\$	\$
		Vote 10 (Continued)		
		RESTRICTIVE TRADE PRACTICES COMMISSION		
1	1	Chairman (\$25,250)		
1	1	Vice Chairman (\$23,000)		
1	1	Member (\$22,000)		
		Salaried Positions:		
		Administrative and Foreign Service:		
1		(\$14,000-\$16,000)		
	1	(\$12,000-\$14,000)		
		Administrative Support:		
2	2	(\$ 6,000-\$ 8,000)		
2	2	(\$ 4,000-\$ 6,000)		
8	8			
(8)	(8)	Salaries.....(1)	107,900	105,300
		Travelling Expenses.....(2)	9,000	9,000
		Freight, Express and Cartage.....(2)	400	400
		Postage.....(2)	500	500
		Telephones and Telegrams.....(2)	2,000	2,000
		Fees and Expenses of Legal Counsel, Accountants, Special Assistants, Reporters and Witnesses.....(4)	11,000	11,000
		Professional and other Special Services.....(4)	800	
		Repairs of Office Furniture and Equipment.....(6)	100	
		Office Stationery and Supplies.....(7)	3,400	4,000
		Acquisition of Furniture and Fixtures.....(9)	500	
		Sundries.....(12)	200	200
			135,800	132,400
		Expenditure		
		1965-66.....\$ 112,240		
		1966-67.....103,045		
		1967-68 (estimated).....130,000		
		Total, Vote 10.....	1,354,200	1,241,200
		Expenditure		
		1965-66.....\$ 825,222		
		1966-67.....1,022,923		
		1967-68 (estimated).....1,225,700		
		Vote 15—Corporations Branch		
		Salaried Positions:		
1	1	Executive, Scientific and Professional:		
		Senior Officer 1 (\$16,500-\$21,250)		
		Administrative and Foreign Service:		
1		(\$16,000-\$18,000)		
3	1	(\$14,000-\$16,000)		
1	2	(\$12,000-\$14,000)		
2	1	(\$8,000-\$10,000)		
		Administrative Support:		
2	4	(\$3,000-\$10,000)		
1	2	(\$6,000-\$8,000)		
28	21	(\$4,000-\$6,000)		
6	4	(Under \$4,000)		
45	36			

Positions (man-years)		Details of Services	Amount	
1968-69	1967-68		1968-69	1967-68
			\$	\$
		Vote 15 (Continued)		
(45)	(36)	Continuing Establishment.....	257,500	221,500
(1)	(1)	Casuals and Others.....	3,000	3,000
(46)	(37)			
		Salaries and Wages..... (1)	260,500	224,500
		Travelling Expenses..... (2)	1,200	1,200
		Freight, Express and Cartage..... (2)	100	100
		Postage..... (2)	2,100	1,800
		Telephones and Telegrams..... (2)	4,500	4,000
		Professional and Special Services..... (4)	2,400	
		Repairs of Office Machines and Furniture..... (6)	200	
		Office Stationery, Supplies and Equipment..... (7)	7,400	6,500
		Acquisition of Furniture and Fixtures..... (9)	1,500	1,000
		Sundries..... (12)	100	100
			280,000	239,200
		Expenditure Revenue		
		1965-66..... \$ 190,014 \$ 722,122		
		1966-67..... 221,910 681,594		
		1967-68 (estimated)..... 249,909 900,000		
		Vote 20—Patent Division, Copyright and Industrial Designs Division and Trade Marks Office including contributions to the International Office for the Protection of Literary and Artistic Works and the International Office for the Protection of Industrial Property		
		PATENT ADMINISTRATION		
		Salaried Positions:		
1	1	Executive Scientific and Professional:		
1	1	Commissioner of Patents (\$22,000)		
		Senior Officer 1 (\$16,500-\$21,250)		
1	1	Administrative and Foreign Service:		
1	1	(\$16,000-\$18,000)		
		(\$14,000-\$16,000)		
1		Administrative Support:		
2	1	(\$6,000-\$8,000)		
		(\$4,000-\$6,000)		
7	5			
(7)	(5)			
		Salaries..... (1)	137,600	82,800
		Travelling Expenses..... (2)	3,700	2,200
		Freight, Express and Cartage..... (2)	3,000	2,000
		Postage..... (2)	9,000	7,300
		Telephones and Telegrams..... (2)	1,000	1,000
		Rental of Office Equipment..... (5)	900	900
		Office Rental..... (5)	500	500
		Repairs of Office Furniture and Equipment..... (6)	200	
		Office Stationery and Supplies..... (7)	3,500	3,500
		Acquisition of Furniture and Fixtures..... (9)	800	800
		Sundries..... (12)	100	100
			160,300	101,100
		Expenditure		
		1965-66..... \$ 147,198		
		1966-67..... 126,168		
		1967-68 (estimated)..... 129,400		

Positions (man-years)		Details of Services	Amount	
1968-69	1967-68		1968-69	1967-68
			\$	\$
		Vote 20 (Continued)		
		PATENT DIVISION		
		Salaried Positions:		
		Administrative and Foreign Service:		
3	2	(\$16,000-\$18,000)		
6	7	(\$14,000-\$16,000)		
17	15	(\$12,000-\$14,000)		
157	40	(\$10,000-\$12,000)		
30	143	(\$8,000-\$10,000)		
1		(\$6,000-\$8,000)		
	1	Technical, Operational and Service:		
		(\$8,000-\$10,000)		
1		(\$6,000-\$8,000)		
5		(\$4,000-\$6,000)		
	1	(Under \$4,000)		
		Administrative Support:		
16	6	(\$6,000-\$8,000)		
94	97	(\$4,000-\$6,000)		
77	90	(Under \$4,000)		
407	402	Continuing Establishment.....	3,071,600	2,819,700
(407)	(402)	Casuals and Others.....	15,000	15,000
(5)	(5)			
(412)	(407)	Salaries and Wages.....(1)	3,086,600	2,834,700
		Travelling Expenses.....(2)	12,000	9,000
		Telephones and Telegrams.....(2)	25,000	22,000
		Printing of Patents.....(3)	428,000	428,000
		Printing of Patent Office Record.....(3)	213,000	213,000
		Professional and Special Services.....(4)	2,000	2,000
		Rental of Office Equipment.....(5)	10,000	7,000
		Office Stationery, Supplies and Equipment.....(7)	75,000	64,000
		Acquisition of Furniture and Fixtures.....(9)	13,000	27,000
		Sundries.....(12)	600	600
			3,865,200	3,607,300
		Expenditure Revenue		
		1966-66.....\$ 2,741,573 \$2,249,533		
		1966-67.....3,098,368 3,514,175		
		1967-68 (estimated).....3,716,400 4,145,500		
		COPYRIGHT AND INDUSTRIAL DESIGNS DIVISION		
		INCLUDING A CONTRIBUTION TO THE INTERNATIONAL		
		OFFICE FOR THE PROTECTION OF LITERARY AND		
		ARTISTIC WORKS		
		Salaried Positions:		
		Administrative and Foreign Service:		
1	1	(\$10,000-\$12,000)		
1		(\$ 8,000-\$10,000)		
	1	Administrative Support:		
		(\$ 8,000-\$10,000)		
4	3	(\$ 6,000-\$ 8,000)		
6	6	(\$ 4,000-\$ 6,000)		
1	1	(Under \$4,000)		
13	12			

Positions (man-years)		Details of Services	Amount	
1968-69	1967-68		1968-69	1967-68
			\$	\$
		Vote 20 (Continued)		
		COPYRIGHT AND INDUSTRIAL DESIGNS DIVISION (Continued)		
(13)	(12)	Salaries.....(1)	69,600	62,300
		Travelling Expenses.....(2)	1,000	4,000
		Telephones and Telegrams.....(2)	800	600
		Transcription Fees.....(4)	400	400
		Repairs of Office Furniture and Equipment.....(6)	200	
		Office Stationery, Supplies and Equipment.....(7)	3,400	3,400
		Acquisition of Furniture and Fixtures.....(9)	600	600
		Contribution to the International Office for the Protection of Literary and Artistic Works.....(10)	10,000	10,000
			86,000	81,300
		Expenditure Revenue		
		1965-66.....\$ 43,770 \$ 37,651		
		1966-67.....55,477 37,263		
		1967-68 (estimated).....84,600 41,800		
		TRADE MARKS OFFICE INCLUDING A CONTRIBUTION TO THE INTERNATIONAL OFFICE FOR THE PROTECTION OF INDUSTRIAL PROPERTY		
		Salaried Positions:		
		Administrative and Foreign Service:		
1	1	(\$14,000-\$16,000)		
	2	(\$12,000-\$14,000)		
4	2	(\$10,000-\$12,000)		
1	1	(\$8,000-\$10,000)		
	1	(\$6,000-\$8,000)		
10	7	Administrative Support:		
8	8	(\$8,000-\$10,000)		
25	20	(\$6,000-\$8,000)		
17	21	(\$4,000-\$6,000)		
		(Under \$4,000)		
66	62	Continuing Establishment.....	337,300	312,400
(66)	(62)	Casuals and Others.....	3,000	3,000
(1)	(1)			
(67)	(63)	Salaries and Wages.....(1)	340,300	315,400
		Travelling Expenses.....(2)	600	400
		Freight, Express and Cartage.....(2)	100	100
		Postage.....(2)	1,000	800
		Telephones and Telegrams.....(2)	5,000	3,000
		Publication of Trade Marks Journal.....(3)	30,000	15,800
		Rental of Office Equipment.....(5)	1,300	1,000
		Repairs of Office Furniture and Equipment.....(6)	300	
		Office Stationery and Supplies.....(7)	20,800	20,800
		Acquisition of Furniture and Fixtures.....(9)	1,200	1,200
		Contribution to the International Office for the Protection of Industrial Property.....(10)	10,000	10,000
		Sundries.....(12)	300	300
			410,900	368,800

Positions (man-years)		Details of Services	Amount	
1968-69	1967-68		1968-69	1967-68
			\$	\$
		Vote 20 (Continued)		
		TRADE MARKS OFFICE (Continued)		
		Expenditure Revenue		
		1965-66..... \$ 259,497 \$ 412,568		
		1966-67..... 313,631 429,713		
		1967-68 (estimated)..... 363,900 445,000		
		Total, Vote 20.....	4,522,400	4,158,500
		Expenditure Revenue		
		1965-66..... \$ 3,192,038 \$ 2,699,752		
		1966-67..... 3,593,644 3,981,151		
		1967-68 (estimated)..... 4,294,300 4,632,300		
		Vote 25—Consumer Affairs Branch including a grant of \$30,000 to the Consumers Association of Canada		
		Salaried Positions:		
		Executive, Scientific and Professional:		
		Senior Officer 2 (\$18,500-\$23,500)		
		Senior Officer 1 (\$16,500-\$21,250)		
		(18,000-\$21,000)		
		(14,000-\$16,000)		
		(12,000-\$14,000)		
		(10,000-\$12,000)		
		(8,000-\$10,000)		
		(6,000-\$8,000)		
		Administrative and Foreign Service:		
		(14,000-\$16,000)		
		(12,000-\$14,000)		
		(10,000-\$12,000)		
		(8,000-\$10,000)		
		Technical, Operational and Service:		
		(10,000-\$12,000)		
		(8,000-\$10,000)		
		(6,000-\$8,000)		
		(4,000-\$6,000)		
		Administrative Support:		
		(6,000-\$8,000)		
		(4,000-\$6,000)		
		(Under \$4,000)		
1				
2				
1	1			
2	2			
6	4			
12	1			
22	4			
21				
8	2			
1	1			
7				
7	1			
2	2			
48	48			
273	194			
190	190			
5	3			
98	54			
21	25			
727	532			
(727)	(532)			
(4)	(4)			
(731)	(536)			
		Continuing Establishment.....	4,661,500	3,322,900
		Casuals and Others.....	15,000	16,500
		Salaries and Wages.....(1)	4,676,500	3,339,400
		Overtime.....(1)	1,400	
		Travelling and Removal Expenses.....(2)	356,000	284,500
		Freight, Express and Cartage.....(2)	309,600	293,000
		Postage.....(2)	8,300	6,600
		Telephones and Telegrams.....(2)	40,200	20,300
		Consumer Publications.....(3)	15,000	
		Professional and Special Services.....(4)	91,100	3,000
		Rental of Office Equipment.....(5)	500	
		Repairs of Office Furniture and Equipment.....(6)	1,600	6,900

Positions (man-years)		Details of Services	Amount	
1968-69	1967-68		1968-69	1967-68
			\$	\$
		Vote 25 (Continued)		
		Repairs and Upkeep of Laboratory and Automotive		
		Equipment.....(6)	7,900	
		Office Stationery, Supplies and Equipment .....(7)	89,100	38,800
		Other Materials and Supplies.....(7)	34,400	20,500
		Furniture and Fixtures.....(9)	3,000	
		Acquisition of Equipment.....(9)	322,900	293,400
		Grant to Consumers Association of Canada.....(10)	30,000	
		Short Weight Supervision.....(12)	12,800	14,600
		Sundries.....(12)	4,100	2,200
			6,004,400	4,323,200
		Expenditure		
		1965-66.....\$		
		1966-67.....		
		1967-68 (estimated).....175,000		

No. of Vote	Service	1968-69	1967-68	Change	
				Increase	Decrease
		\$	\$	\$	\$
	A—DEPARTMENT (Continued)				
	HEALTH INSURANCE AND RESOURCES (Continued)				
(S)	Contributions to the Provinces pursuant to the Health Resources Fund Act (Details, page 355).....	37,540,000	30,000,000	7,540,000	
(S)	Contributions to the Provinces under the Medical Care Act (Details page 355)	35,000,000		35,000,000	
(S)	Contributions to the Provinces under agreements entered into pursuant to the Hospital Insurance and Diagnostic Services Act (Details, page 355).....	560,000,000	423,600,000	136,400,000	
17	Amount to be credited to the hospital insurance supplementary fund established by National Health and Welfare Vote 17a, Appropriation Act No. 9, 1966, for payments in respect of the cost of insured services incurred by a person who, through no fault of his own, ceased to be eligible for and entitled to insured services under the Hospital Insurance and Diagnostic Services Act (Details, page 356).....	21,000	20,000	1,000	
		683,557,000	506,742,500	176,814,500	
	MEDICAL SERVICES				
20	Administration, Operation and Maintenance including authority to make recoverable advances in amounts not exceeding in the aggregate the total of all amounts to be paid by the Governments of the Provinces and Territories under agreements to be entered on terms approved by the Governor in Council with such Governments in respect of health assistance to persons residing on Indian Reserves other than Indians and to residents of the Territories other than Indians and Eskimos (Details, page 356).....	40,728,000	37,540,000	3,188,000	
25	Construction or Acquisition of Buildings, Works, Land and Equipment including payments to hospitals and other institutions which care for Indians and Eskimos as contributions toward the construction of hospitals and related facilities (Details, page 357).....	1,386,000	2,812,000		1,426,000
		42,114,000	40,352,000	1,762,000	
	FOOD AND DRUG SERVICES				
30	Administration, Operation and Maintenance (Details, page 358).....	8,763,300	7,372,000	1,391,300	
35	Construction or Acquisition of Equipment (Details, page 360).....	469,000	430,000	39,000	
		9,232,300	7,802,000	1,430,300	

No. of Vote	Service	1968-69	1967-68	Change	
				Increase	Decrease
		\$	\$	\$	\$
	A—DEPARTMENT (Continued)				
	WELFARE SERVICES				
40	Administration, Operation and Maintenance including recoverable expenditures on behalf of the Canada Pension Plan, and grants as detailed in the Estimates (Details, page 360)...	9,784,000	10,103,900	.....	319,900
(S)	Family and Youth Allowances Payments (Details, page 364).....	612,865,000	610,000,000	2,865,000	
41	Family Assistance, under such terms and conditions as may be approved by the Treasury Board, in respect of children of immigrants and settlers (Details, page 364).....	5,780,000	4,315,000	1,465,000	
(S)	Old Age Assistance and Blind and Disabled Persons Allowances—Payment of Federal Share (Details, page 364).....	12,340,000	33,250,000	.....	20,910,000
(S)	Canada Assistance Plan—Payments to the Provinces including residual payments under the Unemployment Assistance Act (Details, page 365).....	251,900,000	160,000,000	91,900,000	
(S)	Fitness and Amateur Sport—Payments (Details, page 365).....	5,000,000	5,000,000		
45	National Welfare Grants—To authorize, on terms and conditions approved by the Governor in Council, National Welfare Grants to Provinces and Welfare Agencies including Schools of Social Work, and to individuals in the form of scholarships and fellowships (Details, page 365).....	2,450,000	2,500,000	.....	50,000
		900,119,000	825,168,900	74,950,100	
	SUMMARY				
	To be voted.....	132,662,300	131,218,400	1,443,900	
	Authorized by Statute.....	1,514,662,000	1,261,867,000	252,795,000	
		1,647,324,300	1,393,085,400	254,238,900	
	B—MEDICAL RESEARCH COUNCIL (Formerly with the National Research Council)				
50	Administration, Operation and Maintenance (Details, page 366).....	303,000	229,500	73,500	
55	Scholarships and Grants in aid of Research in accordance with terms and conditions prescribed by the Governor in Council (Details, page 367).....	26,943,000	20,500,000	6,443,000	
		27,246,000	20,729,500	6,516,500	

Positions (man-years)		Details of Services	Amount	
1968-69	1967-68		1968-69	1967-68
			\$	\$
		A—DEPARTMENT (Continued)		
		WELFARE SERVICES (Continued)		
		Statutory—Old Age Assistance, etc. (Continued)		
		STATUTORY—DISABLED PERSONS ALLOWANCES—PAY- MENT OF FEDERAL SHARE OF ALLOWANCES (CHAP. 55, STATUTES OF 1953-54, AS AMENDED).....(10)	6,600,000	15,000,000
		Expenditure		
		1965-66.....\$ 14,978,673		
		1966-67.....15,025,452		
		1967-68 (estimated).....7,350,000		
		Total, Statutory Item.....	12,340,000	33,250,000
		Expenditure		
		1965-66.....\$ 45,553,083		
		1966-67.....38,098,983		
		1967-68 (estimated).....19,150,000		
		Statutory—Canada Assistance Plan—Payments to the Provinces (Chap. 45, Statutes of 1966) including residual payments under the Un- employment Assistance Act (Chap. 26, Statutes of 1956, as amended).....(10)	251,900,000	160,000,000
		Expenditure		
		1965-66.....\$ 10,495,587		
		1966-67.....241,144,000		
		1967-68 (estimated).....		
		Statutory—Fitness and Amateur Sport—Pay- ments (Chap. 59, Statutes of 1960-61).....(10)	5,000,000	5,000,000
		Expenditure		
		1965-66.....\$ 2,508,493		
		1966-67.....4,665,769		
		1967-68 (estimated).....5,000,000		
		Vote 45—National Welfare Grants—To authorize, on terms and conditions approved by the Governor in Council, National Welfare Grants to Pro- vinces and Welfare Agencies including Schools of Social Work, and to individuals in the form of scholarships and fellowships		
		General Welfare and Professional Training Grants.....	2,000,000	2,125,000
		Welfare Research Grant.....	450,000	375,000
		(10)	2,450,000	2,500,000
		Expenditure		
		1965-66.....\$ 1,131,748		
		1966-67.....1,278,083		
		1967-68 (estimated).....2,250,000		

Positions (man-years)		Details of Services	Amount	
1968-69	1967-68		1968-69	1967-68
			\$	\$
		B—MEDICAL RESEARCH COUNCIL		
		Approximate Value of Major Services not included in these Estimates		
		Accommodation (provided by the National Research Council).....	10,000	4,000
		Accounting and cheque issue services (Comptroller of the Treasury).....	12,500	11,000
		Contributions to Superannuation Account (Treasury Board).....	13,000	8,000
		Contributions to Canada Pension Plan Account and Quebec Pension Plan Account (Treasury Board)....	1,500	900
		Employee surgical-medical insurance premiums (Treasury Board).....	1,000	700
		Carrying of franked mail (Post Office Department)....	28,000	22,400
			66,000	47,000
		Vote 50—Administration, Operation and Maintenance		
		Salaried Positions:		
		Executive, Scientific and Professional:		
1	1	Chairman, Medical Research Council (\$26,500)		
2		Director (\$21,250-\$23,500)		
	1	Assistant Director (\$18,450-\$21,250)		
1		(\$18,000-\$21,000)		
		Administrative and Foreign Service:		
1	1	(\$10,000-\$12,000)		
2		(\$8,000-\$10,000)		
		Administrative Support:		
3		(\$6,000-\$8,000)		
7	9	(\$4,000-\$6,000)		
1	1	(Under \$4,000)		
18	13			
(18)	(13)	Continuing Establishment.....	177,900	106,200
(—)	(1)	Casuals and Others.....		2,400
(18)	(14)	Salaries and Wages.....(1)	177,900	108,600
		Travel and Removal Expenses.....(2)	6,000	4,800
		Travel—Non-Public Servants.....(2)	53,000	44,500

Positions (man-years)		Details of Services	Amount	
1968-69	1967-68		1968-69	1967-68
			\$	\$
		B—MEDICAL RESEARCH COUNCIL (Continued)		
		Vote 50 (Continued)		
		Telephones and Telegrams..... (2)	4,000	3,300
		Publication of Scientific Journals and Other Material..... (3)	15,000	25,900
		Professional and Special Services..... (4)	35,000	34,000
		Rentals of Office Equipment, Computers and Related Equipment..... (5)	6,000	
		Office Stationery, Supplies and Equipment..... (7)	6,100	6,000
		Sundries and Contingencies..... (12)		2,400
			303,000	229,500
		Expenditure		
		1965-66..... \$ 111,621		
		1966-67..... 155,934		
		1967-68 (estimated)..... 229,500		
		Vote 55—Scholarships and Grants in Aid of Research in accordance with terms and con- ditions prescribed by the Governor in Council..... (10)	26,943,000	20,500,000
		Expenditure		
		1965-66..... \$ 12,250,000		
		1966-67..... 12,350,000		
		1967-68 (estimated)..... 20,500,000		

HOUSE OF COMMONS
First Session—Twenty-eighth Parliament
1968

STANDING COMMITTEE
ON

HEALTH, WELFARE AND SOCIAL AFFAIRS

Chairman: Mr. GASTON ISABELLE

MINUTES OF PROCEEDINGS AND EVIDENCE

No. 2

THURSDAY, OCTOBER 31, 1968

Respecting

The items listed in the Revised Main Estimates for 1968-69,
relating to Consumer and Corporate Affairs.

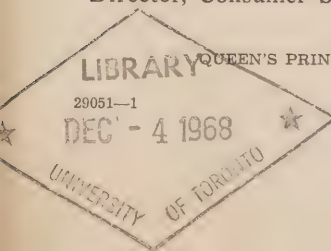
The Hon. Stanley Ronald Basford, Minister of Consumer and
Corporate Affairs,
and

WITNESSES:

From the Department of Consumer and Corporate Affairs: Messrs. J. F. Grandy, Deputy Minister; D. H. W. Henry, Q.C., Director of Investigation and Research, Combines Investigation Act; K. C. Foster, Director of Operations, The Consumer Bureau; Dr. R. W. James, Director, Consumer Research Branch; and Miss Eleanor M. Ordway, Director, Consumer Service and Information Branch.

ROGER DUHAMEL, F.R.S.C.

QUEEN'S PRINTER AND CONTROLLER OF STATIONERY
OTTAWA, 1968



STANDING COMMITTEE
ON
HEALTH, WELFARE AND SOCIAL AFFAIRS

Chairman: Mr. Gaston Isabelle

Vice-Chairman: Mr. Steve Otto

and Messrs.

¹ Alexander,
Forget,
Fortin,
Foster,
Gendron,
Godin,

Guilbault,
Howe,
MacInnis, Mrs.,
McBride,
¹ McGrath,
Osler,

¹ Paproski,
Robinson,
Rochon,
² Saltsman,
Thomas
(Maisonneuve),
¹ Valade—20.

(Quorum 11)

Gabrielle Savard,
Clerk of the Committee.

¹ Replaced Messrs. Monteith, Rynard, Ritchie and Yewchuk on October 28.

² Replaced Mr. Knowles (Winnipeg North Centre) on October 30.

REPORT TO THE HOUSE

The Standing Committee on Health, Welfare and Social Affairs has the honour to present its

FIRST REPORT

Your Committee recommends that it be authorized to sit while the House is sitting.

Respectfully submitted,

GASTON ISABELLE,
Chairman.

ORDERS OF REFERENCE

MONDAY, October 28, 1968.

Ordered,—That the names of Messrs. McGrath, Valade, Paproski and Alexander be substituted for those of Messrs. Monteith, Rynard, Ritchie and Yewchuk on the Standing Committee on Health, Welfare and Social Affairs.

WEDNESDAY, October 30, 1968.

Ordered,—That the name of Mr. Saltsman be substituted for that of Mr. Knowles (*Winnipeg North Centre*) on the Standing Committee on Health, Welfare and Social Affairs.

ATTEST:

ALISTAIR FRASER,
The Clerk of the House of Commons.

MINUTES OF PROCEEDINGS

(Text)

THURSDAY, October 31, 1968
(2)

The Standing Committee on Health, Welfare and Social Affairs met this day at 9.40 o'clock a.m., the Chairman, Mr. Gaston Isabelle, presided.

Members present: Mrs. MacInnis, Messrs. Alexander, Forget, Foster, Gendron, Godin, Isabelle, McBride, McGrath, Osler, Otto, Paproski, Robinson, Saltsman, Thomas (*Maisonneuve*), Valade—(16).

Other Member present: Mr. Stanley Haidasz, Parliamentary Secretary to the Minister of Consumer and Corporate Affairs.

In attendance: The Hon. Stanley Ronald Basford, Minister of Consumer and Corporate Affairs; and

From the Department of Consumer and Corporate Affairs: Messrs. J. F. Grandy, Deputy Minister; D. H. W. Henry, Q.C., Director of Investigation and Research, Combines Investigation Act; K. C. Foster, Director of Operations, The Consumer Bureau; Dr. R. W. James, Director, Consumer Research Branch; Miss E. M. Ordway, Director, Consumer Service and Information Branch; and other officials.

The Chairman informed the Committee that the Hon. Waldo Monteith, Messrs. Knowles (*Winnipeg North Centre*), Fortin and Robinson were appointed to the Subcommittee on Agenda and Procedure to act with the Chairman and the Vice-Chairman.

The Subcommittee's First Report was presented as follows:

"The Subcommittee recommends:

1. That the Committee meet twice a week on Tuesdays and Thursdays, starting October 31st;
2. That the meetings be held at 9.30 a.m. or 10 o'clock a.m. provided no time limit is set; otherwise, that they be held at 11 o'clock a.m.;
3. That the estimates referred to the Committee be considered in the following order: a) Consumer and Corporate Affairs; b) Medical Research Council; and c) Central Mortgage and Housing Corporation."

Agreed,—That the First Report of the Subcommittee be adopted.

On motion of Mr. Robinson, seconded by Mr. Forget,

Resolved,—(unanimously) That the Committee seek leave to sit while the House is sitting.

The Committee proceeded to the consideration of the items listed in the Revised Main Estimates for 1968-69, relating to Consumer and Corporate Affairs.

Vote No. 1—Departmental Administration \$907,400 was called.

The Minister made a statement. Copies of the Organization Chart of the Bureau of Consumer Affairs and a news release dated October 28, 1968, concerning the reorganization of the Consumer Affairs Branch were distributed to the Members.

The Minister, assisted by Messrs. Grandy, Henry, Foster, Dr. James and Miss Ordway supplied information to the Members.

Item 1 was allowed to stand.

At 11 o'clock a.m., the Committee adjourned to 9.30 a.m. Tuesday, November 5.

Gabrielle Savard,
Clerk of the Committee.

EVIDENCE

(Recorded by Electronic Apparatus)

Thursday, October 31, 1968.

● 0939

The Chairman: Mrs. MacInnis and gentlemen, I now see a quorum and the Chair is ready to proceed. First of all I wish to announce the names of the members appointed to the Subcommittee on Agenda and Procedure. (See Minutes of Proceedings)

● 0940

The Subcommittee met last Thursday and has agreed to present the following as its first report. The Subcommittee recommends:

(See Minutes of Proceedings)

The Chairman: Is it agreed that the report of the subcommittee be adopted as read?

Some hon. Members: Agreed.

The Chairman: I must point out that the co-ordinator scheduled a meeting on Justice and Legal Affairs at 11 o'clock today in this room after arrangements were made to have the Minister appear before us at 9.30 o'clock this morning.

There is another announcement that I should make at this moment. The All Party Co-ordinating Committee met yesterday afternoon and agreed on a schedule of Committee meetings, some of which will be in the afternoon and evenings. This can only be done after permission is obtained from the House to sit while the House is sitting. As there are too many committees sitting at the same time we will have to sit at a time when everybody will be satisfied. That is why they have decided that our committee will sit on Thursday night between 8 and 10 o'clock; and there will be another meeting on Tuesday from 9.30 until 1 o'clock.

I will require a motion that this Committee seek leave to sit while the House is sitting.

Mr. Robinson: I so move.

Mr. Forget: I second the motion.

Motion agreed to.

The Chairman: I will now call Vote number 1 of the Department of Consumer and Corporate Affairs.

Consumer and Corporate Affairs

1. Departmental Administration \$907,400.

The Chairman: I will be very brief in my remarks and also in my introductions. I would like to welcome the Hon. Ron Basford and the officers of his department. The Minister will make a statement and then answer your questions.

Hon. Stanley Ronald Basford (Minister of Consumer and Corporate Affairs): Mr. Chairman, honourable members, may I first introduce my officials to the Committee. I have most of the Department of Consumer and Corporate Affairs here with me this morning.

My Deputy Minister, Mr. J.F. Grandy is on my immediate right. With him is Mr. D.H.W. Henry, the Director of Investigation and Research. Mr. Henry has with him Mr. J.J. Quinlan, Mr. F.C. Gascoigne, and Mr. I.W. Haig from the Combines Branch. From the Consumer Bureau I have Dr. R.W. James, Director of Research, Mr. J. L. Catley and Mr. K.C. Foster. On the Corporate side I have Mr. A. M. Laidlaw, Q.C., from the Patent and Copyright office. With him is Mr. R.E. Thomas, Mr. M. Robitaille from Trade Marks Branch, Mr. R. Landry and Mr. J. B. Brazeau from the Bankruptcy Branch, Mr. Landry being the newly appointed Superintendent, and Mr. L. Lesage from the Corporations Branch.

We have in the Department two assistant deputy ministers, Mr. Roger Tassé on the Corporate side who is in Halifax attending a meeting, and Mr. G. F. Osbaldeston on the Consumer side, who is attending a provincial meeting this morning.

● 0945

As a new minister, Mr. Chairman, with a relatively new department—a department charged with some rather new and exciting tasks, I and my officials welcome the oppor-

tunity of appearing before this Committee to speak of the various responsibilities we have. It is a tempting opportunity to speak at great length. I hope that I will not, but when I look at what I have prepared I think I will be speaking at some length. I could very easily be carried away with my own enthusiasm for this Department's functions, for the conscientious and able officials who staff it and, above all, the thrust that we are making into new areas of government endeavour. I realize however that my main task today is to render account before the Committee for the principal undertakings of the Department, and I shall do this as briefly as I can.

Before proceeding to a more particular review, however, I should provide a backdrop against which examination might be easier, and re-state briefly what I consider to be the rationale of the Department. As the name "Consumer and Corporate Affairs" suggests, the Department has a dual nature. In the economic sense, its activities are aimed at both the demand and supply sides of the market; on one hand, it enforces federal laws that regulate business which supplies the goods and services, and on the other, it supports and protects the consumer in his role as the creator of demand for those goods and services. In a social sense, it is implicit in this idea that there will be just and fair treatment for all citizens of our country, whether they make their impact on the demand or the supply side of the marketplace, whether they are consumers or businessmen.

The Department was, in fact, created in the belief that the market is *not* always fair and just to the consumer or investor and that it does not always operate to the economic benefit and general welfare of Canada. The steps taken as the Department becomes fully operative will, I believe, take us a long way into a more just marketplace.

But let me turn now to the more particular, so that I can identify more clearly some of the precise steps taken towards the implementation of this general objective.

Functionally, the Department comprises three Branches: Consumer Affairs, Combines and Corporate Affairs. I shall deal with them in that order.

As you are undoubtedly aware, shortly after the formation of this government, the Prime Minister announced transfers to the Consumer Affairs Branch of units concerned with consumer protection that were located in other departments. Included in the transfer were

the whole of the Standards Branch from the Department of Trade and Commerce, the retail inspection services of the Departments of Agriculture and of Fisheries, and that part of the retail inspection service of the Department of National Health and Welfare concerned with economic fraud in the sale of food.

A simple transfer of resources would not have achieved what our objectives were. What was needed was a complete overhaul of the organization of consumer protection services at the federal level, and this is now being done. We now have within one branch of government the majority of activities related to consumer information, standards, research, field services and enforcement. What is more, Mr. Chairman, re-organization has given a clear voice to the consumer in government, a voice that was not clearly recognized in the past. I announced this re-organization at the Federal-Provincial Conference which began on Monday. I have here copies in English and in French of that press release, with the Organization Chart of the new Consumer Bureau, if the members want it.

Mr. McGrath: I think it would be very helpful.

Mr. Basford: I am happy to state that another important step in the same direction is very imminent. I refer to the appointment of a Canadian Consumer Council, about which I have been asked in the House. The Council will be created to advise the Minister on matters related to the interests of the consumer in the Canadian economy, especially as these may be affected by public policies in the field of consumer affairs; to advise the Minister on such matters as he may refer to the Council for its consideration; to study, and where necessary, recommend changes in Government policies and programs affecting consumer affairs; and to foster and promote better channels of communication between producers, sellers and consumers.

• 0950

The Council will be composed of approximately twenty-five members and will be broadly representative of the community. These appointments, which are not full-time, do not carry any remuneration and people will be doing it as a labour of love or of interest. I should also mention that the first Federal-Provincial Conference of Officials on Consumer Affairs, which I mentioned a

moment ago, was held here during the last three days. The purpose of this Conference, which adjourned last night, was to review on-going federal programs designed to protect the consumer and to explore with the provinces areas of further co-operation. It is hoped that a meeting of ministers will be convened early in 1969 to consider proposals developed at the Officials' Conference of this week.

In addition to convening this series of conferences, on two separate occasions officials of my Department have visited each of the provinces and talked with their officials.

I hope these actions will clearly indicate my genuine desire and the desire of my officials to work in the closest possible co-operation with the provincial governments in our effort to further the consumers' interests.

Although in its present form the Bureau of Consumer Affairs is still a young organization, it has already gathered considerable momentum. One of its essential functions, as envisaged some time ago, was to open up channels of communication between buyer and seller, to assist consumers in their efforts to receive full satisfaction, and to work towards the goal of a better informed consumer.

To this end, we established an easily remembered mailing address: "The Consumer, Box 99, Ottawa", to which consumers may write about their problems or for information.

And I neglected to introduce and I will now at this point, Miss Eleanor Ordway, who is from the Consumer Bureau. Those who have any questions on Box 99, I am sure Miss Ordway would be delighted to answer them.

I am happy to say that many consumers have already made use of this important service. Similarly, the *Consumer Communiqué*, a monthly publication of the Branch, will cover a wide range of subjects, including consumer legislation, government activities in consumer affairs, trade practices and advice on actual shopping methods. And I believe as members, you have already received some of the early editions of this communiqué.

Before leaving the consumer side, I feel it is important to reiterate my intention of re-introducing, in the near future, a bill to permit the prohibition or regulation of hazardous products. Such a bill, if enacted, would provide measures to prohibit the sale of hazardous products, such as the infamous "Hong Kong ice-balls" which some of you may remember. It would also permit the regula-

tion or sale of products that present an undue hazard to consumers.

Now, hon. members, I would like to turn briefly to the Combines Investigation Branch under the direction of Mr. Dave Henry. I attach great importance to this area of my responsibility because I believe this Act is the chief arm of Canada's competition policy. It seeks to maintain free and open competition as a prime stimulus to the achievement of maximum production, distribution and employment in a system of free enterprise. It seeks to eliminate restraints upon trade that served to prevent our economic resources from being most effectively used.

During the sixties the work of the Branch has been hindered by the scarcity of professional staff. This was the result of the relative scarcity of recruits trained in law or economics, and the considerable rate of turnover experienced. This turnover was occasioned mainly by persons in the junior grades leaving to resume their studies or to accept what they considered to be more attractive positions. The relative scarcity of recruits led to lower requests during this period for increased establishment to investigate the backlog of incompleting inquiries which had been building up, as it was recognized that no useful purpose would be served by requesting increases beyond the ability of the staffing authorities to provide. Considerable progress has been made during the last few years, both in connection with the authorization of increased establishment and in the recruiting of new staff. Nevertheless, there is still a shortage of qualified personnel, and a large proportion of the staff are in the stage of acquiring the training to allow them to carry out their duties with confidence. There continues also to be a slow drain of experienced personnel leaving the Branch to advance their careers faster than our establishment will allow. This has a particularly undesirable effect upon the operations of the Combines Investigation Branch because of the long-term nature of many of the inquiries. Unless a professional officer remains with the Branch for a considerable length of time he does not have the opportunity to make an important contribution. Accordingly, the need for recruiting and training additional staff remains a very pressing problem and plans are in hand for dealing with it in succeeding fiscal periods.

• 0955

The reference of Canada's competition policy to the Economic Council of Canada was

made in July 1966, and it is expected that a report will be rendered by the Council in the first part of 1969. When this report has been received, it is the intention of the government to give the legislation a thorough review and to introduce desirable amendments. Among the important questions that will have to be considered is whether, for example, and to what extent, service industries should be brought within our jurisdiction, or within the ambit of the Combines Investigation Act.

One reform which the Government proposes to introduce this session, without awaiting the Council's report, is the transfer of Section 306 of the Criminal Code, dealing with misleading advertising, to the Combines Investigation Act. This will be brought about by the amendment of the Criminal Code that is contained, or will be contained in the Omnibus Bill to be introduced before the Christmas recess.

At present, the Combines Investigation Act deals with misleading advertising only when it has to do with prices. It is an offence under section 33C of the Act for anyone to make any materially misleading representation to the public about the price at which an article is ordinarily sold. After eight years of administration, in which many prosecutions have been successfully completed, the effectiveness of this legislation has been thoroughly demonstrated. The misleading devices which have been the subject of prosecution have ranged from inflated price labels on mattresses to phony gift certificates on pots and pans. The facts come to the attention of the Director either through regular monitoring of advertising material by his own staff, or complaints made to him by the public, or complaints referred to him by the Consumer Affairs Branch after they have been received via Box 99.

Many other complaints reach the Director from the same sources which have nothing to do with the regular price of an article, but deal with misrepresentations of such aspects as quality, description, source of supply, suitability for the purpose intended and like sort of complaints. Some of these matters appear to be covered by section 306 of the Criminal Code which makes it an offence to publish a statement of fact that is untrue, deceptive or misleading, in order to promote the sale of property or to promote a business or commercial interest. This section of the Code has been scarcely used throughout its history and this may be partly because its enforcement has been the responsibility of the

local law enforcement authorities who have no special machinery or expertise in this matter. Accordingly, when the bill is introduced this session to amend the Criminal Code, one of its provisions will be to transfer 306 to the Combines Investigation Act as section 33D thereof. The result of this action will be to bring the various special procedures of the Combines Investigation Act to the enforcement of the ban. This should go a long way, we feel, towards enforcing truth in advertising and should ensure, we also feel, the interest of consumers in general.

The third broad area of my responsibility is the Corporate Affairs Branch. Hon. members will likely agree that among the several subjects that come under this general heading of corporate affairs, bankruptcy is one of the most important. It is a field that has attracted a wide degree of attention in recent years. Abuses and misuses of the bankruptcy process by inscrupulous debtors contributed to feelings of insecurity in the mind of creditors and to the general loss of confidence in our bankruptcy administration.

Very important steps have been taken to improve this situation and to restore public confidence in our ability to deal with the problem. The most effective measure to be taken in recent years was that of extending the powers of investigation of the Superintendent of Bankruptcy. Since 1966, the Superintendent is empowered to investigate suspected offences to the Bankruptcy Act or for that matter to any other Act of the Parliament of Canada, whenever it appears that this matter might not otherwise be investigated. The statistics available in the Bankruptcy Branch and relating to the investigation and prosecution of bankruptcy offences, in my view, clearly show the important role that has been assigned to the Bankruptcy Branch in this respect.

The Branch has now established regional offices in Montreal, Toronto and Vancouver. In addition to being involved in the investigation of bankruptcy offences, these offices will, starting next January assume the responsibility for the auditing of the trustees' records to ensure that bankruptcies are administered in accordance with the provisions of the Bankruptcy Act, a function that has been performed in the past by the Audit Services Branch in the Department of Finance.

While the main purpose of the setting up of the regional offices was to provide assistance to the Superintendent in carrying out audits and investigations, a most important function

was added recently to these offices. Effective last July 1, a number of officers on the staff of the Superintendent in these offices, were appointed Official Receivers for their respective bankruptcy divisions in Montreal, Toronto and Vancouver. The functions of the Official Receivers are closely related to that of the Superintendent, especially in so far as investigations are concerned, and the integration of these two functions will result in a more efficient and better co-ordinated administration of the Act.

• 1000

Still other steps have been taken in recent years to improve bankruptcy administration in Canada. It is admitted, however, and I am the first one to admit it, that not only do we need stronger, more efficient administration and enforcement, but also new legislation adapted to the present times. This is the task, as some may recall, that has been tackled by the Advisory Committee on bankruptcy legislation. The Committee is now working on a draft Bill completely revising our bankruptcy and insolvency legislation. As soon as this report is received, I will give it my immediate attention in order that we can have a draft bill before Parliament as soon as possible.

In conclusion, Mr. Chairman, there are several other responsibilities and undertakings of the Department for which I could render full account. Much of this is extremely involved, however, and I do not feel the Committee should be required to hear more than a brief comment on some of this.

The work of the Patent and Copyright Office, for example, has increased substantially over the last two years and I should explain this briefly. New patent applications filed during 1966-67 showed no change over the previous year but have shown a substantial increase during the present year. The number of patent applications allowed during 1967-68 increased by 10 per cent over the previous year and although the rate of increase cannot be maintained the total will be higher this year over last year. The number of Copyright applications and Industrial Design applications received and registered showed substantial increases over the previous year and this situation is expected to continue.

A new Patent Act is presently under study by the Economic Council of Canada and it is

anticipated that the Council's findings will be made public some time next year.

In the field of international protection of intellectual property, the Patent and Copyright Office is actively involved with the Patent Offices of other countries in working on problems connected with mechanized information retrieval for search purposes and with a proposed Patent Co-operation Treaty as well as participating in international Patent and Copyright Unions.

The Trade Marks Office is charged with the administration of the registration provisions of the Trade Marks Act which relates not only to trade marks but also to unfair competition.

The number of applications filed with this office has consistently increased year after year. In 1963-64, there were 6,778 applications as compared with the current year of over some 9,000 applications.

While on the Corporate side, I might also mention the Corporations Branch. The workload in this area is increasing constantly, which has the direct effect of bringing more revenue. Committee members will be happy to know. Applications for letters patent and the number of charters handled by the Branch has increased considerably. It is possible that we will reach a revenue of \$1 million dollars for the present fiscal year. However, we cannot make a definite forecast because this is predicated upon factors beyond the control of this Department.

Members of the committee will be aware of the fact that we intend to make important revisions to the Canada Corporations Act during the present Session of Parliament. These will relate to insider trading, takeover bids, proxy solicitation, financial disclosure and investigation on the part of the branch when there is evidence of irregularities. These amendments will be based on the work of the Task Force which has been in existence for the past two years, under the direction of Dr. R. Dickerson. It is also our intention to proceed with a Federal Securities Act. In this regard we have the benefit of the work of a separate Task Force. Our intentions have recently been discussed with provincial officials in a meeting of the Federal-Provincial Committee on Financial Institutions and Securities Regulations.

• 1005

Finally, Mr. Chairman, I should mention the Canadian Committee on Mutual Funds

and Investment Contracts, which was established jointly by the Federal and Provincial Governments, with the Federal Government paying 50 per cent of the cost. This committee is expected to report early in 1969.

Finally, a word on one aspect of overall Departmental administration. As the need for keeping the public informed is an essential responsibility for all organizations in our modern society, the Department decided to create an Information and Public Relations Branch. A primary goal of this departmental Information and Public Relations service is to establish the necessary machinery for the dissemination of information that makes use of the various channels of communication which reach a mass audience.

One objective of this Branch is to develop specific programs and to determine appropriate techniques to reach special, individual audiences. In its first year of operation, the Branch is composed of three officers of the Information Services Group and a support staff of four employees.

In spite of my good intentions, Mr. Chairman, I have made a rather long statement. Now that I have concluded, Honourable Members will, undoubtedly, be able to unearth what has been left unsaid, and I shall be happy to co-operate in this operation, along with officials of the Department who are here with me.

The Chairman: Thank you, Mr. Minister. Because the Minister has a very important cabinet meeting at 10 o'clock this morning we would like you to be precise and short in your questioning. The minister is ready to answer any questions that you would like to ask him.

Mr. Saltzman: I would like to congratulate the Minister on his eagerness to answer questions. I am sure I am just as eager to ask some.

I see that the advertising budget has been increased to sixty thousand and some odd dollars. Is that the total figure, and does it compare to the \$18,000 figure of last year?

Mr. Basford: Yes.

Mr. Saltzman: In view of the fact that the advertising industry recently announced that they anticipate spending one billion dollars on private advertising within the next year or so, which works out to about \$50 per capita to inform and brainwash Canadian people, is it really adequate to consider spending only

one-third of a cent per capita to inform the Canadian public.

Mr. Basford: Mr. Saltzman, I am delighted to have your support for increased estimates. The \$60,000 refers to the work of the information and Public Relation Branch, which has three employees and which is designed simply, as I said in my statement, to work on appropriate techniques of reaching people. That does not include all the information work of the Information and Services Branch under Miss Ordway nor the work involved in connection with Box 99, the issuance of the consumer communiqué and this sort of thing. So the \$60,000 is not the total figure for trying to inform the consumer. That is the point I am trying to make.

Mr. Saltzman: I would like to refer to a communiqué that came out of your Department and to congratulate you on it. It has to do with the sale of rugs. I do not know the exact title of it but you will recall that one. I think it was a first-class communiqué. What disturbed me was this. Although you had excellent information of this type prepared by your Department I felt the information was not being disseminated widely enough in view of the need to do so. For instance, you talk about mass audiences, but going to schools and talking to women's groups, important as these things may be, is not reaching mass audiences. In order to reach a mass audience you will have to consider television programs and prime time. I would like to know from you, Mr. Minister, if you have any plans for talking the useful information that your Department is accumulating and presenting it to mass audiences?

Mr. Basford: We are considering a number of programs and are very conscious of the problem you raised. Part of the Federal-Provincial Conference was devoted to consumer information work; both the federal and provincial officials are concerned about this and are looking at ways of reaching mass audiences. To show that I appreciate what you are talking about, on a recent visit to Vancouver I was interviewed on the Jack Webster show—I think you are familiar with that show—which is reputed to have 60 per cent of the radio audience in Vancouver in the morning, but he knew nothing of Box 99 and had never heard of it. We are now working with the information branch on a special program directed to hot-line operators so that they know what the branch is doing or so

that when people phone in they can refer them to Box 99.

• 1010

Mr. Saltzman: I hope you will accept this suggestion, Mr. Minister, that we really have to go much further than that. We have to go on a positive program of consumer information and using the mass media, as other advertisers do.

Mr. Basford: Yes, I would agree. All of this is terribly expensive and we have had a number of proposals put to us for developing radio clips and television clips to send out to the stations. I think in the next fiscal year we will have some expenditures in this regard.

Mr. Saltzman: Mr. Chairman, I appreciate the fact that you want us to be brief. I just have a final short question. Although I have many other questions I would like to ask, I think I will leave it at this. I will just ask the Minister whether he is in a position to respond to the hint that was thrown out by the Minister of Finance in his budget address to the effect that the Minister of Consumer and Corporate Affairs would be making a statement on price increases and attempts to hold price increases in certain sectors and that there will be selective programs. I am sorry I do not have the exact wording, but I think the general intent is as I have put it.

Mr. Basford: Yes. I will be speaking next week in the budget debate.

Mr. Saltzman: But you are not prepared to make a statement on that today?

Mr. Basford: No. I do not want to destroy my audience in the budget debate!

Mr. Otto: Mr. Chairman, I have some very lengthy questions to ask but all of them can be answered by the gentlemen from the Department, Dr. James and Mr. Henry, and therefore I will pass at this moment for any members who may want to examine the Minister personally, because I know he has to get away. Therefore, I will defer mine until a later time.

The Chairman: Thank you, Mr. Otto.

[Interpretation]

Mr. Thomas (Maisonneuve): May I interrupt one moment Mr. Chairman.

The Chairman: Yes.

Mr. Thomas (Maisonneuve): I thought my ear-phone wasn't working and that my colleague, Mr. Godin, was having the same trouble, but I see the interpreters are also having technical difficulties.

[English]

The Chairman: There is something wrong with the interpretation. We will call a technician.

Mrs. MacInnis (Vancouver-Kingsway): I also wish to congratulate the Minister on having brought some kind of order, a scheme, into this matter of consumer affairs. I really think a great deal has been done to bring other branches into the consumer department, where they belong, and I really think the Minister deserves a great deal of credit and commendations from the rest of us for this.

Perhaps in a sense I am repeating Mr. Saltzman's question here, but I notice—I will say it again because I think it is very important—on page 4 of his report the Minister referred to exploring areas of further co-operation with the provinces. Would he destroy his audience if he indicated whether those areas would include an exploration of ways and means of keeping household essentials from continually rising in price?

• 1015

Mr. Basford: I missed one word in your question.

Mrs. MacInnis (Vancouver-Kingsway): I do not know which one it was.

Mr. Basford: It was just at the end.

Mrs. MacInnis (Vancouver-Kingsway): Whether or not those areas of exploration with the provinces could include the question of trying to keep the basic essentials of household needs within a reasonably stable price range, or would it be asking too much for you to comment on that?

Mr. Basford: As has been said in the House by myself and the Prime Minister, we are concerned with the price performance in the economy over the last few years. A number of federal officials visited provincial premiers, ministers of finance or deputy ministers during the course of the summer and the Prime Minister has met with a number of leaders of both trade unions and business, and I think the Prime Minister said that three weeks from last Friday we are going to issue a statement on price stabilization policy. So, we are concerned about the question you raise.

Mrs. MacInnis (Vancouver-Kingsway): So this would be among further areas to be explored with the provinces in a federal-provincial meeting in the future.

Mr. Basford: No. I am talking about what we will do at the federal level in so far as price stabilization is concerned.

Mrs. MacInnis (Vancouver-Kingsway): Yes, but if you remember, Mr. Minister, in other sessions we have elicited through questioning the information that the federal authority by itself is not competent to deal with the question of price stabilization. Will there be an attempt by the federal government to get this area looked at in conjunction with the provincial authorities?

Mr. Basford: We are going to ask them for co-operation and support for our stabilization policy, yes.

Mrs. MacInnis (Vancouver-Kingsway): But it will not be a joint policy?

Mr. Basford: We hope that they will co-operate on it, yes. Of course, the Minister of Finance will be meeting with the provincial ministers of finance very soon. I would think that this is what you had in mind.

Mrs. MacInnis (Vancouver-Kingsway): Yes, but what I mean is would there be any attempt to get—by a delegation from the provinces to the federal government—some kind of price control over essentials?

Mr. Basford: No.

Mrs. MacInnis (Vancouver-Kingsway): Not at this stage.

May I now ask you a question about the Combines Investigation Act. I am very pleased that there are going to be these amendments in connection with advertising, and on page 5 the Minister refers to the endeavour to maintain free and open competition. In view of the fact that I think there is quite a lot of evidence in the Prairies at least that there is a very heavy concentration of control in the grocery business by the leading two firms in the Prairie cities, and although I know it is felt that under the Combines Investigation Act there is not enough evidence, do they have sufficient power or will they seek sufficient power to try to deal with that situation?

Mr. Basford: Within the limits of its resources, the branch is investigating and,

where possible, charging anyone on the Prairies or anywhere else where there is an offence under the Combines Investigation Act. For example, I revealed the other day that they were conducting an investigation of a major chain in a Prairie city.

The Combines Investigation Act, as the Director explained in his annual report, is really not equipped to deal with concentration. They are studying it, they are aware of where areas of concentration exist, but we have not been effective in trying to prevent it. This is why the whole question was referred to the Economic Council of Canada. I expect they are devoting a great deal of attention to this very problem of the concentration of market power—regionally, if you want, or nationally—and how best this can be dealt with within a new combines act.

Mrs. MacInnis (Vancouver-Kingsway): Then it is not your intention in the introduction of the new amendments next year to seek to incorporate the power to gather further evidence or investigate federally through the Combines Investigation Act.

• 1020

Mr. Basford: The Combines Investigation Act is—and possibly the Director could give you a more complete answer than I could because it is spelled out in his annual report—presently studying this matter. For example, they have made a major study of mergers and they are studying concentration within the manufacturing industries. Those are their research projects.

Mrs. MacInnis (Vancouver-Kingsway): Yes, but you are not ready to go beyond the research to the machinery for prosecution?

Mr. Basford: Concentration *per se* is not an offence under the Act. The Director cannot charge someone unless it is—

Mrs. MacInnis (Vancouver-Kingsway): Yes, but that is exactly my question. Is there an intention to make it an offence under the act by amendment?

Mr. Basford: Oh, I see. The policy is quite clear. The previous government and the previous minister stated this. The late Mr. Favreau stated this, and I say it, that it is not the government's intention to engage in piecemeal amendments to the Combines Investigation Act until we have the report of the Economic Council, at which time we will look at the whole Combines Investigation Act, and I

would anticipate introducing a major revision to the whole act. This is why I said that I would expect and certainly hope that the Economic Council is looking at the question of concentration and how it can best be dealt with under a combines act.

Mrs. MacInnis (Vancouver-Kingsway): Thank you, Mr. Chairman.

Mr. McGrath: Mr. Chairman, I wonder if I could ask, if it is your intention—I understand the Minister has to leave—to proceed in his absence with the examination of the Estimates?

The Chairman: The Minister will stay until 11 o'clock.

Mr. McGrath: The Minister referred on page 2 of his statement to the Department becoming fully operative. Could he tell us when he anticipates the Department will be fully operative?

Mr. Basford: That refers to the reorganization which, as was announced, will become effective November 1. Then following that, we will have to get people moved around into the right places and get our field officers established in our regional offices. I do not know—I cannot give you an estimate. Maybe one of my officials might.

Mr. J. F. Grandy (Deputy Minister): Could Mr. Fawcett just explain what administrative steps need to be taken.

Mr. M. W. Fawcett (Corporations and Securities Task Forces): Mr. Chairman, effective tomorrow I become the director of operations for the new consumer bureau. One of my first tasks—I hope to start actually this afternoon—is to work with the Public Service Commission in recruiting five regional managers who will be taking over the five regions that were announced as part of the organization by the Minister on Monday. These regions will be the Prairie region with Winnipeg; British Columbia with Vancouver; Ontario with Toronto; Quebec in Montreal, Head Office; and the Maritimes with Halifax. At the present moment we are taking over approximately 70 or 71 offices that are in existence from the four units that are being transferred to us. I am asking the present departments to carry on as is, for a short time, and I would hope that it is not more than six to eight weeks, until we achieve the objective of hiring the five regional managers. At this point we will then sit down with the

present managers and decide what operations we will follow in the future. We have essential services that must continue in the field of inspection in agriculture, in retail inspections, services that the Minister outlined in his speech, and these we must continue. We hope that we can train and retrain the inspection staff which now numbers approximately 550 persons across Canada. We hope that we can make them ambidextrous, so that the men now in agriculture will be able to do health and welfare work, Standards Branch work, and so on, and conversely that we can train the Standards Branch inspector to do other types of work. We think that we will achieve economies. For example, in Toronto at the present time we have five offices, five different physical locations, with five groups of inspectors doing five different jobs. We hope to combine them all in one office, and we hope that one inspector can now go out in a particular area and perhaps do three or four types of inspection rather than have four men going out doing four different parts of that. I am too new to be certain of all my facts because I have not had the opportunity to go out into the field. I want to do that in November, to actually see what the men are doing and to find out what part of their work can be combined to give it the maximum efficiency. Certainly I would hope that by early January we would be really operating from our own bureau and be in a position to start giving direction to all the field staff.

• 1025

Mr. McGrath: I asked that question, Mr. Chairman, because the charge has been made that this department is merely window dressing; it is not really tackling the problem at all. But in all fairness to the Minister and the new department, I do not see how we can usefully examine the department until they have had a full year of operation under their belt and see how effective they really are. For example, I would like to know if there was any consultation between the Minister and the Postmaster General prior to the increase in second and third class mailing rates, which would certainly have the effect of increasing the cost of advertising, which will ultimately be passed on to the consumer.

Mr. Basford: Yes, of course I am a member of the cabinet and enter all cabinet decisions. Of course in any government, one objective has to be balanced against another. The objective here was to make the Post Office financially self-supporting, which of course

has been explained. With that objective I agree, but I think that I should mention, Mr. McGrath, the statute establishing this department places upon me and my officials the obligation, within government, to represent the consumer, and this we call our representational role. It is one we take very seriously. I think it is one of the less public, and in fact most of our activities there cannot be public because they are around the cabinet table. But I think it is really one of its most important functions. Things going through government are being looked at, many times I think for the first time, in the light of what they do for the Canadian people?

Mr. McGrath: Perhaps the Minister will throw a little light on this next question, Mr. Chairman. Early in September, and late in September, there were a number of questions asking the Minister when he would be in a position to announce the appointment of the consumers advisory council. We were hoping that this council would be set up by now because, since the chairman was appointed as far back as July, it seems to be unreasonable that he cannot find up to this time people who are prepared, or who are suitable in his estimation, to serve on the council. I wonder if he could tell us perhaps when he can make a statement on when the council will be appointed, because here is an area in which, I believe, the council could be effective in looking into the business of the increased cost of advertising, which will, as I said, be passed on to the consumer as a result of the increases in the tariffs on second and third class mail.

Mr. Basford: I share your disappointment in not having announced the council yet. I had hoped to announce it earlier. I would now expect to announce it next week. And I think the council can be a very valuable instrument in the consumer field. Having worked now at the appointment of this council, I have great sympathy for the Prime Minister who has to form a cabinet within a week.

Mr. McGrath: Surely these are volunteers, unpaid personnel, representative of a broad cross-section of the country. With the advice and the help of his colleagues in the caucus and the cabinet, one would expect that these appointments would have been made earlier. However, I was wondering Mr. Chairman, if the Minister could throw any light on the Federal-Provincial Conference on consumer problems, to which he referred briefly in his statement.

Mr. Basford: I do not think I can in a way that you probably want, Mr. McGrath. As I said in the House the other day, and as I announced earlier, the conference, dealt with areas of consumer credit, consumer protection, and trade practices. It was an officials' conference; it was an extremely successful operation, and certainly very worthwhile. I said in the House the other day that it was not the practice and that by agreement between the governments no firm communiqué would be issued at the end. The reason for that is that it is an officials' conference rather than a ministers' conference.

• 1030

They did come to substantial agreement that a ministers' conference would probably be held in January of 1969. The reason that I cannot say much more than that is, of course—and I go back to it—that there are officials meeting.

In many areas it was an exploratory conference and many of the matters they discussed were exploratory; and the officials came without instructions from their governments. Therefore, they are not able to commit their governments to any policy, or even to a statement. It is not an attempt to hide anything. The reason is that it is an officials' meeting.

Mr. McGrath: That is reasonable.

You referred to the area of consumer-credit, and Mrs. MacInnis talked about the conflict in jurisdictions there. I presume that one of the main functions of this conference is to establish your terms of reference on how you can go about it, because it is going to be difficult for this Department to be effective, as I think Mrs. MacInnis suggested, in areas where you come into conflict with provincial jurisdiction. Do you expect to have any problems in this particular area?

Mr. Basford: I do not anticipate problems of lack of co-operation. I think we will be able to delineate fairly precisely those areas which we will look after and those which the provinces will look after; and dealing with consumer-credit, which governments should be amending what acts or passing new acts. I am optimistic of a very high level of co-operation.

Mr. McGrath: I have one more question, Mr. Chairman. Certain provinces are very sensitive about their sovereignty and jurisdic-

tion. Have you had any problems with the Province of Quebec, for example, in this area?

Mr. Basford: No.

Mr. Otto: Mr. Chairman, I am glad that the Minister has had another few moments. He has said that they are going to consider new legislation in the three fields of bankruptcy, corporate affairs and, I believe, combines and monopolies. It would not be too useful to examine these Estimates except to ask whether this Committee is going to have a chance to contribute its ideas, or to question your Department and yourself before the enactment of the new legislation?

Obviously, once we have dealt with these Estimates there is no way in which we can get you and your administration to come back before the Committee. Once the legislation is on the books, as I said before, we are in the position of the three kings—we can stand in the doorway and admire, but there is not much we can do because the miracle has already happened.

Is there going to be an opportunity for this Committee to discuss with you ideas in these three fields before the new legislation is brought down?

Mr. Basford: We are in a difficult position to discuss our ideas with you. I would be happy to provide an opportunity for discussing your ideas with us.

Mr. Otto: That, of course, is most important.

Mr. Basford: Because I have not seen the legislation in these three areas I am not able to make a decision on whether or not any of it should be referred to a committee, or to which committee.

• 1035

The Bankruptcy Act is a very important Act which affects a great many people and many, many businesses. I would think that it would be referred to a committee, particularly in view of the fact that it is a major revision. Whether it would be this committee, or the committee on economic policy, I do not know. That is really not my decision. On any piece of legislation we have to make the decision whether it should be dealt with in the House as a whole or in a committee.

Mr. Otto: The reason for my question was that before the passing of these estimates we

obviously have the opportunity of exploring all these avenues with you, but sometimes it can be arranged in another way, rather than holding up the estimates until all of the ideas are explored.

Relative to the proposed legislation on combines, you are aware, Mr. Basford, that other countries—Japan in particular and Germany to some extent—have two policies, one affecting combines and monopolies within the state and another, entirely different, for export and external affairs. For instance, in Japan specifically it is government policy, in co-operation with industry, to allow a combined effort so that a certain industry can go into the field of export in a particular product.

Is it your intention, therefore, in your ideas on combines, to distinguish between these two fields; that is, the field affecting Canada and Canadians and the field affecting export and trade?

Mr. Basford: I come from an exporting province and I know exactly what you are talking about and the kind of representations we receive from industry on what they should be allowed to combine for the purpose was amended in 1960 to allow people to combine for the purposes of export trade. I think I have stated the amendment correctly.

To date I think the director has had six inquiries on how to use this section. This to me, is a pretty disappointing performance by Canadian industry which has said that it should be allowed to combine for the purpose of export trade. The Act was amended, but they seem to have exhibited very little interest in this section.

Mr. Otto: The reason for my question is that among my acquaintances in industry there is great hesitancy to accept this idea because they are not quite sure of what the Government's position will be.

As you know, industry cannot be, and is not, stratified entirely for export and domestic use; it is a combination of the two. Consequently, they are always "leary" about the infringement of one field upon another. This has been the context of my conversation since about 1961-62.

Will the Act be clarified to the extent that it does not apply to any industry engaging in production for export.

Mr. Basford: I think that industry's comment in that regard is a little unfair. The director has for a number of years made very clear what he calls—and it is outlined in his

annual report each year—his program compliance, by which any group contemplating action that they think may fall within the ambit of the Combines Act is invited to come to Ottawa and talk with Mr. Henry and find out his view on it.

Therefore, industry has no excuse for sitting around its boardrooms and saying, "We cannot do this because we think we are going to run into the Combines Act." All they need to do is get into an airplane and come here and talk with Mr. Henry to find out whether or not what they intend to do is illegal.

As I say, under the amendment allowing them to combine for export purposes we have had six inquiries, or about that.

Mr. Otto: It is just unfortunate that your remarks of a few moments ago cannot be given national publicity. I think they would have a great effect on the situation.

My next question relates to Dr. James and his field of research. I understand that Dr. James is in charge of research for the Department?

Mr. Basford: Yes; in the Consumers Bureau.

Mr. Otto: Just in the Consumers Bureau?

Mr. Basford: Yes.

Mr. Otto: I see. In other words, Dr. James and his department do not have anything to do with the fields of bankruptcy, corporate affairs, and so on?

Mr. Basford: No.

Mr. Otto: Do you have a special research division for those departments?

Mr. Basford: No; not specifically designated. I have people in the branch upon whom I can rely quite heavily; and some years ago Mr. Henry set up an academic advisory committee with which to consult on the matter of combines. In the case of other pieces of legislation, as, for example, bankruptcy, which you mentioned, we have the special committee revising it. This committee is composed of my Assistant Deputy Minister, the now Superintendent of Bankruptcy who is, and was, the secretary of the Committee; but he was made the secretary when he was Dean of Civil Law at the University of Ottawa and, when he became Superintendent, remained secretary of the committee; Mr. Honsberger from yesterday, who is a well known expert

on bankruptcy practice, and one other member.

• 1040

Mr. Otto: The reason I ask is because you stated, "to protect people from unscrupulous debtors". I am wondering whether you have a good research department that might investigate this whole field of bankruptcy and possibly come up with results that might show the unscrupulous debtors may not be the only culprits but they may also be the unscrupulous trustees, the unscrupulous lawyers?

Until you have a department or someone to investigate this fully and to take a thousand or two thousand cases and go over them, how can you make this type of presumption? This is why I am asking whether you have a department or a staff or personnel who can investigate this whole field carefully, not on a presumption but what are the facts of it.

Mr. Basford: Within the Bankruptcy Branch we have an investigation staff and this whole procedure has been very much upgraded over the last two or three years and I am very pleased with the progress that has been made. You recall as well as I some of the scandals of some years ago. I think that situation has been changed very markedly.

For example, our policy on the appointment of trustees has been very radically changed and it is now extremely difficult to become a trustee in bankruptcy. They must go before a panel board of examination. They must meet all sorts of requirements and we are turning down—I do not want to give an off-the-top statistic—but I would say we are turning down 9 out of 10 applicants, I believe—two-thirds, anyway.

Mr. Otto: All these are to the good, Mr. Minister. What I mean to suggest is that with some factual knowledge of what actually transpires, you might come to the conclusion that it would be better to set up a branch of your Department that will administer bankruptcy situations.

In other words, I am not saying this is going to be the result but I am saying that if you do have the staff, as you say you do, I hope you will come to some conclusions based on fact and not on presumptions, because all of these statements that were made prior to this seem to suggest that there is one culprit and he is the fraudulent debtor, and so on, and in many cases this is not the case.

My next question to Dr. James is, what is the size of your staff?

Dr. James: The establishment for the Consumer Research Branch is six professional people and four or five support staff.

Mr. Otto: When you speak of professional people, are these people who have had a fair amount of experience in research?

Dr. James: This is so, yes.

Mr. Otto: Were most of these in applied research, that is to say, market research? Is that the qualification you look for?

• 1045

Dr. James: Economic research and statistical research as well as a general background in consumer problems rather more than in market research, strictly speaking.

Mr. Otto: Could you give me an idea, then, of what the current project is they are working on? They are a research department. What have they been instructed to do at the present time in this whole field of research?

Dr. James: Mr. Chairman, one of the principal tasks that the group has had over the past several months in the preparation of background material relating to the recently concluded Federal-Provincial Conference. This has meant that they have been very heavily involved in preparation of papers on various aspects of consumer credit, consumer protection, and trade practices. They are engaged in various special projects from time to time, one of the most significant being in the general area of hazardous products.

Mr. Otto: In other words, you are saying that up to the present most of your Department's energies have gone into preparation of briefs and papers—background papers for these conferences and the organization of this Department. Mr. Saltzman brought up a point. As you know—and Mr. Minister did too—apparently the many avenues that are available to the general public are not yet known.

Dr. James, you know that we do have readership service, research organizations, television; in other words, all fields of the advertising of the promotional media are covered by private agencies specializing in that field. Has your Department ever considered using either a readership service or a market research organization to find out the best avenues of

informing the public of their rights under this Department?

Dr. James: We have had numerous discussions with various market research agencies but so far the need for us to use their services has not been very evident. We understand what they have available and we have assembled a good deal of information about the kind of sampling work they do and the facilities they could make available to us, but up to this point we have not found it necessary to approach the Canadian public on a broad basis to ask for their attitudes on any consumer problems. We have relied instead on voluntary submissions from the public which are submitted to Box 99 or direct to the Minister or his staff.

Mr. Otto: Mr. Chairman, I have hundreds of questions but I think I have had my share for today, so I will just close. Thank you, Dr. James.

The Chairman: I must also point out that perhaps it would be better to direct your questions to the Minister rather than the officials because they will be back with us later on so you will have plenty of time to examine them. Mr. Alexander?

Mr. Alexander: Thank you, Mr. Chairman. I was very interested in the statement made by the Minister in reply to a question put by the hon. member, Mr. Otto, when he indicated that all that industry has to do is to fly down to Ottawa and your Department would be prepared to give a legal opinion on whether their endeavours are going to be legal or not.

• 1050

Now, did you really mean that? It has been my experience, limited at that, that several government departments are very hesitant about giving legal opinions as to the particular function that the individual or corporation intends to carry on.

Mr. Basford: Well, Mr. Alexander, I do not think I used the expression "legal opinion". I said that any industry was free to come and talk to the Director under the Combines Investigation Act and outline its proposals to him and he would advise them whether those proposals were such that he would feel inclined to take action under the Combines Investigation Act, which is a little different from saying it is a legal opinion.

Mr. Alexander: Perhaps I misinterpreted your word, but I thought you used the expression as to whether it is legal or not—the endeavour.

Mr. Basford: Often, of course, there are many areas of the Combines Investigation Act that are rather grey, and often the Director himself may be in some doubt. The answer then would be, "I have doubt whether this is within my ambit, but it would seem to me that I should investigate it"; give that sort of answer at least.

Mr. Alexander: Yes, I would certainly think that. Of course, I have perhaps interpreted...

Mr. Basford: But industry is entitled to come and if, in the view of the Director of the Combines Investigation Act, what industry or the applicant or person is contemplating is not within the Combines Investigation Act he will be told so.

Mr. Alexander: I see. Well, this, in effect, is really his giving a legal opinion.

Mr. Basford: That is your word, not mine.

Mr. Alexander: Yes, all right. Mr. Minister, if I may just refer you to a statement that you made, I think when you were referring to the Combines Investigation Act you said there would be additional staff required plus training. I wonder whether you could elaborate on that? Has this to do with the transfer of section 306 of the Criminal Code over to the Act, or does this involve some other area?

Mr. Basford: Oh, no; it involves the Branch generally. You cannot take a fellow out of law school, say, and put him in the Investigation and Research Branch and think that he is going to know everything about combines and the procedures, or an economist the same way. I do not know whether Mr. Henry wants to add to that.

Mr. D. H. W. Henry (Director of Investigation and Research): That is perfectly correct. We have really two thoughts in this question, Mr. Chairman. One is that it will certainly be necessary to increase the staff for section 306 when it is transferred and, of course, at this stage preparation is going on with a view to being ready to do that.

That is a separate matter from our over-all requirements and I would perhaps give you an idea what we regard as the magnitude of

the increase that is necessary if I were to tell you that over the next five years it will be our submission to the Government and the Treasury Board that we take on 100 additional staff. That is substantially doubling our staff, because our present establishment is now 102, talking about all employees, of which about half are officers.

Mr. Alexander: I see.

Mr. McGrath: May I ask a supplementary question, Mr. Chairman? Referring to the transfer of section 306 to the combines Investigation Act, what part will the Restrictive Trade Practices Commission play in this particular area?

Mr. Basford: In section 306?

Mr. McGrath: Yes.

Mr. Basford: None at all.

Mr. McGrath: To what judicial body would they appeal, for example?

Mr. Basford: A charge under section 306 would be laid if it were "33B" of the Combines Investigation Act, as I said it would be. It would be a charge, a normal criminal charge, in the Magistrate's Court.

Mr. McGrath: The Restrictive Trade Practices Commission will have no role to play?

Mr. Basford: The areas of appeal would be the normal procedures. Mr. Henry, did you want to add to that?

Mr. Henry: Well, technically perhaps it should be said that once section 306 is in the Combines Investigation Act it would be handled in much the same way as Section "33C" which deals with misleading price advertising.

• 1055

Now, it is perfectly open to the Director to prepare a statement of evidence based on the inquiry into misleading price advertising and to place it before the Commission and get a published report. The difficulty is that under "33C" any charge that is going to be laid has to be laid within six months so, in fact, none of those inquiries do get placed before the Restrictive Trade Practices Commission.

Its role, incidentally, is only to write a report; it is not a matter of an appeal board or anything like that. It has one function only and that is to write a report to explain to the

public what has been disclosed in the inquiry and the reason it is there is to permit the people who are being reported about to state their side of the case before the report is written.

Now, that is what the Commission does, and that is its sole function so far as dealing with the case is concerned.

Section 306 is a slightly different type of thing because it is an indictable offence and we are not under that time limit, you see. It is, therefore, quite possible in an inquiry under Section 306—assuming it is put in the legislation, the effect of which will be to allow us to use all our powers for the investigation—that it would be in the public interest—and this again is a decision for the Director to make in his discretion—to refer the facts of the inquiry to the Commission for a published report, because it could be a type of misleading advertising upon which a public pronouncement ought to be made other than what would come through the case in the courts.

So far as enforcement is concerned, as the Minister has explained, the people who are attacked, if you want to put it that way, have their day in court.

Mr. McGrath: You answered my question. I phrased my question very poorly, but you did give me the answer; thank you.

Mr. Robinson: I have a supplementary here, Mr. Chairman. Do I understand correctly that if section 306 of the Criminal Code is removed the offence no longer is a criminal offence but is merely an offence under the Combines Investigation Act?

Mr. Basford: It is still a criminal offence.

Mr. Robinson: And it would be proceeded with as an indictable offence?

Mr. Basford: Yes.

Mr. Robinson: You mentioned it would be triable before a Magistrate. I am wondering whether you meant it would no longer be an indictable offence, but would be a summary conviction offence?

Mr. Basford: It is an indictable offence. The accused could elect to be tried by a Magistrate but that is all.

Mr. Robinson: He could be tried summarily but it would still be...

Mr. Basford: He could elect to do so, yes.

Mr. Alexander: Mr. Chairman, time is running on and I think I will ask just one more question. Regarding "Box 99," could the Minister tell me the extent of staff, and how effective it has been and if there has been sufficient advertising given with respect to this function?

Mr. Basford: To answer the last part first, I do not know what a description of sufficient advertising can be. When it was started we had a modest advertising campaign in support of it. My officials and I whenever we are interviewed or have occasion to make a statement, talk about "Box 99," which is free advertising, but we have generated, I think, some rather effective free advertising and each time we get some there is a rash of new letters. I know the mail goes up.

Mr. Alexander: This is the part I was getting at, whether there has been a rash of new letters.

Mr. Basford: Yes; this is Miss Ordway's experience and with regard to her precise establishment I shall have her answer this.

Mr. Alexander: Thank you.

Miss E. M. Ordway (Director, Consumer Service and Information Branch): Mr. Chairman, we have 22 on our staff. Nine are professional people, the rest are clerks and stenographers. The number of complaints that we have received to date since the institution of the "Box 99" is 2,200, averaging about 350 a month. The response to "Box 99" has been excellent, and I think consumers across Canada now feel that they have a voice in government and are very pleased with it.

Mr. Alexander: Thank you. Mr. Chairman, my time is running out so I will pass.

• 1100

Mr. Robinson: I notice, Mr. Chairman, a reference to a grant of \$30,000 to the Consumers Association of Canada, and I am wondering how it is proposed that this money will be used. For what purpose is it being granted and is there any suggestion that it may be increased in the future with regard to the kind of work that would be carried on?

Mr. Basford: Well, this is a grant that has been made to the Association for quite some years. I am not sure when it started. Do you know, Mr. Grandy?

Mr. J. F. Grandy (Deputy Minister, Consumer and Corporate Affairs): Probably about three years ago.

Mr. Basford: It was being made before there was actually a department. It is used for the Association's general purposes; it is part of their general revenue, so to speak. They have no strings attached as my Deputy has said. They have made some representations about that grant which we are considering.

Mr. Robinson: I assume they have made representation to have the grant increased?

Mr. Basford: That is a fairly safe assumption.

Mr. Robinson: Is there any suggestion at the present time by the government that the grant should be increased in terms of the kind of work they are doing for the government in this field?

Mr. Basford: They are not doing work for the government. That is not what the grant is for; it is for their general purposes.

Mr. Robinson: Well, indirectly they are assisting the government.

Mr. Basford: Of course, that grant is subject to all the budgetary limitations that all the other items in the estimates are, and this is why I am considering it. As a matter of general principle I want to see as active and

as strong a Consumer's Association as I can. I think, however—and this is not the suggestion of the Consumers Association of Canada—it would be a tragedy if the only source of revenue they had was the Government of Canada, but that would be undesirable from both sides, I think.

Mr. Robinson: I appreciate that, but my point basically was that in our efforts to get the people in the country more involved in government affairs, and in this case consumer and corporate affairs, that this seemed to be one way that we could help to bring government and the people a little closer together.

The Chairman: Thank you, Mr. Robinson. Thank you very much, Mr. Minister. The Minister has to go at 11 o'clock as it was understood before.

Mr. McGrath: Perhaps we should consider adjourning at this point Mr. Chairman.

The Chairman: Yes, but we have one thing to do. Shall Item No. 1 stand?

Mr. McGrath: We have no objection to passing Item No. 1 so long as we can get into the estimates.

The Chairman: I do not want to pass it; I want it to stand. For the purpose of general discussion it should stand till the end. Is that agreed?

Some hon. Members: Agreed.

HOUSE OF COMMONS

First Session—Twenty-eighth Parliament

1968

STANDING COMMITTEE

ON

HEALTH, WELFARE AND SOCIAL AFFAIRS

Chairman: Mr. GASTON ISABELLE

MINUTES OF PROCEEDINGS AND EVIDENCE

No. 3

TUESDAY, NOVEMBER 5, 1968

Respecting

The items listed in the Revised Main Estimates for 1968-69,
relating to Consumer and Corporate Affairs.

WITNESSES:

From the Department of Consumer and Corporate Affairs: Mr. J. F. Grandy, Deputy Minister; Mr. R. Landry, Superintendent of Bankruptcy; Mr. Roger Tassé, Assistant Deputy Minister (Corporate Affairs); Mr. D. H. W. Henry, Q.C., Director of Investigation and Research, Combines Investigation Act.

ROGER DUHAMEL, F.R.S.C.
QUEEN'S PRINTER AND CONTROLLER OF STATIONERY
OTTAWA, 1968

STANDING COMMITTEE
ON
HEALTH, WELFARE AND SOCIAL AFFAIRS

Chairman: Mr. Gaston Isabelle

Vice-Chairman: Mr. Steve Otto

and Messrs.

Alexander,
Forget,
Fortin,
Foster,
Gendron,
Godin,

Guilbault,
Howe,
MacInnis (Mrs.),
McBride,
McGrath,
Osler,

Paproski,
Robinson,
Rochon,
Saltsman,
Thomas
(*Maisonneuve*),
Valade—20.

(Quorum 11)

Gabrielle Savard,
Clerk of the Committee.

REPORT TO THE HOUSE

THURSDAY, October 31, 1968.

The Standing Committee on Health, Welfare and Social Affairs has the honour to present its

FIRST REPORT

Your Committee recommends that it be authorized to sit while the House is sitting.

Respectfully submitted,

GASTON ISABELLE,
Chairman.

Concurred in Tuesday, November 5, 1968.

TUESDAY, November 5, 1968.

Ordered,—That the Standing Committee on Health, Welfare and Social Affairs be authorized to sit while the House is sitting.

ATTEST:

ALISTAIR FRASER,
The Clerk of the House of Commons.

MINUTES OF PROCEEDINGS

THURSDAY, November 5, 1968.

(3)

The Standing Committee on Health, Welfare and Social Affairs met this day at 9:40 a.m., the Chairman, Mr. Isabelle, presiding.

Members present: Mrs. MacInnis, Messrs. Forget, Fortin, Foster, Guilbault, Isabelle, McGrath, Osler, Otto, Paproski, Robinson, Rochon, Thomas (*Maison-neuve*) (13).

Other member present: Mr. Stanley Haidasz, Parliamentary Secretary to the Minister of Consumer and Corporate Affairs.

In attendance: From the Department of Consumer and Corporate Affairs: Mr. J. F. Grandy, Deputy Minister; Mr. R. Landry, Superintendent of Bankruptcy; Mr. Roger Tassé, Assistant Deputy Minister (Corporate Affairs); Mr. D. H. W. Henry, Q.C. Director of Investigation and Research, Combines Investigation Act, and other officials.

The Committee resumed consideration of the items listed in the Revised Main Estimates for 1968-69 relating to Consumer and Corporate Affairs.

On Vote 5—Bankruptcy Act—Administration—\$931,100, the Superintendent of Bankruptcy, the Deputy Minister and the Assistant Deputy Minister (Corporate Affairs) answered questions of the members.

Vote 5 was carried.

On Vote 10—Combines Investigation Act—Administration—\$1,354,200, the Director of Investigation and Research supplied information.

The questioning continuing, Vote 10 was allowed to stand.

At 11:22 a.m. the Committee adjourned to the call of the Chair.

Gabrielle Savard,
Clerk of the Committee.

EVIDENCE

(Recorded by Electronic Apparatus)

Tuesday, November 5, 1968

• 0937

The Chairman: Gentlemen, I see a quorum. We will now resume consideration of the items listed in the revised main estimates for 1968-69 relating to the Department of Consumer and Corporate Affairs.

The officers of the Department are available to answer your questions. On my right is Mr. Grandy and Mr. Henry. The balance are officials of the various branches of the Department. As a matter of fact, Mr. Grandy is the Deputy Minister for those who do not know.

5. Bankruptcy Act—Administration
\$931,100.00.

The Chairman: Any questions? Mr. Otto?

Mr. Otto: Mr. Chairman, the Minister has said that he is bringing forward new legislation. I just wanted to ask a question of the gentleman who was present at the last meeting and is in charge of bankruptcy, Mr. Landry. I take it that Professional and Special Services in Item 5 covers the investigation side of that. Is any portion of that used for research into the causes of bankruptcy, the legitimacy or frauds involved in bankruptcy, and what portion of that money is used for research projects in order to advise the Minister in connection with the new legislation in that regard?

• 0940

Mr. R. Landry (Superintendent of Bankruptcy, Department of Consumer and Corporate Affairs): In the amount that you have just mentioned there is a certain portion assigned to pay the Advisory Committee on Bankruptcy Legislation, and this advisory committee has taken for this year, anyway, a small amount of the total amount. On September 30 there was only \$4,607 assigned to this special committee, but this whole amount serves other purposes. For example, special enquiries into the cause of the bankruptcy, the disposition of assets and other causes that may be related to any bankruptcy, and if any

special investigation is necessary we take it from this special item.

Mr. Otto: Mr. Landry, you mention the amount of \$4,607, which is rather paltry considering the important job that the advisory committee has to do. Does the advisory committee have any facilities as far as research is concerned, apart from their own intuition or experience?

Mr. Landry: We have a certain number of scholars working on particular projects. I would like to point out that in 1967-68 the total amount for the Advisory Committee on Bankruptcy Legislation was \$43,000, and sometimes it takes a few months to get the accounts from outsiders who are working on special projects, so the amount I just quoted is as of September 30 and we may expect quite an increase in that by the end of this year.

Mr. Otto: Who is this special advisory committee composed of?

Mr. Landry: The Assistant Deputy Minister of the Department, Mr. Roger Tassé; Mr. John Honsberger, Q.C. of Toronto; Mr. Pierre Carignan, Director of the Institute of Public Law, University of Montreal, and myself as secretary of the Committee.

Mr. Otto: In other words, except for Mr. Honsberger, who has had a fair amount of experience in bankruptcy matters, there is no one here who has been directly associated either as counsel or solicitor or even as a party to a bankruptcy in this Commission. That is why I ask you this in private committee. I understand that prior to this Dr. James had said that his research department does not cover bankruptcy at all. I am asking if you have anyone on staff, if you have a research department or research facilities which can aid this special enquiry?

Mr. Landry: The old bankruptcy branch is continuing to do research on the different bankruptcies that come in. We have statistics that are published every year in the Annual Report which will be submitted very shortly.

Special enquiries that the advisory committee asks me or the former superintendent to make into bankruptcies are made through the branch itself. So, we really have statistical research done within the Department which is not covered by other appropriations for the branch. It does not specifically show the kind of research we are doing. There is no special account for that. It comes out of the general account. So, we are doing research, naturally, through the branch itself.

Mr. Otto: Mr. Landry, your answer reminds me of the reply I have heard so many times about the Dominion Bureau of Statistics being a research department. It is not; it reports facts.

• 0945

Let me put it to you this way. When there is a bankruptcy of any size does your Department always get a report?

Mr. Landry: From whom?

Mr. Otto: From someone.

Mr. Landry: Yes.

Mr. Otto: Who do you get the report from?

Mr. Landry: The trustees.

Mr. Otto: The trustee in bankruptcy.

Mr. Landry: Yes.

Mr. Otto: And has any attempt been made or is one being made to investigate this report of the trustees.

Mr. Landry: Yes. Our people investigate it at the office. We also have the official receivers in Montreal, Toronto and Vancouver, and, since July 1 they have been members of our staff and we get reports from them on the cause of the bankruptcy, the disposition of assets and any other matter which is related to the bankruptcy. The official receiver is entitled on his own, or on my direction, to make any other enquiries or investigations necessary to determine the causes of bankruptcy or disposition of assets.

Mr. Otto: Of each hundred reports, let us say, that come in from trustees, what percentage do you investigate and what percentage do you accept just on the report of the trustee?

Mr. Landry: I think all of them receive a minimum of investigation. At this moment none of them are just filed.

Mr. Otto: Let us get this word "investigation" cleared up. By investigation I mean again checking the facts or the allegations first-hand, not merely reading the report. How many of the allegations or statements made by the trustees are re-checked *ab initio*, right from the beginning again?

Mr. Landry: May I point out, if you would like to know, that at this moment we have 300 investigations going on. These are special enquiries, where we go out of our way to investigate bankruptcies. These are thorough investigations.

Mr. Otto: Yes. My question is are the trustees given sort of a holy word or are they investigated, because what the Minister said and what I said at the last meeting bears some repetition, that it is not necessarily the bankrupt who is greatly at fault; to a great extent it is added to by the solicitors and trustees, who always think that if there is any cash in the pot at all it should be divided between the trustee and solicitor rather than between the creditors. That is why my question is directed to you. What effort has been made? I think you have answered fairly accurately, you said that at the present time there are 300 investigations going on.

I just have one final question. Have you taken any of these investigations to the point of either prosecuting or indicating a trustee, or someone who is looking after the bankruptcy?

Mr. Landry: Yes, indeed. I am told that in 1967 there were 101 charges laid against different people involved in bankruptcies, and this includes trustees and other people.

Mr. Otto: Thank you.

Mr. J. F. Grandy (Deputy Minister, National Health and Welfare): Mr. Chairman, could I add one point? I think one remark of Mr. Otto's might have left a misleading impression as to the competence of some of the members of the advisory committee. I would like to make it clear that Mr. Tassé, the chairman of the Committee, was the Superintendent of Bankruptcy from 1965 until late last year and he was the person who completely reorganized the branch and strengthened it, and I think he has probably had more experience in the administration of bankruptcy than anybody else in Canada and certainly, I should think, knows a great deal about it. I know this was not the impression that Mr. Otto wanted to leave.

• 0950

Mr. Otto: No, Mr. Chairman, it was not the impression I wanted to leave, but I did want to indicate that at times too many of these commissions and special enquiries are composed of people who are mainly concerned with theory. My question was how many people on that enquiry were actually experienced in the practical side. I think Mr. Honsberger is one, and Mr. Tassé, as you have said, has had experience but again it was on the administrative side and not necessarily down deep where the problems occur. Departments would be well advised to choose people on commissions who probably have more experience in the practical side than the theoretical side. Theoretically everything works perfectly, but when it gets down to relationships between individuals one is sometimes surprised at how a cash estate can disappear. In fact, it has been stated by a man who is very famous in litigation matters in Toronto that it does not matter how large the estate is—that is, the bankrupt estate—a good solicitor and a good trustee should make it disappear except for 6 per cent which would be distributed to the creditors and sometimes this is the case. In fact, many times this is the case. Thank you, Mr. Chairman.

Mr. Osler: Mr. Chairman, could I ask for a very quick elucidation of this committee? I do not want to waste people's time but I lost the thing at the point where this advisory committee came up. Could somebody tell me what the function of the advisory committee is and where it comes into this organization, very, very briefly?

Mr. Grandy: This is a special committee that has been established to prepare a complete revision of the Bankruptcy Act. It is a special committee rather like a task force, if you like, doing a special job and when its work is completed it disappears and there will be a report and a draft bill.

The Chairman: Does that answer your question?

Mr. Osler: Yes.

The Chairman: Mr. Landry, do you have any comment?

Mr. R. Landry (Superintendent of Bankruptcy, Department of Consumer and Corporate Affairs): Yes, I should like to correct the bad impression Mr. Otto has left concerning the administration of bankruptcy and especially the dividends that are distributed. From our files, 56 per cent of the assets real-

ized are distributed to creditors, so it is a little more than the six per cent you just mentioned.

Mr. Otto: Well, Mr. Chairman, I have about 13 years of a fair amount of experience with bankruptcy. I am thinking of a case just recently—within the last three years—where, out of \$120,000 worth of claims, \$96,000 was realized in cash. Between the solicitor and the trustee there is now \$16,000 left because they have challenged each and every one of the 100 claims, even if only a \$5 claim, because each claim, each charge, has allowed them to walk away with legal fees.

Now, this is not one case. I can name you dozens. There is the attitude, you must remember, by trustees and solicitors that the creditors have struck this off their books; they have written it off; they do not really care and it is such a nice pile of money sitting there.

Now, it is not bad if the estate is left without cash because that becomes a different problem, but if there is cash involved one is amazed that no matter how much is left one usually winds up with a distribution of about six to ten cents on the dollar for some reasons or other.

Mr. Landry: Well, certainly the Bankruptcy Branch would welcome any specific charges or complaints that you or any one would have on the administration of bankruptcy. I should like to add that since June 5 of this year the Superintendent must receive the account of the solicitor for the estate before taxation. We have started looking into these bills of cost and we have made representation before the taxing officers. We know that in general terms there are problems; there have been abuses of this system and we are looking into it, but we need the co-operation of everyone and we would welcome it.

The Chairman: Thank you, Mr. Landry, Mr. Robinson?

Mr. Robinson: Mr. Chairman, I want to follow on from what Mr. Otto has said, because I share many of his concerns and I am sure many of the rest of us feel the same way. It seems to me, from my limited experience in this field, that many times a person goes into bankruptcy to defraud creditors. I sometimes wonder just to what extent an investigation actually is carried out against the bankrupt and to what extent charges are laid under the bankruptcy provisions. Could we have some indication?

● 0955

Mr. Landry: We received in 1967, 481 complaints concerning bankruptcies and 241 were related to trustees. All these were thoroughly investigated and, as I have pointed out earlier, 101 charges were laid up to this date against either trustees or other persons related to particular bankruptcies.

Mr. Robinson: How many convictions were there of the 101 charges?

Mr. Landry: Some are before the courts at this moment. I could give you definite figures in a few minutes.

Mr. Robinson: Well, I can wait; you can give that answer later. In the meantime, one of the concerns I have is that it seems to be the entrepreneur, the one-man proprietorship, that goes into bankruptcy and there always seems to be just enough money to pay the trustee in bankruptcy and there is never any money to distribute among the creditors.

I have two or three cases of this nature right at the present time that concern me. In one case the same fellow has been in and out of business on two occasions. He has gone bankrupt both times. On both occasions the creditors have lost their money and I am wondering to what extent the Department keeps track of this? Do they keep any statistics at all of the number of people who go into bankruptcy time after time, who venture into business that is never a success?

There is always some scheme or some way of conning the public into putting its money into these ventures. They go sour, they go bankrupt and everyone loses his money. Now, does the Department keep any statistics of this at all? Do we have any way of warning the people to look out for a certain individual or a certain company that may be formed with certain individuals so that they do not prey on the public in this manner again?

Mr. Landry: I should like to answer first in general terms. The Bankruptcy Act, as it is devised now, is under the control of creditors. This is the main principle that guides all the particular sections that we have in the Bankruptcy Act so the people that must be concerned in the first instance are creditors. I should like to add that if an undischarged bankrupt obtains credit to a certain amount without informing the people with whom he is dealing that he is an undischarged bankrupt, this is an offence under the Bankruptcy Act and we will take prosecution action. We

would be ready to take prosecution action in such cases that you or any other people may have.

To sum up, creditors are the first ones concerned. They must be alert concerning the credit they extend to different people and whenever they discover that they have extended credit to an undischarged bankrupt who did not disclose this fact there is something that can be done and should be done.

Mr. Robinson: Are any investigations made into the background of, say, related companies where the same individual is a director of a number of companies when one company goes bankrupt and then perhaps another, and the same person always seems to be involved? I am wondering if there is any follow-up on the other companies to see whether, in this kind of relationship there are assets that can be followed?

Mr. Landry: I should like to point out here that we keep an index of directors of corporations in the Branch which can be useful and from which anyone can obtain information when they are dealing with a new company and when they know who the directors of this company are. We can inform them if a particular director has been a bankrupt or is a bankrupt at the time that the dealings are going through. The second part of your question I do not...

● 1000

Mr. Robinson: Well, what about the situation where, we will say, the bankrupt is in one company as a director, his wife is in another company as a director and then there is some member of the family, perhaps a cousin, in another company as a director? It seems to be in perhaps an isolated venture where they go into the car business and one of them is involved. The car business goes sour and yet the enterprise the family has continues and yet there may be \$100,000 or \$200,000 lost in the car business.

It would seem to me in situations like this that the individual has an interest in these other ventures as well. Is there any follow-up, or any in-depth investigation, of this kind of situation?

Mr. Landry: The Superintendent is authorized by the Act to investigate any bankruptcies in which there are reasons to believe that there have been offences under the Bankruptcy Act or the Criminal Code. This we do and will continue to do.

Perhaps you are referring to the civil side of the matter. In 1966 amendments to the Bankruptcy Act introduced sections similar to those about "related persons" in the Income Tax Act. Investigations are made by creditors or trustees to find out if related persons were not dealing at arm's length, and action can be taken through the courts to have these transactions set aside or reduced.

Mr. Robinson: You have mentioned that under the Act bankruptcy matters are really under the control of the creditors. I think it is well-known that when the first statement issued by the trustees indicates that there are no assets of any account to be divided the creditors do not show up. When this situation arises is there any follow-up to find out whether there actually are assets, or that all the assets have actually been disclosed?

Mr. Landry: This is the first duty of the trustees in bankruptcy. They are licensed by our branch, and we are trying to make sure that only the best qualified and most diligent trustees are licensed. In one sense, anyhow, this should solve the problems that were encountered in the past.

Mr. Robinson: But in a case where there would not appear to be any assets to be divided, and the creditors do not attend because they feel it to be a waste of time to engage lawyers to act for them, is there not some investigation, or examination, or cross-examination, of the debtor, the bankrupt, to determine whether or not there are, in fact, other assets?

Mr. Landry: In general terms, this is done by the trustee; and the creditors can also apply to have the bankrupt examined before a registrar.

But are you asking if we have anything to do with the civil side of a bankruptcy?

Mr. Robinson: Does the Department provide for a lawyer to be in attendance to examine the debtor to determine whether what is shown in the statement of assets and liabilities is in fact true?

Mr. Landry: No; in general terms, we are not concerned with the civil side of the bankruptcy.

Mr. Robinson: It was my understanding, listening to the Minister here the other day, that under the Department of Consumer and Corporate Affairs he is rather concerned to see that the public is protected.

It appears to me that this Department is falling down badly and not protecting the public, particularly where there may be substantial losses as a result of a bankruptcy and none of the creditors attends because there do not appear to be any assets to be divided. Nobody is taking it upon themselves to investigate further and determine if, in fact, the statement presented by the trustee is true.

Mr. Landry: I wish to revert for a moment to the fact that the official receivers in the three centres I have just mentioned are from our staff. They examine the bankrupt prior to the first meeting of creditors and must report to the first meeting of creditors, or to the trustee who is present, or to a representative of the creditors, what their findings are. If need be, the official receiver may again call the bankrupt before him and examine him further on the causes of his bankruptcy and the disposition of his property. This can be done.

In the 20,000 odd estates that we have on hand we certainly cannot know exactly what is going on in each unless at least one creditor who should be interested in this bankruptcy points out to us the reasons for our going any further than that.

• 1005

Mr. Robinson: Do you have any departmental lawyers to carry on this kind of investigation?

Mr. Landry: We have lawyers in our Department, and we engage outside lawyers in particular cases, especially when public money or a large amount of money is involved in the particular bankruptcy.

Mr. Robinson: But do these lawyers in fact examine the bankrupt?

Mr. Landry: That is done by the official receiver, who is helped by these particular lawyers in certain circumstances.

Mr. Robinson: But is the official receiver assisted by lawyers from the Department?

Mr. Landry: Engaged by the Department, yes.

Mr. Robinson: How often would these lawyers be engaged in acting for the Department?

Mr. Landry: As often as is necessary, depending on the type of bankruptcy and the amount involved.

Mr. Robinson: You have indicated that this would only be if the bankruptcy involved a large amount of public funds, or something of that nature. In the case of general bankruptcies are there in fact lawyers who, acting for the Department, carry out investigations of the bankrupts?

Mr. Landry: Yes, in certain cases, when we are aware of the need for such investigation.

Mr. Robinson: How are you going to be aware of the need if you do not carry out any preliminary investigation?

Mr. Landry: We do have a preliminary examination by the official receiver and by the trustee, who are the first persons interested—particularly the trustee.

Mr. Robinson: But they are not as skilled as a lawyer would be in reviewing the situation and asking the proper questions.

Mr. Landry: What we require from these preliminary investigations are leads to something. Lacking leads from these investigations there is no need, it seems, to go any further unless an interested creditor points out to us certain areas that we should investigate further. I do not think that you would expect us to do anything more than that.

The Chairman: Shall vote 5 carry?

Mr. Osler: Mr. Chairman, I have a supplementary.

The Chairman: Mr. Osler?

Mr. Osler: Who licenses trustees?

Mr. Landry: It is the Minister of Consumer and Corporate Affairs.

• 1010

Mr. Osler: Are there a large number of licensed trustees in every province, or is this a rather important function to perform a very small number of people which are singled out?

Mr. Landry: At this moment we have a total of 462 trustees across Canada.

I have statistics on the number of trustees in each province, if you are interested in that.

Mr. Grandy: Could you say something about their qualifications, Mr. Landry?

Mr. Landry: Yes. Three hundred and sixty-two of these trustees are CA's, and others have qualifications similar to that, that is, CPA or CGA.

We are also trying to upgrade the licensed trustees. Since 1967 there has been an interim policy whereby applicants must be examined by an independent board of examiners consisting of two outsiders and two representatives from the Department. They conduct a thorough examination of the qualifications, the motives and, if possible, the character of the applicant. We are really trying at this moment to upgrade the trustees acting in bankruptcies.

The Chairman: Mr. Foster?

Mr. Foster: Mr. Landry, is the dollar volume of bankruptcies increasing in line with the gross national product, or is it going up more rapidly? A year or so ago there was a great deal of publicity about fraudulent bankruptcies. Has this publicity had the effect of reducing the number?

Mr. Landry: The number of bankruptcies has been decreasing for the past three years.

Mr. Foster: Is that in volume or in number of bankruptcies?

Mr. Landry: Number of bankruptcies.

Mr. Foster: What about dollar volume?

Mr. Landry: In 1966, as declared by debtors—so that the figures are not too accurate—the total liabilities were 188,000,000-odd dollars, and in 1967 the total figure was \$161-odd million. That is liabilities declared by the debtors, but as liabilities can be put into the statistics maybe more than one time, these figures are not too accurate.

Mr. Foster: You say about—

Mr. Landry: So there is a decrease in the liabilities declared.

Mr. Foster: About 50 per cent of this is paid off to the creditors. The rest is used up...

Mr. Landry: No, not of this, of the total amount realized.

Mr. Foster: Oh yes. What is the average...

Mr. Landry: This is the liability declared by the debtor. The amount realized under the bankruptcy is a different figure, and approximately 56 per cent from this amount that is realized is distributed to the creditors.

Mr. Foster: What percentage is realized of the total figure? Mr. Otto suggested 6 per cent or something like that.

Mr. Landry: I will give you this figure in a few minutes, Mr. Foster.

Mr. Foster: It seems to me that this 44 per cent that is used up by the trustee in legal fees is a very high percentage. Is the Department satisfied with this or is there some plan to have this operated by a government agency or is there some other way of handling it other than the present way?

Mr. Landry: I am sorry, I did not get the first part of your question.

Mr. Foster: It seems to me that the amount actually recovered by the creditors is a very small percentage. You suggested 56 per cent. Is there any plan to change the operation of this so that the creditors can actually get more out of it, rather than having it all eaten up in legal and trustee fees?

Mr. Landry: As I have already pointed out, for many years the trustees' bills of cost for remuneration have been under close scrutiny by the office of the Superintendent of Bankruptcy and we are still trying to deal further with that. Starting on June 5 of this year we have also been looking into the bills of cost of the solicitors for the estate and we are appearing before taxing officers to have these bills of cost cut if necessary and if possible. We are looking forward to continuing these types of checks on trustees, solicitors and others involved in bankruptcies so that the cost of administration would go down in order that the creditors would receive more in the case of bankruptcy.

Mr. Foster: There is no suggestion of putting a limit on this and saying that you are going to allow a certain percentage for trustees and legal fees and...

Mr. Landry: This is provided for in the Act. Trustees are allowed 7½ per cent of the assets realized under the bankruptcy unless they obtain from a meeting of the creditors or from the court an authorization giving them more than 7½ per cent, and when they apply to the court to obtain a larger amount than 7½ per cent of...

Mr. Foster: Is there an allowance for legal fees as well?

• 1015

Mr. Landry: No. There is a tariff which has been enacted under the Bankruptcy Act and they must follow this and be guided by the provision of the Act, and we must take into

account a certain number of factors. They vary from one type of work to another and we are guided by what we feel should be the right figure in the particular instance.

Mr. Foster: Presently what percentage of the bankruptcies which are declared are fraudulent?

Mr. Landry: I suppose they are not fraudulent until they are proved so. Do you mean planned bankruptcies?

Mr. Foster: Yes, this type of thing.

Mr. Landry: It is really very difficult to know if they were planned or not. Whenever we discovered that they are and that offences have been committed we lay charges against the people who do that, but it is hard to assess really, the exact number that are planned.

Mr. Foster: You say there were 101 charges laid. I suppose that is a very small percentage of the total number of bankruptcies.

Mr. Landry: Yes.

Mr. Foster: How many bankruptcies would there be?

Mr. Landry: In 1967 there were 4,000-odd estates in bankruptcy.

Mr. Foster: So it is less than a quarter of 1 per cent. Do you have the dollar value of that?

Mr. Landry: Yes, I will give them to you in a second. In 1966 the realizations and the pledged assets accepted from these figures was \$16,000,756.

Mr. Foster: So it is 9 or 10 per cent that is actually realized by the creditors. Is this the amount after or before the trustees' fees?

Mr. Landry: This is before.

Mr. Foster: So if we cut that in half again we are talking about 5 or 6 per cent?

Mr. Landry: Yes. In 1967 the figures were \$19,298,000. Legal fees—perhaps you might be interested in hearing this—were \$1,192,000.

Mr. Otto: The distribution was less than \$1 million.

Mr. Landry: Distribution—

Mr. Foster: Is that for 1966 or 1967?

Mr. Landry: I am quoting for 1967.

Mr. Foster: \$1,192,000.

Mr. Landry: Yes. The dividends to ordinary unsecured creditors were \$7,000,784 and to preferred creditors it was \$3,054,000. This does not include the realization for secured creditors, which amounts to \$81,510,000.

Mr. Otto: As a rule secured creditors should not come under the same mortgages. They are not to be considered.

The Chairman: Does that answer your question, Mr. Foster?

Mr. Foster: Yes, I think it does. I just hope that I am never a creditor.

[Interpretation]

Mr. Chairman: Mr. Fortin.

Mr. Fortin: Thank you, Mr. Chairman. My first question is: is there a minimum amount for bankruptcy, on the basis of an understanding in your division that determines intervention by your division in these questions?

Mr. Landry: No.

Mr. Fortin: From the point of view of statistics, do you have any figures that give the percentage of bankruptcies between given amounts, for instance, \$25,000 and \$50,000, or \$50,000 and \$100,000?

Mr. Landry: Do you mean the figures stated by the debtors?

Mr. Fortin: That's right.

Mr. Landry: Yes, we do have these figures.

Mr. Fortin: Would it be very long to read them out or—

Mr. Landry: Yes, it is rather long. I would like to point out that we publish a report by the superintendent in which all these figures are given every year. Reading that report may answer your question, but as the figures are in the superintendent's report, I could give you the figures immediately.

• 1020

Mr. Fortin: All right. I saw that book. What I would like to know exactly is that, on the one hand, you say that there were four thousand bankruptcies in 1967.

Mr. Landry: A few more than that.

Mr. Fortin: Somewhat more. A hundred and one cases were brought before the Court. I have often been told that many bankruptcies, because they were not for a sufficient amount, did not receive the same attention—

Mr. Landry: No. But I must say immediately that we deal with all cases brought to the superintendent's attention. He has not only the responsibility to decide whether criminal acts have taken place, or whether any legal action should be taken. The various provincial police corps, and the RCMP, which come under our direction, and our superintendent's bureau carry out inquiries on bankruptcies, and we are not guided in this by the amount, declared debts or realizable assets.

All that we are interested in, is to see that the provisions of the Bankruptcy Act related to the Criminal Code are respected, no matter what the amount of the bankruptcy.

We make the necessary inquiries when we think that acts covered by the Criminal Code or the Bankruptcy Act have been committed by the bankrupt or other persons, in connection with this bankruptcy. Therefore, we are not guided by the amount of the bankruptcy in making these inquiries and in bringing the appropriate charges.

Mr. Fortin: Now, to revert to a question by Mr. Otto. Someone tells you, or the superintendent, of a bankruptcy—in your figures, have you established the approximate time your Department devotes to an individual case? In general, how much would a case such as this cost the Department? Has an assessment of this nature been made? If so, what would it amount to approximately? In other words, generally speaking, how much would a bankruptcy cost the Department, taking in account the importance of the bankruptcy?

Mr. Landry: I think that one way of doing this, and this would not be quite fair right now, would be to take the amount that is allocated to our Department and divide it by the number of bankruptcies. But there again, the figures were very approximative ones, because in those amounts, charges for the Committee are included, which are not directly related to the bankruptcies administration as such. It would be preferable though, to draft a new Act, new legislation regarding bankruptcies.

So, the amount that is allocated to us is spent nearly entirely to attend to the administration of bankruptcies.

Mr. Fortin: Thank you, Mr. Chairman.

[English]

The Chairman: Mr. Paproski?

Mr. Paproski: Mr. Landry, under Professional and Special Services you show an increase of approximately \$30,000 for the year 1968-69. Could you please explain?

Mr. Landry: We have to look into the administration of bankruptcy and we have been given the task of making a better job of investigating different bankruptcies. That is why there is an increase in this amount.

Mr. Paproski: How can you forecast an increase of \$30,000? This is what I would like to know.

Mr. Landry: This is just a forecast and it is possible that it is not sufficient.

Mr. Paproski: That is fine.

• 1025

Mr. Robinson: I have a supplementary. I notice under expenditures you say there will be an estimate for 1967-1968 of \$762,500 and against that a revenue of \$315,000. In view of the figures for 1965-66 and 1966-67 this would appear to be well out of proportion. Can you give any reason for this sudden increase?

Mr. Landry: You have quoted the figures in 1967-68 and 1968-69?

Mr. Robinson: It is the last figure in Vote 5.

Mr. Landry: The increase in revenues; this would be the first point you would like to...

Mr. Robinson: It seems that in the past two years the expenditures and the revenues have been fairly close together. Now, in 1968-69, they are about \$300,000 apart.

Mr. Landry: Yes; the increase in the expenditure is due to the reorganization of the Bankruptcy Branch. You know that the staff has been increased to a large extent in the past few years and we have opened regional offices in Montreal, Toronto and Vancouver in which we have investigators and auditors. We have taken up the charge of official receiver in Montreal, Vancouver and Toronto which requires an increase in staff. This expenditure is related to the job we want to do; that is, the best job possible.

Mr. Robinson: Could we get a breakdown of this figure in accordance with the new changes that have taken place in the Department, at least to some extent, to substantiate this substantially increased figure? Also I would assume that if you have new staff the

figure you have under Continuing Establishment would take care of that, which is an increase of about \$150,000 over last year.

Mr. Landry: This reflects an increase in the staff exclusively.

Mr. Grandy: There may be a misunderstanding here; the table at the end of expenditure and revenue is a summary which takes into account the figures on the page preceding it.

Mr. Otto: It is \$707,100 as against \$567,800.

Mr. Landry: Yes, the thousand-odd dollars more is due to the fact of the increase in staff.

[Interpretation]

Mr. Fortin: I presume that you must have more than doubled your staff?

Mr. Landry: Yes, that's about right.

Mr. Roger Tassé (Assistant Deputy Minister for Consumer and Corporate Affairs): I might be able to furnish some information on this point, providing I be allowed to take part in the Committee discussions.

I am especially responsible for corporate affairs in the Department and I was the predecessor of Mr. Landry as bankruptcies superintendent from 1965 to 1968.

It might be interesting for the Committee to know that in 1965, when I arrived in the Department, in the bankruptcies section, there were twenty members of the staff. All the operations were initiated in Ottawa. Today, I think that Mr. Landry has about one hundred members on his staff. There are accountants, lawyers, professional investigators who operate from Montreal, Vancouver, Toronto in addition to Ottawa.

So there has been a considerable increase in the number of employees. This was made necessary by amendments to the Act in 1966. There has also been a complete reorganization of the head office in Ottawa. And I think that to answer the question...

[English]

Mr. Pelletier: To answer your question, sir, I think the increase in professional services may be traced to the fact that the regional offices that were opened in 1966 were to bring more cases as they developed their expertise. As they investigated more cases they would bring more cases for prosecution to the atten-

tion of head office, and that is why there was a need there for an increase.

• 1030

Mr. Paproski: This is very fine, but Mr. Landry was just saying that he does not feel this amount that he has forecast is enough. Who in your Department sets up your forecasts for all your expenditures, and if at this stage of the game you do not feel that this money is sufficient why did you not put it in in the first place? You are looking at a deficit already, and you want us to approve these estimates.

Mr. J. F. Grandy (Deputy Minister, Department of National Health and Welfare): There is never enough, you know, we would like more in every branch. This is always the problem of course.

Mr. Paproski: I think it is always better to forecast a little more to make sure you have enough to run your Department than to come back for a little more in the middle or at the end of the year.

Mr. Grandy: The intention is not to come back for more; the intention is to live within the estimates. Now the estimates may be less than we would have liked, naturally, and we of course do have our arguments with the Treasury Board.

Mr. Paproski: Can you say, sir, that you are going to live within the estimates?

Mr. Grandy: That is our intention.

Mr. Paproski: All right.

Mr. Roger Tassé (Assistant Deputy Minister, Corporate Affairs): Whether we can live within it or not will depend on the kind of bankruptcies we get, the size of bankruptcies we will have to investigate, and what kind of prosecution we will have to initiate.

Mr. Paproski: Well what kind of a crystal ball do you use here in order to get this \$30,000 increase? It amazes me that you can come up with a figure like that. Do you have some sort of an IBM machine or something that you can do this with? I really have not had an explanation for it, but if you say that this is enough, fine, we will look at it again.

Mr. Grandy: What has to happen in these cases is this. There are certain activities which are not capable of forecasting—and this is one of them—

Mr. Paproski: Okay, that is enough for me.

Mr. Grandy:—and where you cannot forecast it you may later in the fiscal year have to ask Treasury Board to authorize a transfer from one of your other items.

Mr. Paproski: This is all I wanted to know, that this is one item that could not be forecasted but they said it could be. This is fine, thank you.

The Chairman: Mr. Otto?

Mr. Otto: Mr. Chairman, I have a supplementary on this. Do I understand that you have approximately 100 or more investigators on staff?

Mr. Landry: Yes, that is correct.

Mr. Otto: If you consider there are five centres roughly—Montreal, Toronto, Vancouver, Calgary and Winnipeg, that would give you about 20 in each one. You know, you do not need any trustees, you can handle all the bankruptcies yourself—and a lot better.

I want to go over one point that you made, Mr. Landry. You said that the initiative for prosecution has to be taken by the creditors, meaning the committee of creditors.

Mr. Landry: They are interested.

Mr. Otto: You are presuming that the committee of creditors act as a committee in all consciousness and everything else. I put it to you that the committee of creditors is always formed by four or five of the largest creditors, that this committee is composed of credit managers who do not have time to attend these meetings and who invariably always delegate all their authority to the trustees and say, "Do what you like, Ben" or "Joe", and indeed what you would be asking for is a committee of creditors to more or less prosecute themselves, because it is the trustee who would have to say, "Well, as trustee I am acting for the creditors—for the committee; investigate me", and this is where you fail.

It is the same thing with cost. You just mentioned that you are going to investigate legal costs. I put it to you that under the present legislation a trustee is entitled to question—in court, in other words, in conjunction with the committee—and take every single claim to court. You can, if you like, get his costs taxed, but you will still be responsible for the day in court. And there is nothing you can do under the present legislation to stop the committee or the trustee from challenging every single claim if he so wants to.

• 1035

Mr. Landry: The Bankruptcy Branch at this moment is working under the Bankruptcy Act which was enacted in 1949. The Bankruptcy Branch and the Department are well aware that this Act is perhaps not up to date and changes would be necessary. That is why an advisory committee is working on this whole question of who should be responsible, if creditor control is working or not, and if this should be changed. We are looking into this very thoroughly and we expect to find solutions that would result in better administration for all concerned.

At this moment the responsibility to see that the trustee performance is done in the best possible way lies with the Branch. Starting January 1 our auditors will audit trustee's books under our exclusive responsibility. We issue circulars or bulletins to these trustees to see that they increase their efficacy and better administer the estates they have under their administration.

I note your desire for having public trustees. I would like to say that the former Registrar General, I think it was, pointed out that this perhaps could be one of the solutions that the Committee would suggest to Parliament.

Mr. Otto: Thank you, Mr. Chairman.

[Interpretation]

Mr. Fortin: I will come back to Item 5: expenditures, receipts. If I take 1965, 66, and 67, I know that the expenditures are not necessarily all incurred in terms of receipts. But I notice that in the increase of expenditures from 1965 to 1966, there was an increase of about \$131,000. By comparison, this gave us an increase of about twenty two thousand dollars. If we compare 1966 and 1967, there was an increase in expenditures of about four hundred and eighty eight thousand dollars that would bring about, according to your estimates, an increase of about thirty thousand dollars in receipts. How do you explain this tremendous difference between expenditures and receipts in comparison with the increase in prices?

Mr. Landry: Well, perhaps you would be the first to be shocked if we only spent what we got from bankruptcies.

Mr. Fortin: I said at first that it was not necessarily in proportion. Now, with the way things are going, and if we are not given any explanation, all we can believe is that, in

four or five years, it will be a service showing a definite deficit. I would like to know on what you base yourself when claiming that your receipts will amount to \$315,000?

Mr. Landry: As you know, the superintendent is entitled to take 2 per cent on the amount distributed to the creditors, and this is what it is based upon. In addition, we have amounts that come to us from the trustees, when they ask for their licences. This also provides an approximation of the amounts of the revenue that we shall receive during the year. This is based on our past experience, but it is an approximation.

Mr. Fortin: In any case, the increase of four hundred and eighty-eight thousand dollars, compared to the two previous years, will not bring in more, compared to the number of bankruptcies.

Mr. Landry: In other words, the expenditures provided for now are not in relation to the revenues we expect to receive from this administration.

Mr. Fortin: So, you conclude that it is an efficient administration.

Mr. Landry: At the present time, we see that there are things that must be improved. And indeed, there has been a lot of improvement, and you certainly have noticed it yourself over the past two or three years. Everything is under way now so that in the bankruptcy field, the interest of the public and that of creditors and debtors will be protected.

Everything is being done to reach this goal, in the best possible time, and with as much efficiency as possible.

Mr. Fortin: We will pray all together that the bankruptcy department does not go bankrupt.

[English]

Mr. Foster: I am interested in the point that Mr. Otto raised, that in a bankruptcy this is all controlled by the top creditors and often, I suppose, these turn out to be the credit managers of large companies. Is there any provision for the small creditor—perhaps a craftsman or a tradesman—who maybe has only a small amount owing to him, a few thousand dollars, but this perhaps means more to him than a large amount to a big company where the credit manager is going to receive his salary anyway. Is there any

provision to have these smaller creditors represented on the committee of the creditors, or is it automatically the top creditors?

• 1040

Mr. Otto: Dollars for votes. The largest dollar, the most votes.

Mr. Landry: The number of creditors and the amount of debt determine who are on these committees.

Mr. Foster: The small creditors are perhaps more vitally concerned. Do their complaints come to your Department through this Box 99?

Mr. Landry: No; they send their complaints to either our regional offices or the trustee, or direct to Ottawa.

Mr. Foster: Do you give any publicity to this service, that there is a direct place for a creditor to appeal the way the bankruptcy is being handled? I am sure that the small creditor must feel that he is alone.

Mr. Landry: This is probably a feeling they have, but a message has been given publicly on many occasions by the Minister, by the former Superintendent of Bankruptcy. I do not refuse any invitation to appear in public to tell them what we are doing and what we are expecting from them. I am not sure that we have been able to get the message through in all cases, but there has been a large increase in the number of complaints that we have received during the past three or four years—a large increase.

Mr. Foster: Do you have any idea of tying this in with this Box 99 now that you are under the Department of Consumer and Corporate Affairs?

Mr. Grandy: The new departmental regional offices, which are now being created to make effective the reorganization on the consumer affairs' side will, we hope, be coordinated with the regional bankruptcy offices, so that people in regional centres outside of Ottawa concerned with any aspect of the work of our Department will have a place to go and make themselves heard.

I would not want to see this confused with Box 99 which is purely a consumer complaint service and which has enough on its hands without adding the bankruptcy questions to it. I think the bankruptcy matter is technical enough that the problems should be raised

with either the regional offices as they develop or with the Superintendent's office in Ottawa.

Mr. Robinson: For clarification purposes, was the administration fee 2 per cent of the amount of the assets of the estate that were to be distributed to creditors? Why would it not be 2 per cent of the total amount of the estate?

In other words, many of these estates, as I understand it, disappear in costs and fees of one sort or another. There never seem to be very much distributed to the creditors, but there always seem to be just sufficient funds to pay the trustee in bankruptcy. If there is any fund at all it seems to me that the Department should receive a percentage in order to defray the cost of the administration.

• 1045

Mr. Landry: At this moment we must be guided by the language of the Act and this is the language that is used under the Act now.

Mr. Robinson: Has any consideration been given to increasing the percentage?

Mr. Landry: Considerations are given to a number of different solutions to this question.

Mr. Robinson: Is any consideration being given to taking the percentage on the total amount of the estate?

Mr. Landry: This is not brushed aside without looking into it, I should say, and I am referring now to the work that the advisory committee is doing under the present Act. It is not the feeling, at this moment anyway, that special legislation should be brought before this new act to change this section on the levy.

Mr. Robinson: Can you answer this question? In the situation where the statement of accounts of the bankrupt indicates there are no assets whatsoever, how does the trustee in bankruptcy receive payment?

Mr. Landry: Third parties.

Mr. Robinson: Call them what you like; the trustee has to be paid. He certainly is not going to get involved in doing the work unless he is going to be paid by somebody. If there are no assets at all for distribution; no assets to pay any cost or fees of any kind, then who pays the trustee in bankruptcy?

Mr. Landry: The friend, the father, the mother or someone related to the bankrupt would make the money available to the trustee, I am told.

Mr. Otto: Whoever moves to put into bankruptcy must assure the costs to the trustee, whether it be a creditor, a debtor, a relative or the person himself.

Mr. Robinson: I was hoping to get the answer from somebody other than Mr. Otto.

The point I am really making is that, as I understand it, there are quite a number of small bankruptcy situations where an individual has got into debt over his head. The payments on his car are behind and it has been repossessed; he is in debt to a couple of finance companies; he has not paid his fuel oil account; he has a medical bill and he ends up with debts of perhaps three, four or five thousand dollars.

Then he goes to a lawyer for some help, and the lawyer says: I am sorry, I cannot really help you; you do not have any money; you can go to legal aid and get a certificate.

Or he may recommend to him that he see a trustee in bankruptcy. He opens the telephone book, and there are lots of them listed, and you tell him to pick any one he wants. So he goes to see the trustee in bankruptcy and he is in debt up to his ears. He has no money, no hope of ever getting any money or having any assets, and for some reason or other he ends up by going bankrupt and I assume somebody must get paid somehow.

Mr. Landry: As was pointed out, a third party—someone—gives the money to the trustee.

Mr. Robinson: But is it not the concern of the Department how this is carried out? It seems to me to be some sort of facade, really.

Mr. Landry: Yes, there is some concern and it is a very sad situation when there are people who are too poor to go bankrupt.

Mr. Robinson: Yes, that is the story; you cannot afford to go bankrupt.

Mr. Landry: We are quite aware of that, and certainly changes are necessary.

Mr. Robinson: Are there any recommendations to get rid of this inequity in the bankruptcy law as it now stands?

Mr. Landry: Yes, the advisory committee is going to propose something. I would like,

even before this is presented, to have the necessary staff perhaps to appoint trustees from our staff, if this were possible.

Mr. Robinson: Will we be receiving a copy of the report of this advisory committee? If so, when?

Mr. Landry: I think the Minister answered this question in the House some time ago. I think I would suggest that this be looked up.

Mr. Robinson: Will we have the opportunity of going over the report in committee and asking the members of this advisory council certain questions concerning the report?

Mr. Landry: The practice in the past...

Mr. Grandy: I think the question of how the report is handled really is one for the Minister. I do not think it is up to us as officials to try to answer that in advance.

• 1050

Mr. Foster: Mr. Landry, you say that there are 4,000 bankruptcies a year. Are these mostly large- or medium-sized companies, or what percentage are individuals, rather than corporations and limited companies?

Mr. Landry: We have the figures on that and they are published in the annual report of the Superintendent. I have them here if you would like me to quote them to you.

Mr. Foster: Yes, I would.

Mr. Landry: In 1966, there were 808 corporate bankruptcies; of non-incorporated businesses, there were 2,161; and of what would qualify as wage-earners, 1708. This is in 1966. Of the total bankruptcies approximately 30 per cent were wage-earners.

The Chairman: Shall Item 5 carry?

Mr. Otto: Mr. Chairman, I have just one other question. Mr. Landry would probably be pleased to get off this particular end of it, but it is on bankruptcies.

As you know, Mr. Landry, bankruptcy is bankruptcy whether it be of a commercial enterprise or of a person who has got into debt because of borrowing on consumer credit. Has your Department given any thought to dividing these two?

Mr. Landry: Yes. In the present Act there is no division at all between these two different instances of bankruptcy. Perhaps some changes should be made so as to have differ-

ent solutions to the different problems relating to wage-earners and corporations. This is one of our preoccupations.

The Chairman: Shall Item 5 carry?

Item agreed to.

The Chairman: On Item 10: Consumer and Corporate Affairs

—*Combines Investigate Act—Administration*

Mrs. MacInnis: Mr. Chairman, I have one or two questions, and perhaps I should address them to Mr. Henry.

First of all, I, as would a great many other people, would like to have your opinion, Mr. Henry, on what is the function of the Combines Investigation Act?

Mr. D. H. W. Henry, Q.C. (Director of Investigation and Research, Combines Investigation Act, Department of Consumer and Corporate Affairs): Of the Act, Mrs. MacInnis?

Mrs. MacInnis: Yes; what it is intended to do?

Mr. Henry: Let me give you a little bit of the philosophy here, because I think you might like me to start with the fundamentals.

The Act assumes that there will continue in existence the private enterprise type of economy which we have and that the industry which is operating within that economy will be regulated by what we call "market forces." This is a distinct economic philosophy which we call the "free private enterprise system".

To compare what I am talking about—what we are seeking to maintain through this legislation—you have, on the other end of the scale, the possibility of a controlled economy within which the various decisions are made by some administrative process. This could be a government board, or it could be an economic czar of some sort who would make these decisions; so—

Mrs. MacInnis: Or it could be the market?

Mr. Henry: Well, no; what I am saying is that this is an alternative to the market.

On one end of the scale you have regulation by a government, shall we say, and on the other you might have regulation by business people, because, thinking in philosophical terms, they could make the decision on how the economy should be run.

In the middle we have a different arrangement, which is the market arrangement. Perhaps I could put it this way: The Combines Investigation Act, philosophically, is designed to ensure that the market system will be the regulator of business rather than businessmen themselves, on the one hand, acting collectively or collusively or, in an over-all sense, government.

This is obviously not a perfect sort of system because one can immediately point to places where government regulates various aspects of the economy. All I ask you to do is to rule that out, as an exception, if you like, for probably very proper reasons, in the case of utilities and the transportation industries and so forth where perhaps the market is not the best form of regulation in the public interest.

•1055

With all the rest you have, therefore, the competitive market system, and the function of the Combines Investigation Act is to see that, to the extent that legislation can do it, the market is permitted to operate as freely as can be expected in the circumstances.

This is done by making an offence to the placing of certain restraints on the operation of the market, and on the making of decisions by businessmen who are presumed, in the market system, to make rational business decisions to enable their enterprises to continue, which, in effect, means making the best profits they can in the circumstances. The market will then regulate their decisions in a market system which is operating under conditions of what we would call "workable competition"; because you do not get completely free competition, or perfect competition: you do get workable competition.

Decisions, in a sense, at least to some extent, are forced upon businessmen by the market. It is when the market forces are frustrated that you have a detrimental effect on the economy at large, for the reason that if the market is correctly operating it decides what goods and services are going to be produced simply because there is a demand for the goods and services.

Perhaps I could remind you of the basic principle of demand and supply. If you have a strong demand for a commodity, and people are willing to register their demand by paying money for that commodity, then it will be produced. The stronger the demand the more

likely it is that goods and services will respond to that demand and be produced.

This requires allocation of resources to production. In other words, you take labour and capital from product A which is becoming less popular, and you move it into product B which is becoming more popular, if I can explain it that way.

Therefore, the market structure does more than merely ensure that businessmen compete. What it does is to call for and allocate the resources in the economy.

What we say is that this should be an automatic allocation by market forces, and that it is contrary to the spirit of the Combines Investigation Act that this kind of decision should be made by businessmen acting collusively. That is the basic provision.

I might just add one thing, Mrs. MacInnis. In all this one must recognize that the foundation of the whole market structure is the consumer. The consumer is, of course, the person, collectively, who buys all the goods and services produced in the economy except what is exported. Although there are industrial users of goods and services produced, these, in turn, are used to produce goods and services which ultimately the consumer will buy. So the foundation of the whole economy and the market structure is the consumer.

This is why the Combines Investigation Act is designed to protect the interest of the consumer, but, at the same time, to protect the interest of individual businessmen who are being restrained by their competitors, or others, in the market, and who are not able to exercise properly their choice of the goods they will produce or sell and the prices at which they will sell them.

Therefore, throughout the whole of the economy, starting from the primary products and the primary resources right down to the end-product which reaches the consumer on the retail store shelf, the Combines Investigation Act is designed to make sure, to the extent that this is possible through legislation, that that market system is working smoothly.

Mrs. MacInnis: I know that you have given a very good, theoretical explanation, Mr. Henry, but I was on the joint committee on consumer credit last year and there were indications there—there have been recent occurrences which underline them—that the theory is being very largely breached.

• 1100

I am concerned from the angle of the consumer. I know that you have launched a number of very successful prosecutions relative to a number of substances and products, but let us consider the recent instance, as outlined in the Batten Report, of grocery-retailing on The Prairies where, as we heard in the consumer credit committee, business in any one sector can actually be controlled by two or three or four big companies and there is no effective competition. They set the terms and rates and others have to follow; and, as we found out on the consumer credit committee, the leading business concerned is smart enough not to become a complete monopoly because that would bring it under the Combines Investigation Act. But they leave two or three other competitors in business, these two or three are glad to be allowed to survive and the price of their survival is that they allow these people to remain there, safe from the provisions of the Combines Investigation Act. Certainly they are obeying the letter of the law but I want to ask whether that is in the spirit of the Combines Investigation Act—to protect the consumer.

Mr. Henry: It certainly is, Mrs. MacInnis, within the philosophy that I have just outlined.

You see, the situation that you described involving the grocery trade is not particularly unusual, assuming that what you say is correct, because in Canada we tend to have situations in various industries where there are small numbers of fairly large producers. By "fairly large" I mean comparatively large, if you like, because in the Canadian market which is a reasonably small market in the international sense, it is unlikely that extremely large companies such as we are used to seeing in the United States could survive because our market is not large enough to do that. And in order to survive and to become larger corporations and so achieve economy to scale, if that is what is intended, they would have to go outside the Canadian market and sell internationally. All I am really saying is that within the Canadian market itself we tend to have industries which are seeking to develop economies of scale, increasing their size, and so you have perhaps a small number three, four, or five fairly large firms operating in the market. We call that an oligopoly as opposed to a monopoly situation. We do not have many actual single-

firm monopolies in Canada. An oligopoly, which is a situation that we are regularly faced with in Canada, can in many respects look as though there is a lack of competition because of the very feature that you were explaining a minute ago—the tendency is to live and let live.

Now one of the difficulties about the Combines Act, or any legislation for that matter, is that in a situation like that it is not possible through legislation to compel people to compete. It is a free society and if a man wishes to go into business in a market where there are three or four large competitors he has a choice—assuming that there is room for him in the market in the first place—of going in and attempting to cut the prices on them, do better than they do and compete with them, which is what he should do, or of getting in under the umbrella, so to speak, again assuming there is room for him, and pricing up to their price levels and acting much as they do. Now there is a great deal of this latter behaviour in the Canadian economy. I call it a “live and let live” attitude but I do emphasize that in that situation it is not possible for legislation to require people to compete because you are then asking them to do something which it is almost impossible to enforce. I mean, what constitutes competing?

• 1105

I would be inclined to say, if I could revert to your example, Mrs. MacInnis, that there is competition in the grocery trade in Canada. On the one hand, there is competition among the large national chains who incidentally compete with each other very vigorously and, on the other hand, there are regional chains, there are co-operatives, there are large grocery stores, and there are smaller independent grocery stores. Now none of these people are linked with the large corporate chains, and these are forming competition in a very real sense for the corporate chains? I am speaking about this on a national basis because experience will differ of course in isolated communities where you do not have that many people selling groceries.

What I am trying to get at, in attempting to answer your question, is that the market system is really there to offer an opportunity to people who wish to go into business and to compete. But if they do not want to compete in the sense that they do not want to go out and cut the price and try to make themselves more efficient and do better than their com-

petitors, there is nothing that actually requires them to do that. What the legislation does is to prevent them from placing forms of restraint on the whole market, such as agreeing that they will not compete with each other. That would be an offence. Or if they are in a strong market-dominating position and adopted a policy on both price or distribution practices, which we would call an abusive monopoly and which could be attacked under the legislation, or if they are also in a concentrated area and attempt to increase the concentration by merging, this could be an offence and contrary to the public interest, although our experience in the courts with our merger cases has not been too encouraging.

Mrs. MacInnis (Vancouver-Kingsway): Mr. Chairman, I am looking at this from the angle of protecting the consumer. The purpose of this Department presumably is to protect the consumer and the Combines Act comes under the administration of the Department.

I am going to stick to a concrete example because I do not want to get off into cloudy theory. An investigation by the Batten commission revealed that just two big firms between them were controlling in effect the price of groceries in the Prairies—particularly in those five big Prairie cities where they took examples. This commission found out that these two big chains between them controlled the prices to the consumer and that the consumer had to pay unnecessary amounts in respect of price, for advertising, and for unused capacity. You have a situation there where, no matter what name you use, the consumers are controlled by that existing situation. It is not a free market at all, it is a situation controlled by two grocery chains out there. They have the whole thing the way they want it and the other little grocers can compete or go out of business as they see fit.

I want to know whether the Combines Investigation Act is of any use at all the way it stands to protect the consumer in such a situation.

Mr. Henry: In the first place, I do not accept the premise that you have put down. I think I have tried to explain that very clearly, Mrs. MacInnis. We do not accept the conclusions reached by the Batten commission because we do not think on their evidence it is supportable.

To answer your question generally, which is what I was trying to explain about an oligopoly situation, the Combines Act cannot force people to compete who do not want to compete. I do not see how you can do that by legislation.

Mrs. MacInnis (Vancouver-Kingsway): No, I know, because what it would amount to would be to destroy a monopoly and that is a quasi-monopoly, if you like.

I wish you could forget for a minute, Mr. Henry, the business end of it and focus your attention on the consumer side of it because the consumer is caught. I know a lot of people who think that the Combines Investigation Act might just as well be scrapped as far as any protection to the consumer is concerned. What I want to find out is whether or not there would be ways and means of making the Combines Investigation Act really function to protect the consumer. Forget about the business interest for the moment.

• 1110

Now let me ask specifically. Would there be any way in which the Combines Investigation Act could be amended? You see, when mention is made of the Batten commission report you and others who administer the Combines Investigation Act just simply say that you do not have what you consider enough evidence to prosecute. Would there be any way of giving the Combines Branch enough power so that when it gets something like that it can go and do some more investigation on its own and pursue the matter? This is not the first instance. I could go back over a number of cases which have been brought to my attention, some of them which I have brought to yours, which require additional investigatory and follow-up power on the part of the Branch. Is there any consideration being given to that or would the Act lend itself to being so amended?

Mr. Henry: Well there are really two features there, Mrs. MacInnis. The first one is that if we are going to proceed on the basis of the rule of law, which is what we now adhere to—that is, if it is an offence we investigate them and prosecute them; if there is no offence we do not prosecute them or we leave them alone—then what is really needed is to strengthen the powers of the director and of course, if you like, strengthen the hand of the courts so that it might be possible to obtain more effective enforcement through what I might call noncriminal proceedings. This is

one of the difficulties that we are operating under at the moment. The whole Combines Investigation Act is criminal law and, as you know, when you are proving a criminal case before the courts you must prove your case beyond a reasonable doubt. Much of the area in which we are conducting our work is similar to that which you have just described where you have, perhaps, concentrations of economic power or a market structure which does not appear to be operating effectively, but in which it may be quite doubtful if there is any offence such as collusion. When you go to a court with a situation like that which is basically one that requires economic analysis, it is very easy for the judge to find there is a reasonable doubt because economic analysis is not always a matter of a clear acceptance by all persons if you can have different views on economic theories and economic analysis of a situation. Therefore, I think our hand would be strengthened if there were proceedings which were non-criminal and I really think that that is what we must work towards for the future if we are to be successful or effective in the enforcement of the Combines Investigation Act.

Mrs. MacInnis (Vancouver-Kingsway): Could you explain in more detail what you meant by proceedings that are non-criminal?

Mr. Henry: Yes. Perhaps I should not analogize to other countries because we do not look abroad for our ideas, we look to Canadian solutions, but you have the possibility under civil proceedings which, incidentally, raise constitutional problems. Perhaps I can say that and then forget about it for the moment.

Under civil proceedings, you have, in law, the necessity only of proving a case beyond the balance of probability, if I can put it that way, so that if your case seems reasonable, the court will normally accept it without having to say you have proved this beyond a reasonable doubt.

It has always been my feeling that if we were able to get before a tribunal on that basis we would have a much better chance of getting the order or the decision that we seek. For example, we might go for what we call an order of prohibition, which is really an injunction. It would, I think, unquestionably be easier to get such an order before a tribunal which only has to look at the thing from the standpoint of the onus of proof in a civil case.

Then, of course, there are different ways in which you could have the decisions made. You could have them made by a court which may or may not be appropriate because judges normally do not deal, a great deal anyway, with economic analysis. It might be appropriate to have proceedings of this kind brought before what we would call an administrative tribunal. It would be a board of some sort upon which there would be persons who would have full knowledge and, indeed, expert knowledge, of the subject matter. Such matters as mergers, monopolies and how to deal with them seem to me particularly suited to this kind of treatment whereas the criminal courts do not.

The third thing is something we already have and that is the publicity end of it, you see. We now have the possibility of taking a case to the Restrictive Trade Practices Commission and, as you know, we frequently do that although not in all cases.

• 1115

The sole purpose of taking it to the Restrictive Trade Practices Commission is to have a published report about the whole matter and this was thought to be of deterrent value by the original framers of the legislation. This may be true. I must say I have an open mind about this at the moment. I am not sure that the publicity given to particular situations—those which are disclosed that show that there has been a restrictive trade of one kind or another—really operates as a deterrent, but, on the other hand, if I can judge by the number of businessmen who seem terribly upset whenever I start an inquiry, I think the fact that the procedure is there and is carried out does, in fact, have a deterrent value. But whether you can say it is from the publicity that comes from the report I am not sure because I have the impression that starting the inquiry itself is regarded as a very important and often a disastrous step so far as the firm is concerned.

So you have, anyway, those three major ways of enforcing a statute like this. You have what we have now, enforcement in criminal cases. If I were asked for my view about a blueprint for the future which, of course, I should be thinking about from time to time, although we are waiting for the Economic Council of Canada's report on this whole matter to the extent that I have my views and I have said this from time to time, you need a blend, I think, of all those things.

You need to have the possibility of prosecution. I think, for example, that everybody regards price fixing as a clear case for criminal proceedings. It is entered into deliberately—nobody drifts into it—it is done for the purpose of maintaining an artificially high price; it distorts the operation of your market and it distorts the allocation of the resources, which is a detriment to the consumer. This may not be too apparent to the consumer, Mrs. MacInnis, but it is. In passing, may I say one of the difficulties about this is that what happens under the Combines Investigation Act normally is not very apparent to the consumer. The forces are at work there, but it is hard to see what the benefit is.

The first thing is the prosecutions, and I think that you must have criminal prosecutions for certain kinds of restraints of trade. Secondly, the administrative board or possibly a court reconstituted with some sort of expertise among its membership which would allow it to deal more adequately with what I would call an economic offence or an economically detrimental situation in the market. The third one is the publicity, which may or may not be of value. I think on the whole it probably is because, if nothing else, it keeps the public informed of what is going on. I do believe that one of the most important things in this whole exercise is to allow the public to know what is going on and to be very frank and objective about it in reporting.

I have had to put it in a rather full context, but this is what I mean by non-criminal proceedings. I think enforcement could be more effective in some areas, probably in the area that you have raised yourself, Mrs. MacInnis, about an oligopoly situation where you have a relatively small number of firms operating in the market who often tend to adopt what is called "parallel behaviour". I am a little doubtful if that is the case in the grocery industry, but I can name some other industries and I think you will be interested in some of them where identical tenders, for example, have been submitted. This is a situation which I think is very difficult to deal with by legislation, but it may be that there is a structural problem in some of those industries, which is really what the merger law is designed to get at. You can break up a merger, you can dissolve a monopoly. These are very difficult things to do and at present it is very difficult to get the courts to do this. We have never been successful in the courts with one of these merger cases although we

have had some success outside the courts, but that leads me again to believe that a non-criminal type of proceeding would strengthen the hands of the administrators.

• 1120

Mrs. MacInnis (Vancouver-Kingsway): Thank you very much, Mr. Henry.

Mr. McGrath: Mr. Chairman, would you accept a motion to adjourn as we have gone

past our allotted time? There are other committees beginning.

The Chairman: Yes, but before we leave, if there are no other questions, shall Item 10 carry?

Mr. McGrath: Mr. Chairman, I have quite a few questions, if you do not mind.

The Chairman: We will stand item 10, then, and we will adjourn to the call of the Chair.

HOUSE OF COMMONS

First Session—Twenty-eighth Parliament

1968

STANDING COMMITTEE

ON

HEALTH, WELFARE AND SOCIAL AFFAIRS

Chairman: Mr. GASTON ISABELLE

MINUTES OF PROCEEDINGS AND EVIDENCE

No. 4

THURSDAY, NOVEMBER 7, 1968

Respecting

The items listed in the Revised Main Estimates for 1968-69, relating to
Consumer and Corporate Affairs.

WITNESSES:

From the Department of Consumer and Corporate Affairs: Messrs.
J. F. Grandy, Deputy Minister; J. J. Quinlan, Q.C., Deputy Director
of Investigation and Research, Combines Investigation Act.

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Osler,

Paproski,
Robinson,
Rochon,
Saltsman,
Thomas (*Maisonneuve*),
Valade (20).

(Quorum 11)

Gabrielle Savard,
Clerk of the Committee.

(Text)

MINUTES OF PROCEEDINGS

THURSDAY, November 7, 1968.
(4)

The Standing Committee on Health, Welfare and Social Affairs met this day at 8.15 o'clock p.m., the Chairman, Mr. Gaston Isabelle, presiding.

Members present: Mrs. MacInnis, Messrs. Alexander, Forget, Foster, Gendron, Godin, Guilbault, Howe, Isabelle, McGrath, Osler, Otto, Robinson, Rochon, Thomas (*Maisonneuve*) (15).

Other Members present: Messrs. Allmand, Baldwin, Forrestall, Haidasz and Woolliams.

In attendance: From the Department of Consumer and Corporate Affairs: Messrs. J. F. Grandy, Deputy Minister; J. J. Quinlan, Q.C., Deputy Director of Investigation and Research, Combines Investigation Act; and other officials.

The Committee resumed consideration of the items listed in the Revised Main Estimates for 1968-69, relating to Consumer and Corporate Affairs.

On Vote 10—Combines Investigation Act,
Administration\$1,354,200,
Mr. Quinlan and Mr. Grandy supplied information to the Members.

The questioning continuing, Vote 10 was allowed to stand.

At 9.50 o'clock p.m., the Committee adjourned to 9.30 a.m., Tuesday, November 12.

Gabrielle Savard,
Clerk of the Committee.

EVIDENCE

(Recorded by Electronic Apparatus)

Thursday, November 7, 1968

• 2015

The Chairman: Gentlemen, I see a quorum. We will now resume consideration of the items listed in the Revised Main Estimates for 1968-69 relating to Consumer and Corporate Affairs.

The officers of the Department are available to answer your questions. On my right Mr. Grandy, who is the Deputy Minister; Mr. Quinlan and Mr. Gascoigne. Unfortunately Mr. Henry had to leave for France the other day for a very important meeting in Paris.

I am sure the Deputy Minister, Mr. Grandy, and Mr. Quinlan and Mr. Gascoigne will be able to answer any questions that you could ask.

We are now going to Vote 10...

Mr. Howe: Mr. Chairman, before you come to that could we have an explanation of why it has been so long since we have had the printed proceedings of the Committee? I have been unfortunate enough not to be here for the first couple of meetings and it is pretty hard to know what went on. The last two meetings we have not had the Minutes. Could they be speeded up so that we could get them from meeting to meeting?

The Chairman: I am sure you will understand as well as I that there is a kind of jam-up in the Printing Bureau for having those reports printed. I hope that it will not be long before you will get Issue No. 2—you have No. 1.

Mr. Howe: That is correct.

The Chairman: Issue No. 2 will be probably available...

Mr. Howe: Were there not Nos. 2 and 3?

The Chairman: Numbers 2 and 3, yes. They will probably be available at the beginning of next week.

Mr. McGrath: Mr. Chairman, the point is well taken because we are at a decided disadvantage.

At the last meeting we started on this particular section of the Estimates on the Combines Investigation Act, and we do not have the Evidence to relate to it.

The Chairman: As I said before, there is a lot of technical difficulty. Translators are overloaded and there are many other technicalities, but I am sure that these will be available within the next few days.

Fortunately, on this Combines Investigation Act, not too much has been said except for the last question of Mrs. MacInnis.

Mr. McGrath: Mrs. MacInnis had a fair amount to say at the last meeting. She is not here tonight and we do not have a transcript of what she had to say.

Mr. Howe: There is one point I would like to make here, Mr. Chairman, in connection with this particular item that we are talking about. I understand that Item No. 1 has been stood.

The Chairman: Yes; that is right.

Mr. Howe: In that event I sometimes wonder whether we should finalize these Estimates until such time as we do have the complete list of evidence to check back and see what has been said and what has been discussed before we let pass No. 1.

The Chairman: This is why we stand No. 1; it is in order that we can have general discussions of what has been said, and probably that by that time we will have these reports that are now lacking.

Gentlemen we will now go on to Vote 10.

10—*Combines Investigation Act—Administration*, \$1,354,200.

Mr. Otto: Mr. Chairman, is Mr. Grandy going to take the place of Mr. Henry?

Mr. J. F. Grandy (Deputy Minister, Department of Consumer and Corporate Affairs): No, I think it would be much better if Mr. Quinlan would speak for Mr. Henry because of Mr. Henry's independent position under the statute.

Mr. Otto: Mr. Quinlan, I am going to approach you on two subjects which, I think, have some bearing on combines and one is the matter of cable television.

You are aware, I take it, that in many subdivisions in the Toronto area restrictions are put into the deed forbidding the installation of television antennae and tying the purchaser of a home to a contract with a cable distributing company.

First, do you think this is properly within the field of your Department? Second, have you investigated this matter and what do you intend to do about it?

• 2020

Mr. J. J. Quinlan, Q.C. (Director of Investigation and Research, Department of Consumer and Corporate Affairs): Mr. Otto, I think there may be a question here of whether it comes under the legislation in that possibly just a service is involved in merely installing the cable, although there is a possibility that by virtue of the cable's coming into the house you might have a commodity involved. However, as I understand the situation—I would not want to be too positive about this—I do not know to what extent the Commission is taking jurisdiction over this question of cable television, but I think that one problem would be whether it is a service or not, which does not come within the purview of the legislation and, as the Minister mentioned the other day, this is one matter to which consideration undoubtedly will be given.

Mr. Otto: Further to this, sir, with respect to CRTC, as you know they are provided with powers to license cable companies but they have no jurisdiction over a contract such as this and I am reading to you a section from a contract of purchase and sale of a home in Etobicoke and it says:

The Purchaser agrees to accept the property subject to any agreement between "X" Company Limited and Metropolitan Cable-vision Limited for the installation of underground T.V. cable at a yearly rental to the Purchaser of \$25.00 per annum per lot, such rental to commence three years after occupancy of the home or homes so erected.

This goes on the title and on the deed. It is a cloud on title and at no time can the purchaser ever cancel this contract. Now, surely you must agree that is a restriction on the freedom of an individual and since he is in a market that is a very tight market he has no

choice. The same thing now applies to gas heating, where restrictions are put into the deed, forcing people to use gas—and in some cases electric heating—in perpetuity. Now, are you saying that your Department has no jurisdiction at the present time?

Mr. Quinlan: I think the question of whether you have jurisdiction or not, if this is simply a contract in the title, I think you have to look at each one in its own individual situation. In other words, if I am able to go to you and persuade you to put this into your title or into the contract when you are going to sell the land, there is no indication that there is any necessary agreement between your neighbour and you that you are both going to do this.

This must be looked at between the company and you. The company has persuaded you to sell the land subject to this condition. I do not think you can bring everybody that is buying property into this one situation. If the company is able to persuade you somebody else might be able to come along and persuade your next-door neighbour to take something else, and I think you have a problem there in trying to argue that this may be an undue restriction within the purview of the legislation in those circumstances.

Mr. Otto: I think I follow your rationalization but I do not know whether you are taking the position that nothing can be done and this has got to be left entirely to a sort of a *laissez faire* attitude but I think you will agree with me that subdividers get a substantial amount of funds for subdivision purposes. Needing funds, they know that the market is tight and they are going to sell all the lots they want to; people have to buy homes and so the consumer is not really in a position to choose, as you say, under the *laissez faire*. He is compelled to do this.

Mr. Quinlan: This happens in more than this situation. You have heard of situations where people in apartment blocks are able to take from only one milk company, for instance. That is the only one the owner of the apartment block will allow to distribute milk in that apartment, or bread, and it seems to me that to get at this sort of thing it is almost a situation for municipal regulation if you want to deal with it. For instance, in Ottawa as I understand the situation, the municipal authorities have granted franchises from Bank Street west to one cablevision

company and from Bank Street east to another, giving them exclusive franchises in those areas.

• 2025

Mr. Otto: Let us take this one step further. As you know, companies are franchised to distribute programs and I think you are aware that Famous Players have been picking up franchises left, right and centre. Now, it is foreseeable that within the near future a company will control the distribution of programming within an entire area. With that power I think you can also envisage, since only a limited number of stations can be put into a cable, that the cable company will be in a position of forcing television stations to come within this orbit and what you will have, or what you might have, is a monopoly.

Can you not act on the evidence so far, that because of this restriction in the deed, and because of the history of the past few years of combining cable companies under one ownership, this could be a restraint of trade or under the monopoly section?

Mr. Quinlan: We will certainly be glad to consider it and I would also want to look into the situation of whether this is something over which the Radio and Television Commissions is proposing to exercise regulatory powers. If they were going to exercise regulatory powers then I do not think it would be a matter over which we would have jurisdiction under the Combines Investigation Act.

Mr. Otto: I want to move on to another section entirely and this is in line with what the Minister expressed at his first meeting, that although we do have in our Act a section allowing corporations to combine for export purposes, I believe he said there were only six inquiries since the section was introduced.

Mr. Quinlan: Six inquiries made of the Director, yes; something of that nature.

Mr. Otto: I can understand that, but would you agree with me that in a section such as this it exempts the corporations only where they combine solely for export purposes? It does not exempt corporations that combine partially for domestic sales and partially for export.

Mr. Quinlan: Yes, I would agree with that.

Mr. Otto: Now, then, you are aware of our dumping legislation which provides that where there is division of rights or division of

legislation or regulations in any country for export and for domestic use we, as a nation, consider that dumping and we will not allow the import of that without a penalty. The same thing applies to this.

So long as this legislation does not include a total over-all production of sales, it is not going to be effective because other countries are going to consider this anti-dumping legislation and they will say that unless, the companies involved have the same regulations domestically as well as for export, they are not going to consider that as eligible for import under the anti-dumping legislation.

Mr. Quinlan: I do not know that it is always necessarily a question of dumping, Mr. Otto. For example, I recall one occasion where we were approached and they said that the real purpose of combining for export was because the foreign buyers preferred to deal with one supplier with an assured source of supply. It was not a question of dumping; the foreigners wanted one big supplier to deal with and this was what they were after, and they said this is why we want to get together for this export purpose.

Mr. Otto: Oh yes; that is perfectly within the orbit. I am saying that where three or four corporations decide that they can produce a product cheaper by combining, then they can beat the world market to export that product but if they do this solely for export purposes—in other words, one arrangement is for domestic use and a separate arrangement entirely a combination for export purposes—then the country to which these products are exported is going to take exception because they say that you are indeed legislating in two different directions and that your combination or your combine or your legislation allows you to work in unison to beat the price of domestic goods; consequently we will put a duty on it.

What I am saying is this: Japan, as you know, has more or less the same regulation except that there is a difference in the regulations in Japan and in Germany that where most or a good percentage of a product is for export purposes, combines are allowed for both domestic and export purposes.

• 2030

In other words, is there any thought of changing this section to allow combines to operate where a product is mostly for export but some domestically saleable?

Mr. Quinlan: So far as specific consideration being given to this problem at the moment, the only answer I can give you is what the Minister said the other day, that we are awaiting the report of the Economic Council on their general approach to competition policy. Then the whole legislation will be given a very careful examination.

There are a number of problems, and this will probably be one of them. I notice one was raised in the press this morning by the Fine Paper industry, on the question of rationalization rates.

Mr. Otto: Thank you.

The Chairman: Thank you, Mr. Quinlan.

Mr. Howe:

Mr. Howe: Mr. Chairman, in one of the papers distributed to us for general information on branches and their functions, relative to Combines Investigation and Research there are some words or phrases that I think are somewhat misleading. One of them is that he also enforced the act's provision against "price discrimination".

Mr. Quinlan, could you give us some definite instances of price discrimination?

Mr. Quinlan: Yes. Actually, what the Act sets forth, as far as price discrimination is concerned, is that if competing purchases are being made, of goods in like quantity and like quality, then they are entitled to the same prices.

This does not, however, prohibit the setting up of a scale of quantity discounts. In other words, if you want to set up, say, for 5,000 units, it is one per cent; for 10,000 units, it is two per cent; and for 3,000 units, three per cent; and you can do so so long as those discounts are available to competing purchasers. They may not be able to buy in those quantities, but the Act simply says that they can do that so long as the discounts are available.

It would be discrimination if you and I, competing purchasers, both bought in the thousand quantity, say, and I got one per cent and you got nothing.

Mr. Howe: In other words, what we hear about car dealers holds true, that those who sell a hundred may get a certain discount, or it may be a bonus at the end of the year?

Mr. Quinlan: A volume rebate, they call it.

Mr. Howe: Yes. Do you consider this a fair practice?

Mr. Quinlan: Well, it seems to me that there can be no objection to the setting up of a scale of discounts to encourage purchasers in greater quantity. I think it would be extremely difficult—in fact other administrations have tried this and have had real problems with it—to require a person to cost-justify his discounts. Trying to cost-justify leads into a real can of worms, frankly, because you can do many things with statistics, depending on which side you are arguing.

Mr. Howe: It is understood that in some cases certain of the agencies are run by the manufacturers themselves. Does it still hold true that that agency will get the special bonus?

Mr. Quinlan: The situation is that if they are competing against another dealer then they should be entitled to the same discounts. If they are not, then there could be price discrimination.

If the manufacturer owns the agency himself, if it is not a separate entity but owned by the company and part of the company, then the question of discounts would not arise, because there is no sale and resale.

Mr. Howe: Do you have many cases of this kind?

Mr. Quinlan: Not; I do not recall, offhand, that we have received any complaints where the manufacturer has his own outlet. I know of situations where manufacturers do have their own retail outlets and sell through them.

Mr. Howe: The next phase in that sentence is, "disproportionate promotional allowances."

Mr. Quinlan: Yes. These are allowances granted for promoting the product. They are not a matter of a discount on a sale. A good example of this is co-operative advertising allowance. In other words, they say that for every \$500 you buy they will contribute \$20, say, to co-operative advertising of the product. You can see this type of ad set up in various ways in the newspapers. Sometimes you will see a large national ad with a number of dealers in the area hooking on, for instance, at the bottom of it. They may be contributing to that in proportion to their sales. But a promotional allowance is not a discount on the sale; it is a matter of promoting the product, and you may perform your service in different ways.

Mr. Howe: What is the inference to be drawn from the word "disproportionate"?

Mr. Quinlan: It is based on sales. Suppose I was a buyer of 1,000 units of a product and my competitor was a buyer of 2,000 units. If the advertising or promotional allowance that I got was \$25 then, on a proportionate basis, my competitor buying twice as much should get \$50.

• 2035

Mr. Howe: I think there is an investigation going on in Toronto at the present time at the food terminal market, and there is an article about it in the *Globe and Mail* today. It is in the courts now. Some of the evidence was that there were kickbacks.

Mr. Quinlan: Yes; alleged kickbacks to individuals.

Mr. Howe: That is right.

Mr. Quinlan: Yes.

Mr. Howe: Is this included in "disproportionate promotional allowances"?

Mr. Quinlan: From the press reports that I have seen I would not think so. As I understand the reports, these were employees of particular companies, and the kickbacks were being given to the employees, not to the companies. This is a secret arrangement with the employee, according to the press reports. All I know is that I have read in the press.

Mr. Howe: And the final one, "Misleading representations about prices"...

Mr. Quinlan: Yes. This is section 33C. of our Act, which was added in 1960. What it says is that:

Every one who, for the purpose of promoting the sale or use of an article, makes any materially misleading representation to the public, by any means whatever, concerning the price at which such or like articles have been, are, or will be, ordinarily sold, is guilty of an offence punishable on summary conviction.

The type of case you have under that section is where, say, the retailer advertises his product as "Regular \$50: Our price \$29" where the "regular \$50" is not the ordinary price of the article and is just something he may have dreamed up; or there may be a tag on it to make it look as though the purchaser is getting a real bargain. This type of thing

would be considered to be misleading representation of the ordinary price of the article.

Mr. Howe: What about the super package that is advertised as being the cheapest way to buy a certain product, where you find that two of the small size contain the same amount and can be bought more cheaply than the super package?

Mr. Quinlan: I do not think that type of thing would come under this section, because there they are not making an allegation about what is the ordinary price of the article. They are simply saying that this is the cheapest way to buy. There is no representation of what is the ordinary price.

Mr. Howe: Misleading representation about prices: Does that include quality and...

Mr. Quinlan: No; just price.

Mr. Howe: Supposing a fabric article is advertised as being of pure wool...

Mr. Quinlan: No; that would not come under this provision.

Mr. Howe: Does that come under your Branch?

Mr. Quinlan: No, not under the Combines Branch.

Mr. Howe: Is it the intention to bring it under it now, relative to labelling? Does labelling come under...

Mr. Quinlan: That comes under the consumer affairs part of the Branch.

Mr. Howe: It does not come under Combines?

Mr. Quinlan: Not under the Combines Branch, no.

Mr. Howe: Are you investigating many cases at the present time?

Mr. Quinlan: Of misleading price advertising?

Mr. Howe: Yes.

Mr. Quinlan: Yes; I looked at the figures before I came over tonight. This section, as I say, was enacted in 1960, and up to the present time we have had approximately 45 or 46 cases in the courts.

Mr. Howe: Since 1960.

Mr. Quinlan: Yes; and most of those have been over the last three or four years.

Mr. Howe: Your cases are referred to the Restrictive Trade Practices Commission?

Mr. Quinlan: No; in this situation they are not, sir. In a summary conviction offence there is a statutory time limit of six months within which you can prosecute. If you do not prosecute within six months it is statute barred. You cannot proceed with it. Therefore, it is not possible to conduct an investigation, bring the matter before the Restrictive Trade Practices Commission and have a report issued and published within six months.

What we usually do is that when the inquiry is completed, it is considered that the evidence points to an offence is to refer it to the Department of Justice, the Attorney General of Canada.

Mr. Howe: I see, and you do not have anything to do with the further following-up of the case.

Mr. Quinlan: We assist in it, yes; because our officers have particular knowledge of it. Normally they have done the investigation, and we will normally assist in the proceedings.

Mr. Howe: There have been some outstanding cases of combines being brought before the courts and fines imposed. Sometimes the general public think those fines are not quite big enough, having regard to the firm, or, particularly, the organization, involved. What is your feeling about that?

• 2040

Mr. Quinlan: I might mention—I think it was about a year and a half ago—there was a private member's bill to increase the fines. I was there during the debate and, as I recall, generally speaking there was pretty well unanimous agreement among the members that the fines were not high enough. The Minister of our Department dealt with this question of fines last year on our estimates and mentioned that while normally in prosecutions it had not been the practice of the Crown to make any recommendation as to a specific fine, that the policy now was if the court asked for representations as to a fine that Crown counsel, after discussion, would be instructed to recommend a specific fine, which was normally higher than the fines we had been getting.

There was a case about a year ago when we were asked by the court to make representations and, after consultation, Crown counsel was instructed to make representations in excess of \$1 million. I believe the highest fine recommended was \$150,000. The court did not agree with the representations that we had made. The total amount imposed was approximately \$400,000, the highest fine being \$75,000, which was quite a breakthrough. We had never had more than \$25,000 before in a combines prosecution, and the Crown applied for leave to appeal the sentence in that case and I expect that will be heard in February of next year.

Mr. Howe: Have there been any cases where fines have been levied and these same organizations have had to be brought up on a second offence?

Mr. Quinlan: In this case that I am referring to some of the companies had been prosecuted in the prewar years—1939 and 1940—with respect to the same type of product.

Mr. Howe: I just have one further question, Mr. Chairman. We were speaking to Mr. Ryan about the service industries. They have not been brought under your jurisdiction in the same way that dry cleaning, plumbing and electrical. . .

Mr. Quinlan: When you get into a matter like plumbing there is a commodity involved. Over the years we have had different prosecutions where plumbing may be involved. If there is an agreement or a conspiracy involving the product as well you would have something which comes within the purview of the Act. The legislation, so far as services are concerned, specifically mentions storage, rental and transportation of a commodity and the price of insurance upon persons or property. We have had such cases in this service field. We have one now in the transportation field which is on appeal to the Supreme Court of Canada involving an alleged agreement among freight forwarders on oriental import pool car shipments from Vancouver through to the Ontario and Quebec area. That is on appeal to the Supreme Court now. We had a prosecution and conviction in Montreal about a year and a half ago which involved the linen supply industry, the people who bring towels into offices and change the towels every three or four days, supply clean towels, this sort of thing.

Mr. Howe: Was that in connection with a monopoly or a...

Mr. Quinlan: No, it was an alleged conspiracy.

Mr. Howe: There is one other area that I was wondering about—and this probably comes under consumers—and that is with regard to hazardous substances. Does that come under your section?

Mr. Grandy: Yes. That will come up under the consumer affairs item later.

Mr. Howe: Thank you.

Mr. Robinson: Mr. Chairman, if I may I would like to go back to a matter raised by Mr. Otto concerning CATV, and in particular I am concerned about the use of CATV as, shall we say, a public utility. I wonder if there is any reason the Bell Telephone Company could not be involved in looking after CATV throughout the country, because it already has the lines, the poles, the conduits and all the service necessary to carry this out. In my opinion, they would be able to do so under the Bell Telephone Company of Canada Act if they were given this enlarged power, and they could do so much more conveniently and at a much lower rate than private enterprise would charge for this service. I say this because I understand that there is some control over the amount of profit that the Bell Telephone Company can make, and it would seem to me that in most cases as the Bell Telephone Company's equipment would be used by private enterprise to provide this service that this would be one way the rates could be controlled. Could I have some indication from you as to the opinion of the Department with regard to this?

• 2045

Mr. Quinlan: I do not know that I could express an opinion that would be too definitive in this respect because I do not know just how far the jurisdiction would extend over Bell Telephone so far as their telephone rates are concerned, which are under public regulation, and as the situation stands now whether it would automatically include the CATV type of thing if they brought it in or whether there would have to be some amendment to the powers of the regulating board to deal with that.

Mr. Robinson: Mr. Chairman, I understand that many municipalities in the country are

concerned about this kind of enterprise—and I would correct Mr. Otto on this, I think—and in the borough of Etobicoke, which I know quite well because I happen to be on the Board of Control in Etobicoke, at the present time there are a number of companies that are endeavouring to get CATV rights in the borough. At the present time they will have to make arrangements through either Hydro and/or Bell Telephone to use their service. They will also have to make arrangements through the local municipalities in every case in order to carry their service of lines or poles, or whatever it may be, over the public lands or municipally-owned lands and at this time we are in the throes of trying to determine the kind of contract that would be acceptable, while at the same time thinking in terms of the kind of service that we can provide to the people.

No doubt there is quite a demand for CATV on the basis that with a high tower and with the kind of service that can be provided more stations and better viewing will be available in the areas where this service is made available. I understand, however, that the companies are only interested in getting involved in the communities where they are going to get a high sale ratio, places such as metropolitan Toronto, metropolitan Montreal, and so on. However, it is going to be of little if any advantage to other communities in the country. It seems to me that if the federal government sees fit to provide this kind of service countrywide that the way to do it would be through the Bell Telephone Company, which I think is what somebody called a "mogopoly" the other day. There is no reason we could not give it the power and authority to do this kind of thing.

Mr. Quinlan: I do not think there is any reason a public utility cannot be regulated under valid legislation, either federal or provincial, depending on the question of jurisdiction.

Mr. Robinson: At the present time there is no CATV service in the borough of Etobicoke which has some 300,000 people. They want it but they are concerned about the controlling of the rates. Is there any way that the rates can be controlled under combines legislation, shall we say, whereby the rate will be held at normal or at cost plus a reasonable amount of profit, and not find out that after the service has been provided you must accept the service and pay whatever rates are dictated.

Mr. Quinlan: The situation there is that as far as the Combines Investigation Act is concerned there is no power of regulation under that Act. The powers that the director has are purely investigatory. With a utility such as this if there is a franchise granted and if it in effect, has a monopoly—such as, for instance, certain electric utilities have or as the telephone company has in a large number of areas—the solution may then be to regulate it where you are in effect granting a monopoly by a franchise.

Mr. Robinson: As I understand it, it seems to me at the present time the federal government will give a franchise for a nominal amount, I suppose, whatever is required to obtain a franchise, and then private enterprise in effect will have a monopoly in the municipality in which it operates and the only control the municipality will have is in terms of the service provided. This would be the only way that the contract could be cancelled. In this kind of a situation how will the federal government legislate under combines legislation to effect a rate structure?

• 2050

Mr. Quinlan: I do not know whether there would be any intention to provide any form of regulation in the Combines Investigation Act, but the one thought that occurs to me is that if you have a municipality franchising and there is widespread dissatisfaction over the rights, it seems to me that the municipality has fairly substantial power in their franchising arrangements, do they not?

Mr. Robinson: The franchise is given by the federal government, not by the municipality.

Mr. Otto: Ottawa gave us a franchise just a little while ago.

Mr. Quinlan: Yes; west and east of Bank Street. I do not think that came from the federal government.

Mind you, I would not want to be taken as saying the last word. I am not familiar with all the operations of the CATV.

Mr. Robinson: My understanding is that the federal government gives the franchise for the company to operate, on the licence to operate, and then the company is required to go to the municipality in order to operate further. It gets the authorization from the municipality, but the municipality has no control. Once they have given this leave, or licence, or franchise, call it what you will, they have no further control.

Because there is, in effect, a monopoly created what is the federal government going to do to control this?

Mr. Quinlan: If it were a question of regulation that would be a matter of policy for the Government, on which I do not think I am competent to speak.

Mr. Howe: Mr. Chairman, would this not be related to transport and communications under the Canadian Transport Commission?

Mr. Quinlan: They regulate the Bell Telephone rates at the present time, I believe, yes.

Mr. Robinson: I have one further question, if I may, Mr. Chairman. I have always been concerned about the fact that one can pull up at any gasoline station anywhere in the country—let us take the city of Toronto as an example—and the price of gasoline is exactly the same, no matter to what station you go. How is this regulated, if it is, by the Federal Government? Does this fall within the confines of the Combines Investigation Act? Why is the price always the same? Also, as a supplement to that question, you will note that certain oil companies, perhaps they are smaller ones, may sell gasoline at the same price or even at a less price although they have had to obtain it from the same source. They may be operating on a smaller margin of profit, I do not know, but I would assume this to be the case. It seems rather strange that all of the oil companies should sell their product at the same price.

Mr. Quinlan: First of all, the distribution of gasoline deals with a commodity, and it would come under the Combines Investigation Act if it involved any restrictive practices prohibited by the Act. If the price of gasoline is arrived at by agreement either by the oil companies, if it happens to be their own stations, or by the retailers, and there is a substantial segment of them in a particular area then that could very well be an agreement in undue restraint of competition.

From my own experience, however, I have not found that all prices are the same. For instance, there are a number of what one could call non-brand stations around which normally sell at a lower price than do the branded stations.

Even taking the identity of price, the mere fact that prices are identical does not by itself necessarily mean that there is collusion. There could be, but it does not necessarily, by itself, mean that there is.

Mr. Robinson: Has there been any investigation of the oil and gas retail industry to determine this?

Mr. Quinlan: There have been a number of investigations involving the distribution of gasoline.

In our annual reports from about 1958 to 1961—I do not happen to have them with me—there was mention of a number of inquiries arising out of complaints about price discrimination in the sale of gasoline, involving alleged price-fixing in gasoline. These were discontinued inquiries because there was no evidence to support an allegation of an offence.

• 2055

Some years ago there was a prosecution of gasoline retailers in Vancouver for alleged price-fixing. They were convicted on the trial. On appeal, the verdict was reversed and the Crown applied for leave to appeal to the Supreme Court of Canada, which was refused.

There have been a number of investigations involving it.

Mr. Robinson: How is it, then, that the major oil and gas companies have identical prices for their product?

Mr. Quinlan: There may be a variety of factors. The mere fact that they are identical does not necessarily mean that there is collusion.

The tendency in a competitive market is for prices eventually to reach a level, but you do find situations, even where the tank wagon price is the same, where particular discounts are being given to gasoline dealers in some areas. They are buying at a cheaper price.

Mr. Robinson: I am somewhat confused by this kind of answer on this kind of policy—if it is policy—because I understand that in consumer affairs there are complaints from time to time from people who go into Loblaw's and see one price for a loaf of bread, we will say, and then, on going into the IGA they see a little different price; or they may go into an A & P, or some other chain store, and see still another price.

If this is the case there will be a tremendous number of complaints. They feel that the product should be the same price in all of these various chain stores.

Mr. Quinlan: I do not think we in the Combines Branch have received complaints from

consumers about the prices of staples such as bread being identical, or that there has been any complaint where they are different.

Mr. Robinson: I merely use that as an illustration of the kind of problem that arises all the time in consumer affairs. I do not want to go deeply into my next question, but I want to know whether at the moment, it also has anything to do with the Combines Investigation. When an organization has what I understand is called in the trade a loss-leader—which is a very attractive low price for something that would normally cost a great deal—it is a way of inducing one to go to the store to buy that commodity and then to buy other items that are at an inflated price.

This is the impression I get, and what I have heard from people who have complained about it. I have been told that there are a number of stores that engage in this kind of practice. I will not mention them by name. Does the Combines Investigation have anything to do with this segment of consumer affairs?

Mr. Quinlan: There is nothing in the Act that prohibits a loss-leader. There is a reference to loss-leader selling in the re-sale price maintenance provision but it is not made an offence. It is a matter of defence in re-sale price maintenance.

We do have a predatory-pricing provision which prohibits a policy of selling at unreasonably low prices having the effect, or designed to have the effect, or having the tendency, of substantially lessening competition or eliminating a competitor.

We had a prosecution here in Ottawa under that section arising out of a milk price war two or three years ago. In that situation one company, as I recall it, had the practice of putting on these store-opening specials—two quarts for the price of one. This was more or less recognized in the trade and nobody took any retaliatory action when this happened. In one particular store this type of offer was put on on a new-store-opening special, as a one-shot effort, and it immediately produced a price war in which one company reduced its price to the extent that they were, in effect, selling two quarts for the normal price of one. This went on for a couple of days. There was no time limit put on the period during which this was going to continue.

Following an investigation, we did have a prosecution in the courts and although, as I recall, the court said that the price was unreasonably low they did not think that the

policy had been one of engaging in these prices and so they acquitted the company. We appealed to the Court of Appeal and the Court of Appeal agreed with the Magistrate and unanimously dismissed the Crown's appeal.

Mr. Robinson: There is one other question I would like to raise and then I will make way for someone else, because I have been taking up a lot of time. There are large chains which have their own discount store chains as well. They are not called by the same name but they are discount chains that seem to me are not companies working at arms length. To what extent, if any, is your Department involved in this kind of situation?

Mr. Quinlan: If company "A", a chain store, owns company "B" which is a discount store, the relationship would be that of parent and subsidiary, and I do not think that by themselves they could be guilty of conspiring. In other words, a parent and subsidiary by themselves cannot conspire under the Act because the parent control the subsidiary.

• 2100

Unless there were possibly some price discrimination aspects, sir, I don't think that this would ordinarily be a matter that would fall within the anti-combines legislation.

The Chairman: Have you finished, Mr. Robinson?

Mr. Robinson: Yes, Mr. Chairman.

The Chairman: I will now recognize Mr. Woolliams—the baritone voice of Parliament.

Mr. Woolliams: Some of the questions that I was going to raise have already been asked but with reference to the re-sale of gasoline, I am glad to hear this matter raised because I think that maybe if the Department officials, or Mr. Quinlan was frank with us in this regard, the big trouble is first of all that the industry is owned basically by foreign capital and that there could be matters and deals made which are made outside of Canada and therefore you cannot really run a proper investigation. That would be the first point.

Secondly, it would take a mass of investigators to really get into the situation so as my good friend pointed out about the price of gasoline in one place, whether it is the City of Calgary or the City of Toronto, I do not think there is any question about its being pretty well always the same, except where the tax may differ in various parts of the

country. It is almost the same whether it is produced in Alberta as it is when it is sold in another province.

So I think it is a fact that the trouble is that you are understaffed and you are unable to make a thorough investigation; first of all because they are international companies and we might say in some cases international cartels—arrangements, if they are made, are made outside of Canada—and secondly, because you would not have the staff to make a thorough investigation into the situation anyhow.

Mr. Quinlan: It would be a tremendous task, but to institute an investigation we would have to have reason to believe that there was agreement among the companies.

Mr. Woolliams: I do not know how you could not have reasonable belief because you have only to drive into any city and, except maybe for the odd station out in the suburban area where the retailer may be having a little gas war of his own because he has a mark-up of eight or ten cents a gallon, the gasoline in all the cities—this does not take much imagination—is selling for the same price. So I do not think you would have any trouble in coming to that conclusion.

Mr. Quinlan: Oh, there is a good degree of similarity but price wars from time to time break out in the industry in various areas.

Mr. Woolliams: I know, but that is only the odd time. What we are coming to is that most of the time gasoline at retail outlets is sold for the same price. That would be a finding of fact by your Department.

Mr. Quinlan: As I understand it, the retail dealers claim that they have the right to set their own price so long as they are not on consignment. I do not think there are that many on consignment now. There used to be a large number of consignment but I do not think that there is the same proportion on consignment as there used to be.

Mr. Woolliams: Of course what you are really saying is that the refineries may refine it for several companies; that gas sold by company "A" I do not want to mention anybody—or company "B" may come from the same place anyhow, although they tell you on TV one may go another extra mile. But we are coming right back to the situation that there must be some body, whether it be the industry or some other body, setting the price

of gasoline. There has to be. The evidence is overwhelming. In fact, if you were investigating any other case I think that you would come to some reasonable belief that there must be some price fixing by someone.

Supposing you wanted to have an investigation of the whole matter in Canada, how many investigators could you turn loose tomorrow morning on the situation?

Mr. Quinlan: It would be a very substantial number, if we had to.

Mr. Woolliams: What do you mean by substantial?

Mr. Quinlan: Just look at the number of companies there are in Canada engaged in refining and selling to retailers for distribution. There are 12 approximately, I think it is.

Mr. Woolliams: What I mean is how many personnel of your own, from your Department, could you turn loose as investigators to investigate the situation? How many people?

Mr. Quinlan: In our own organization we have approximately 40 to 45 officers, both professional and non-professional.

Mr. Woolliams: Would you say that this is an adequate number to investigate a situation as complex and as involved as the oil industry in reference to the retailing of gasoline?

Mr. Quinlan: In the original stages, I would doubt it.

Mr. Woolliams: Right. Well, is that not your problem, that really, although the law is here, the problem comes back to money again. This is not criticism of your Department personally as it is a question of money, a question of finances; but the real problem is that you really do not have the staff to look into this situation.

2105

Mr. Quinlan: Well, there is one matter that could be considered, the question of whether research enquiry could be done. This again would be a very terrific task to try to undertake.

Mr. Woolliams: May be this question is a little embarrassing but I am going to come back to it anyhow. What I am really asking you is this—and you know the situation and I know that you have made attempts and I know you are a pretty thorough Department.

For example, it was very easy to investigate the plumbers of western Canada and get a conviction as far as they are concerned, but I do not think you could use the same staff with the same experience and investigate this particular problem which my good friend Mr. Robinson raised a few minutes ago.

Mr. Quinlan: We would definitely need more people.

Mr. Woolliams: Right. When you come right down to it, although there are teeth in the law, the staff you have at the present time is not adequate to carry on an investigation which involves as much as an investigation into the retail price of gasoline and crude petroleum.

Mr. Quinlan: Well, it would depend on whether we get assistance from other areas, if that were needed in a particular situation.

Mr. Woolliams: What assistance do you mean? Can you get staff outside your own Department?

Mr. Quinlan: Yes, we have on occasion, when assistance was needed. I am sorry I cannot mention the enquiry because it is not public at the moment.

Mr. Woolliams: Is there any enquiry going on in reference to this matter now?

Mr. Quinlan: I am afraid I would have to give you the answer, sir, that ministers would give in the House, that we can neither confirm nor deny.

Mr. Woolliams: I see. There is another matter that comes to mind and I do not think this is really a problem—both the federal and provincial departments seem to shy—and this is all tied into the price of gasoline. The companies and the retailers are tied to a certain contract and, of course, under the contract they sell their gasoline at a fixed price with a mark-up of so much. In order to get one of those contracts they are sometimes tied down, especially if they need finances, to do business with that one particular firm for 20 or 30 years and they must deal in a certain product. Have you had complaints come into your Department as far as that is concerned?

Mr. Quinlan: Yes, we have had complaints. There was one point that you did mention, though, sir. You said the contracts required them to sell at a certain price?

Mr. Woolliams: Well, I think they have. I have seen—Well, I will tell you what they do say. They say your mark-up will be eight or nine cents. I have seen those contracts in the old days. Your mark-up will be that much.

Mr. Quinlan: I do not think they exist today because we did run across one such contract in the Maritimes where one company was using that type of contract, and we have an order against them prohibiting that in their contract.

Mr. Woolliams: There was a recorded case of mine in which we got into litigation on one of those contracts. I do not know whether you could classify that as price fixing because they may be selling the gas at different prices, so the gas to the consumer might fluctuate but their mark-up...

Mr. Quinlan: No, but if it is the oil company selling to the dealer—the sale and resale—which fixes the price at which he must resell the gasoline, that is contrary to the resale price maintenance provisions.

Mr. Woolliams: Could you safely say that the mark-up is not the same for all retailers, say in the City of Toronto or the City of Calgary?

Mr. Quinlan: I would not want to comment on that without looking into the situation.

Mr. Woolliams: Has it ever been looked into?

Mr. Quinlan: Well, we have had this. I mentioned that we have had a number of enquiries.

Mr. Woolliams: What did you find in that regard?

Mr. Quinlan: In the enquiries that we have made—they have been discontinued—we did not find evidence which would justify making allegations.

Mr. Woolliams: Well, it seems to me that if a person wants to get into the retail gas business and he goes to company "A" or company "B", they say to him that his mark-up will be around eight, nine or ten cents a gallon and that that is what they all charge and that is the general standard rate. That is known surely throughout the industry by the retailers and in many cases by the consumers themselves. If that was looked at I think you would find those to be true facts.

Mr. Quinlan: I concede that in a majority of cases in a particular area at the present time the prices would be very much the same. But I know there are differences in the price of gasoline at the retail level right here in Ottawa.

Mr. Woolliams: Then, coming back to the original part, is it not a fact that this is a very difficult matter to investigate because the big companies are foreign-owned and controlled companies?

• 2110

Mr. Quinlan: I would not say the question of whether an investigation would take place depends upon whether the companies are foreign-controlled because we have had a number of enquiries in Canada in different industries where they were Canadian subsidiaries.

There was one further question that you were asking about, which I omitted to deal with where these contracts were tied down to purchasing, say for five years and so on. We have had some complaints about that and our view has been that these are matters to be dealt with more properly under provincial legislation, if they are to be dealt with. They are property and civil rights; they are contracts between the individual and the oil company in every case.

Mr. Woolliams: I think you are right in that regard but the great problem, sir, and I think you will agree with me, is that the various government levels have been passing the buck from one to the other, whether it be at the provincial level or at the federal level. I am not criticizing any political party, I am talking about governments generally.

Is it not a fact that it is difficult for your Department to investigate here in Canada not because they are subsidiaries but because most of the policy-making is made outside the country?

Mr. Quinlan: Well, I do not know that that would necessarily affect the situation unless there were agreements outside the country of which there would be no evidence in Canada.

Mr. Woolliams: Well, is that not a problem?

Mr. Quinlan: Well if that was the situation then that could be a problem, yes.

Mr. Woolliams: I revert to what Mr. Robinson said, that it is obvious to anyone that buys gasoline and drives an automobile that

as the price is the same throughout City A or City B there must be some price fixing body, somebody setting price and I think, while you cannot get to the bottom of it, the problem is (a) the investigation part of your Branch is under staffed, because it is a pretty scientific industry and, (b) that much of the policy-making, if it is made, is made outside Canada. Would you agree with that, sir?

Mr. Quinlan: If it was a question of agreements being made outside the country then I cannot make any comment on that, but I agree with you that that could create a problem.

Mr. Woolliams: What is the answer to these big companies—I am not talking about your present investigations but former ones? How is it that the gasoline sold by company A and the gasoline sold by company B are the same price and continue to be the same price? How do you answer this, and what is their answer to you when your investigators go and ask them that question?

Mr. Quinlan: The answer that I have received when I have asked how the price is established, is "Well, we sell to the dealer at a certain price and what he wants to sell at is his own business".

Mr. Woolliams: But why is the price to the dealers always the same?

Let us say that he is paying 18 cents a gallon. Then you have your markup and your taxes. But why is it always 18 cents a gallon? I picked that figure out of the air. It may be inaccurate as to the price today but that was the price at one time.

Then there are the taxes to add on and the markup. How is it that that price is always the same, and what is their answer to that? Do they say it just happens to be a coincidence?

Mr. Quinlan: No. One answer is that the prices may gravitate to that level. Without defending the industry, there have been situations—I recall one here in Ottawa—where one company announced an increase in its tank wagon price, two or three other companies followed within three or four days, and a fourth company dropped its tank wagon price and they eventually all ended up at the lower level.

Mr. Woolliams: With the greatest respect, I think the only competition in the matter of retailing gasoline is the service you get at the pump—whether it be the cleaning of your

windshield, the blowing up of your tires or the smile you receive. You might even be accorded the privilege now of having a pretty girl do the job for you. I really think when you get down to the basic fact there is no competition as far as the price is concerned—I see Mrs. MacInnis agreeing with me—it is merely on service. If there is no agreement it is one of the great mysteries and the most unusual coincidences of the economic world.

The Chairman: Mr. Alexander?

Mr. Alexander: Is it true that you have some type of foreign service?

Mr. Quinlan: Within the Branch?

Mr. Alexander: Yes.

Mr. Quinlan: No, there is no foreign service part of the Branch. Are you referring to our membership in O.E.C.D. and the fact that we are a member of the Committee of Experts on Restrictive Business Practices?

• 2115

Mr. Alexander: No, I thought perhaps you had a foreign service within the Branch that was primarily interested in the type of situation that Mr. Woolliams was bringing to our attention—that many of these matters have their beginning outside Canada—and this service would investigate and bring home the facts.

Mr. Quinlan: No, there is no special foreign service branch within our organization.

Mr. Alexander: You indicated a little earlier that you did have problems under the Summary Convictions Act. You were hampered by a set time within which a prosecution must be commenced. Is there any move afoot to alleviate that problem?

Mr. Quinlan: No, I am not saying we were hampered. I was explaining that we could not possibly go before the Commission and get a report within the time limit of six months. I do not think this is hampering the enforcement of the legislation. We are still completing investigations and proceeding with cases in the courts within that time period. This is a general matter on summary convictions.

Mr. Alexander: But as it now stands, there is a time limit for you to proceed by way of prosecution.

Mr. Quinlan: Yes.

Mr. Alexander: When your special prosecutors prosecute are there any instructions given to them on the fine that should be levied? In other words, do they make any submission one way or another or does it depend on the type of matter brought to the court and the effect that it has on the consumer whether he will be directed to make any particular submission to the Magistrate in terms of fines?

Mr. Quinlan: As I mentioned earlier, if counsel are requested by the court to make submissions as to a specific fine the policy now is that such a recommendation will be made to the courts. That matter is discussed with counsel and instructions are issued accordingly.

Mr. Alexander: So that the matter of the amount of the fine is really left up to the prosecuting attorney?

Mr. Quinlan: No. What fine will be asked is discussed with the Department of Justice, in the event that the court request representation.

Mr. Alexander: So he does take instructions?

Mr. Quinlan: Yes, and his advice is sought as well.

Mr. Alexander: Are there any regional offices set up throughout Canada to handle investigations?

Mr. Quinlan: Not as far as our combines organization is concerned, no. All investigations are conducted by staff operating from Ottawa.

Mr. Alexander: Is this satisfactory?

Mr. Quinlan: Up to the present time it has worked out satisfactorily, yes.

Mr. Alexander: How would a person who has a complaint regarding misrepresentation of price go about making your Department aware of same?

Mr. Quinlan: They write to the Director and set out the basis of their complaint. We will then look into it and if the Director considers that the information he was able to obtain gives him reason to believe that their section has been or is about to be violated then he will start an inquiry.

Mr. Alexander: I have heard of Box 99. Has this anything to do with your Department?

Mr. Quinlan: Well some of the complaints that come into Box 99, for instance, do involve misleading price advertising. If they do, then they are passed on to our Branch by the Consumer Bureau.

Mr. Alexander: Well if you are interested in misleading prices would it not be advisable to advertise the fact that, Box 99 is also for this type of thing. From what you have said, I gather that it is only by chance or luck that something comes into Box 99 which is then channelled over to your Department?

Mr. Grandy: The misleading price advertising cases are really very close to the borderline between consumer affairs and combines and this is why many of them quite properly do come in through Box 99. Our purpose there is to make certain that they do get to the Combines Branch as quickly as possible. The advertising about Box 99 has been in pretty general terms—any kind of consumer complaint is welcome, and of course this includes complaints about misleading prices advertising.

• 2120

Mr. Alexander: I understand that Box 99 has been quite effective. Because of the generality of the whole thing and because of the ignorance sometimes of the consumer, I wonder whether we could not stress this particular function of it. It is misleading prices that seem to affect so many people on that level who are doing the purchasing, and I think that this is an area in which perhaps there can be more stress placed. If you see this sort of thing, this is where you write to, and here is where you will get the action.

To what extent can we elaborate on research?

Mr. Quinlan: If you will pardon me just one moment, I have some notes that I have prepared on that aspect. We do maintain a Research Division within the Branch, and the primary function relates to the conduct of research inquiries under the research provision of our Act. We have a provision, Section 42, which provides for inquiries into the existence and effect of conditions and practices related to monopolistic situations or restraints of trade. They may not be offences by themselves, but they may raise questions of trade restrictions that are not offences. And in addition to that, the Research Division on a continuing basis carries on research into problems of structure and behaviour of industry,

designed to keep the Director and the staff aware of the state of competition in various sectors of the economy. The members in the Research Division also assist and advise in the conduct of particular research tasks required to be undertaken by other sections of our organization in the course of carrying out inquiries into suspected offences, and they are also engaged in preparation of data and research papers as part of Canada's contribution to the work of the Committee of Experts on Restrictive Business Practices of O.E.C.D.

As far as studies and current studies are concerned, this Research Division recently completed a study pertaining to services not at present within the scope of the Combines Act, its purpose being to distinguish between services which are now within the ambit of the Act and those which are not, and to examine the implications of bringing the latter under the Act. As the Director mentioned in his annual report, the study is not intended for publication, but it has been made available to the Economic Council of Canada for use in its current inquiry into Canadian competition policy.

Another inquiry into which they are carrying on research at the present time is a study of concentration in Canadian manufacturing industries, concentration in manufacturing being an important aspect of the structure of the economy and one which will have a bearing on concentration policy.

Recently we instituted a new research inquiry into the operations of bid depositories in the construction industry. The reason for this was that representations by way of complaints have been received over the last few years which raise the question of whether these bid depositories had been operated so restrictively as to offend against the spirit if not the letter of the Act. The inquiry was commenced pursuant to Section 42 of the Act by the Director.

Mr. Alexander: Would you advise how many persons are involved in the research end of it, highly skilled or professional help?

Mr. Quinlan: Our permanent professional staff in this Research Division are four persons, including the Director, the head of the division, all of whom are economists. All these officials have joined the Branch since April 1966, and during the past summer we had a senior postgraduate student in economics assisting them on particular projects as well as two law students, on a temporary basis.

Mr. Alexander: Well then, this is the entire staff that looks into this matter. Maybe you cannot answer this question, but following up with what Mr. Robinson was talking about and Mr. Woolliams, is there any investigation through research done regarding this oil and gas business that we find so complex?

• 2125

Mr. Quinlan: As far as any particular inquiries or studies that the Research Division may be doing, I think the position I would have to take is that apart from any that have been publicly disclosed, I would not want to comment on particular work that they were doing at the present time because some of their work, as I said, is directed towards offence cases, and we can neither confirm nor deny whether inquiries are being made into suspected offences in particular industries.

Mr. Alexander: Maybe we would just put it this way, sir, that we are interested in it.

Mr. Quinlan: Yes.

The Chairman: Mr. Foster.

Mr. Foster: Mr. Quinlan, I was very interested in the fact that you say there are only 45 or 46 cases since 1960 regarding misleading price advertising. This seems like a very small number to me. Maybe I am a cynic, but when I go into a store and see a sale on, I just automatically assume that the price that it is actually being sold at is much closer to the actual value than the price that they suggest is the regular price. I wonder what constitutes a case. Is a storekeeper, by just putting a ticket on his merchandise indicating one price and then a line through it and another price below—if this first price that has been marked out is not in effect correct—contravening the law or the Act, or does he have to have an item on a national advertising scheme to actually contravene the Act? Also, often you see in stores the price listed and then the statement, "Compare at a higher price". Is this done deliberately to keep from contravening the Act?

Mr. Quinlan: As far as the first situation you mention, we had a case within the past year where that situation arose where there was a price with a line struck through it, and then another lower price below it. The way it came to our attention was through a complaint from a consumer who said, "Six months ago I was in this particular store and I saw this line through it and a lower price

and I went back the other day to buy one of these articles and it was exactly the same situation." So we made inquiry into it, prosecuted, and there was a conviction, in that situation. Now, on the question of "Compare at", in our annual report for 1967 we dealt with a number of cases that had arisen under the Act. We gave more or less a historical review of the type of case that we had been dealing with and we have had some involving this "Compare at". I believe we have had one such case. We had a situation where they used comparable value as the comparison price, and in that case the magistrate ruled that the wording of the advertisement accurately indicated the value of the comparable radio-phonograph and that there was not an offence in that case. This involved one of those radio-phonograph situations, but normally the use of "Compare at" type of nomenclature in this advertising suggests that it is a better value, that the regular price you would pay for something of this nature is at a higher price.

• 2130

Mr. Foster: This does seem like a very small number of convictions for that length of time. Five a year, average.

Mr. Quinlan: Yes.

Mr. Foster: Well, I guess you have had eight or ten in the last two or three years.

Mr. Quinlan: Oh, yes. When we started originally and when this was first placed under our jurisdiction, the Minister at that time made it very clear that we would have to depend upon complaints from the public. Well, these were rather slow in coming, but we now have a larger staff dealing with this and we are doing a good deal of monitoring, for instance, of newspapers and picking up a large number on our own, rather than relying necessarily on consumer complaints.

Mr. Foster: My next question concerns the use of infringements. A few years ago some automobile companies were following the practice of charging an infringement fee—I believe that was the expression—and if a person were buying a car, rather than buying then, because his address was in Ottawa, the dealer in Arnprior would have to pay a fee to a dealer in Ottawa and supposedly the dealer in Arnprior would have to charge an extra \$65, or whatever the fee was. Does this contravene the Act?

Mr. Quinlan: I doubt that it would come within the provisions of the legislation because normally this is a decision that is arrived at by the manufacturer of this particular car. There is no evidence that I am aware of that there is collusion, because certainly they do not all do it in this situation. You must look at it as an individual operation. Where there is this infringement fee you would have to look at it on the basis of the one automobile manufacturer. Is that in any way an undue lessening of competition? I think the court would probably say that it is not, because, there are so many other sources of supply and you cannot say this is undue if you do not want to buy that particular car. It all depends on how it is done. If it was done in such a way that you were getting involved in the ultimate selling price—there could be a resale price maintenance situation here—or if it was simply that this is the fee that will be charged, it might not necessarily be the case. In other words, the dealer might be prepared to drop his price that much and pay the difference himself in order to make the sale.

Mr. Foster: My next question concerns the price of gasoline. It seems to me that the statistical evidence of gasoline price-fixing would certainly bear this out. I am sure it has been proven statistically that this is going on, and more so perhaps than the fact that smoking causes cancer of the lungs. Suppose a deal is made for price-fixing in New York between the big three or four gasoline companies and then the word is passed down to their companies in Canada and these companies in Canada do not know that the price has been fixed by the big companies in the States, there is actually in fact no one breaking the law in Canada. In effect, there is no one to prosecute. If this Commission were to...

Mr. Quinlan: They are not parties to the agreement. The question would be whether there was any situation where they were aiding or abetting in the agreement. That would be the basis on which you have to get at it; aiding and abetting in the doing of this. If they did that, then under the Criminal Code they would become parties to the agreement even though they might not necessarily be participating in the agreement. You would have to look at the particular facts of the case. It is rather hard to give an off-the-cuff opinion as to just what would be the situation as far as the law is concerned under those circumstances.

Mr. Foster: My last question concerns drug prices. We have a new bill coming in this session concerning this. Within the last year have there been any convictions for price-fixing of drugs?

Mr. Quinlan: Under the Combines Act?

Mr. Foster: Yes.

Mr. Quinlan: No.

Mr. Foster: How long since there has been one?

• 2135

Mr. Quinlan: I do not recall that we have ever had any convictions in Canada against drug companies for price-fixing.

Mr. Baldwin: Mr. Chairman, I have to leave and I will not be able to ask the question I wanted to ask. I wonder if I could just ask one supplementary question concerning this. Would Mr. Quinlan like to comment on whether or not a remark by a politician as to his age which was not correct would be considered misleading advertising?

Mr. Quinlan: It does not relate to price.

[*Interpretation*]

The Chairman: Mr. Guilbault.

Mr. Guilbault: Mr. Chairman, I would like to put a question concerning a situation which smacks of price discrimination. This is practised quite frequently and especially where carpets, drapes, furnishings in general and electrical appliances are concerned. Often, distributors advertise a very low price for an inferior quality appliance. And then, when you go there, the very low price product is no longer available and the salesman shows you superior quality products which, of course, are more expensive. I have seen examples of products advertised in the Wednesday paper and which were no longer available early Thursday morning. The low-priced product does not exist and they try to sell us another product which costs once and a half more but which is of much better quality. As far as the law is concerned, would that be considered as a violation of the law and can it be controlled?

[*English*]

Mr. Quinlan: As far as the Combines Investigation Act is concerned I do not think in this type of representation that would raise any question under any of the substantive

provisions of the Act. So far as the price is concerned, in that situation you are not making any representation as to the ordinary price of the product. In effect, what you are doing, I think they call them nailed down products—is advertising something at a very greatly reduced price and then when you get there they will not sell it to you and they will try to put you on to something else. It is either a nailed down product or what they call “bait and switch”. They bait you with a particular product and then try to sell you another one.

[*Interpretation*]

Mr. Guilbault: Another procedure along these lines, is often used especially in the clothing industry. Take a tailor selling suits at, let us say \$80.00. Then, he decides to organize a sale. He advertises suits whose \$80.00 price tags are replaced by \$60.00 tags. To make this sale, he buys suits of lower quality which normally would be sold for \$60.00. This happens fairly often. Can the law deal with such cases?

[*English*]

Mr. Quinlan: In this situation it would certainly be a matter that we would have to look into under misleading price advertising because the goods he is selling were not formerly \$80. He is selling a \$60 suit at \$60 and representing the ordinary price as being \$80. I think if that type of situation came to our attention we would inquire into it.

Mr. Guilbault: Thank you.

The Chairman: Shall item 10 carry?

Mr. Howe: I have one further question in connection with Box 99. Are you receiving any assistance from articles of the kind that appear in newspapers these days that have action lines such as the *Telegram* and also the *London Free Press*? You have probably noticed those in the papers. Are they bringing cases to your attention that you sometimes investigate?

• 2140

Mr. Grandy: With respect to Box 99 and the kind of complaints we get in the consumer field generally—we are getting some help from these hot-line broadcasts, and so on—I do not really know whether any of those have related to complaints that would fall under the Combines Act.

Mr. Howe: There are also some principles involved in some of them with regard to con-

tracts that are written up in those columns as well. Do those people sometimes refer their cases to you for advice or assistance in clearing them up?

Mr. Grandy: You are really getting beyond the ambit of the Combines Investigation Act, now.

Mr. Howe: Box 99 is primarily consumers, is it not?

Mr. Grandy: Yes it is, primarily. I had thought we would probably deal with those under Item 25 and we would also have Miss Ordway answer some of the questions about the Box 99 complaints, which she administers, if that would be agreeable.

The Chairman: If you have questions to ask on Box 99 perhaps that could come under item 25, consumer affairs.

Mr. Forrestall: As an interloper, could I ask Mr. Quinlan a couple of short questions. I hope I am not misinterpreting what you said before but is it proper for you to answer this question. Has your Department any complaints in the last 18 months about the hearing aid industry, and, if so, have you looked into them and with what result?

Mr. Quinlan: On whether we have received of complaints I could not answer positively, and on whether we are making an inquiry into the industry I would have to give the answer that I have given to other questions of this type, that we cannot confirm or deny that an inquiry into a particular industry is taking place.

Mr. Forrestall: That is fine. I thought that would be the position you would be in.

Had you completed an investigation into it as a result of a complaint you might have felt free to say, "Yes, we did, and this was the conclusion"?

Mr. Quinlan: No; if we have made an inquiry and it proceeds to the point where the director believes there are grounds for alleging an offence he can either submit the matter to the Restrictive Trade Practices Commission, which would result in a published report, or he can turn the matter over to the Attorney General. With the publication of a report, or the matter getting into the courts, it then becomes in the public realm.

Mr. Forrestall: I have two specific questions, Mr. Quinlan. Under Vote 10—and I am not attempting to be facetious—how is it that

cartage has gone from \$300 last year to \$8,500 this year?

Mr. Quinlan: I may say that I have been waiting for that question. This is simply an error.

Mr. Forrestall: Well, correct the record.

Mr. Quinlan: Yes. As you will note, our allowance for travelling in 1967-1968 was \$40,000 and in 1968-1969 it is \$42,000 when we checked our expenditures in 1967-1968 they were around \$48,000 to \$49,000. We had additional staff, and we saw that it was pretty well impossible to get along on \$42,000.00 with additional staff we would be making more inquiries and we were successful in obtaining a further \$8,000. Somehow, in the printing, this got into...

Mr. Forrestall: It was put in the wrong column?

Mr. Quinlan: Yes. It should be in the travelling allowance.

Mr. Forrestall: So the item should be \$500?

Mr. Quinlan: That was the intention, yes. As it is now it is \$8,500 but that does not matter, because you can make the transfer between the votes later if you run out of...

Mr. Forrestall: That is fine. I was not suspicious of anything there.

Mr. Quinlan: No. We were rather surprised when we saw it ourselves in the printing.

Mr. Forrestall: Mr. Quinlan, is it indicative of the increased level of your work—the pace of your work—that telephones and telegrams have gone from \$7,000 to \$15,000.

Mr. Quinlan: It is, in part. Part of it is that we moved this year from the Justice Building to the Canadian Building to come in with the rest of the Department. There is a fairly substantial charge there, because of the number telephones we have for removing and installation; and because we are spread out on different floors in this building we largely use the bottom type telephones with intercom between certain people. This is necessary, and it is somewhat more expensive, as well. It is necessary, however to carry on an efficient operation.

Mr. Forrestall: Thank you, Mr. Quinlan.

The Chairman: Mr. Osler?

Mr. Osler: Mr. Chairman, I have two questions for Mr. Quinlan. I apologize for coming in late, sir, and if I am repeating anything please stop me.

To get back for a moment to the gasoline situation, has your Department any idea what proportion of real independents there are, either in the country as a whole or in various parts of the country? By independents I am referring to those who are not part of the wholly integrated...

Mr. Quinlan: As far as the retail dealers are concerned?

Mr. Osler: Yes.

• 2145

Mr. Quinlan: In recent years we have received from retail dealers very few complaints about not having control over their own prices. We have had some complaints when there has been a consignment arrangement, but under a consignment arrangement the consignee is still the owner of the gasoline. He is selling it and can name the price. There is not a resale price maintenance set up in that situation.

Mr. Osler: But you have no idea of the relative proportions of those who are...

Mr. Quinlan: I could not give you statistical figures, no.

Mr. Osler: In my city, Winnipeg, there are a few apparently eminently successful independents. One that I can think of is apparently an oil and gas retail merchant and nothing more. Another is a very large and very successful motor car dealer who consistently over the years has sold gasoline at prices much lower than you would ordinarily expect. Is that sort of person really using a loss leader or is he a genuine gasoline merchant?

Mr. Quinlan: I would doubt that in that situation he is operating on a loss leader basis, because I know of whom you are thinking, and his volume is pretty substantial.

Mr. Osler: Yes. It amazes me, from a consumers' point of view, that others cannot do just as well.

Mr. Quinlan: I know that for some time—I do not know whether it is still there—you had a self-serve operation just outside the limits.

Mr. Osler: A self-service operation, and another that is not self-service but is part of a retail motor car and garage business.

I wondered if this was just part of the overhead, to bring the cars in for service, or if it is an operation that genuinely can make money. This is an independent. I do not understand why more people are not following his example, because, as you say, you produce volume and...

Mr. Quinlan: My assumption would be that he is operating economically so far as he is concerned. Otherwise I would expect that there would be quite an attack on him for loss-leadering and selling at unreasonably below prices, trying to put people out of business.

Mr. Osler: Again from a consumer's point of view, why cannot we have five of those in a place like Winnipeg instead of one or two? If a man can make money at it why are there so many that are charging the same price? I will put it that way.

Mr. Quinlan: Frankly, I do not know what the answer to that is.

Mr. Osler: Is there no way of getting at him? I do not mean at him, but at...

Mr. Quinlan: No; I do not know just how you would get at it. I suppose you could try to do a statistical sampling, but whether or not that would really give you the answer I do not know. You might have to go outside the industry to find some answers to it.

Mr. Osler: Yes. My next question, Mr. Chairman, is...

The Chairman: Shall Vote 10 carry?

Mr. Osler: I do not think that my questions, Mr. Chairman, are going to greatly illuminate anything and if no one else has any questions I will forego mine. If there are any questions I would like to retain my spot in the questioning, but if there are not I am willing to forego.

The Chairman: I adjourn the Committee until 9.30 on Tuesday morning.

OFFICIAL REPORT OF MINUTES
OF
PROCEEDINGS AND EVIDENCE

This edition contains the English deliberations and/or a translation into English of the French.

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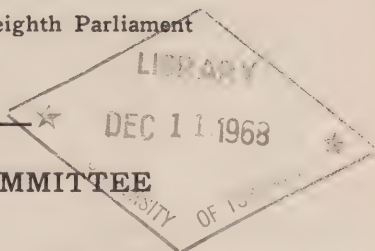
Translations under the direction of the Bureau for Translations, Secretary of State.

ALISTAIR FRASER,
The Clerk of the House.

HOUSE OF COMMONS

First Session—Twenty-eighth Parliament
1968

STANDING COMMITTEE
ON



HEALTH, WELFARE AND SOCIAL AFFAIRS

Chairman: Mr. GASTON ISABELLE

MINUTES OF PROCEEDINGS AND EVIDENCE

No. 5

TUESDAY, NOVEMBER 12, 1968

RESPECTING

The items listed in the Revised Main Estimates for 1968-69, relating to
Consumer and Corporate Affairs.

WITNESSES:

From the Department of Consumer and Corporate Affairs: Messrs.
J. F. Grandy, Deputy Minister; J. J. Quinlan, Q.C. and F. C. Gascoigne,
Deputy Directors of Investigation and Research, Combines Investiga-
tion Act; Roger Tassé, Assistant Deputy Minister (Corporate Affairs);
L. Lesage, Q.C., Director of Corporations Branch; A. M. Laidlaw, Q.C.,
Commissioner of Patents; M. Robitaille, Registrar of Trade Marks.

ROGER DUHAMEL, F.R.S.C.
QUEEN'S PRINTER AND CONTROLLER OF STATIONERY
OTTAWA, 1968

STANDING COMMITTEE
ON
HEALTH, WELFARE AND SOCIAL AFFAIRS

Chairman: Mr. Gaston Isabelle,

Vice-Chairman: Mr. Steve Otto

Mr. Alexander,
Mr. Forget,
Mr. Fortin,
Mr. Foster,
Mr. Gendron,
Mr. Godin,
Mr. Guilbault,

Mr. Howe,
¹Mr. Knowles (*Winnipeg
North Centre*),
Mr. McBride,
Mr. McGrath,
Mr. Osler,
Mr. Paproski,

Mr. Robinson,
Mr. Rochon,
Mr. Saltzman,
Mr. Thomas
(*Maisonneuve*),
Mr. Valade—(20).

(Quorum 11)

Gabrielle Savard,
Clerk of the Committee.

¹ Replaced Mrs. MacInnis on November 8.

ORDER OF REFERENCE

Friday, November 8, 1968.

Ordered,—That the name of Mr. Knowles (*Winnipeg North Centre*) be substituted for that of Mrs. MacInnis on the Standing Committee on Health, Welfare and Social Affairs.

ATTEST:

ALISTAIR FRASER,
The Clerk of the House of Commons.

MINUTES OF PROCEEDINGS

(Text)

Tuesday, November 12, 1968.

(5)

The Standing Committee on Health, Welfare and Social Affairs met this day at 9.55 o'clock a.m. The Vice-Chairman, Mr. Otto, presided.

Members present: Messrs. Foster, Gendron, Howe, Knowles (*Winnipeg North Centre*), McBride, McGrath, Osler, Otto, Paproski, Robinson, Thomas (*Maisonneuve*)—(11).

Other Member present: Mr. Stanley Haidasz, Parliamentary Secretary to the Minister of Consumer and Corporate Affairs.

In attendance: From the Department of Consumer and Corporate Affairs: Messrs. J. F. Grandy, Deputy Minister; J. J. Quinlan, Q.C. and F. C. Gascoigne, Deputy Directors of Investigation and Research, Combines Investigation Act; Roger Tassé, Assistant Deputy Minister (Corporate Affairs); L. Lesage, Q.C., Director of Corporations Branch; A. M. Laidlaw, Q.C., Commissioner of Patents; M. Robitaille, Registrar of Trade Marks.

The Committee resumed consideration of the items listed in the Revised Main Estimates for 1968–69, relating to Consumer and Corporate Affairs.

Vote 10 — Combines Investigation Act—

Administration \$1,354,200
was called.

Messrs. Grandy, Quinlan and Gascoigne supplied information to the Members.

On motion of Mr. Thomas, seconded by Mr. Paproski,

Resolved (unanimously),—That the proceedings from the opening of the meeting be printed as part of the official record of the Committee.

Vote 10 was carried.

On *Vote 15*, Corporations Branch \$ 280,000,
Messrs. Grandy, Tassé and Lesage answered questions of the Members.

Vote 15 was carried.

On *Vote 20* — Patent Division, Copyright and Industrial
Designs Division and Trade Marks Office, etc. \$4,522,400,
Messrs. Grandy, Laidlaw and Robitaille supplied information to the Members.

Vote 20 was carried.

Vote 25 — Consumer Affairs Branch, etc. \$6,004,400
was called and was allowed to stand.

At 11.10 o'clock a.m., the Committee adjourned to 9.30 a.m. Thursday, November 14.

Gabrielle Savard,
Clerk of the Committee.

EVIDENCE

(Recorded by Electronic Apparatus)

Tuesday, November 12, 1968.

• 0955

The Chairman: We now resume consideration of the Items listed in the Revised Main Estimates for 1968-69 relating to Consumer Corporate Affairs.

The officials here are: Mr. Grandy, Mr. Quinlan, Mr. Gascoigne and Mr. Haig, Chief of Administrative Section. We were discussing Vote 10, Combines Investigation Act, Administration, \$1,354,200 which was allowed to stand at the last meeting.

I have Mr. Osler and Mr. Robinson. Mr. Osler?

Mr. Osler: Mr. Chairman, I do not have very much else that I would like to ask but I would like something clarified. We were talking about gasoline companies and that sort of thing. I wonder how far down the line one takes this stand. It seems to me that newspapers often come close to being in the same sort of situation in the local atmosphere as gasoline companies might be in a national or an international atmosphere.

Presumably they get around this by saying that they do have competition for their advertising space—their advertising rates are different—but are they different when they are offering the same service per unit per person? In other words, their advertising rates are predicated on the number of people who are receiving their paper and the sale price of the newspaper is identical in every case. There is never one newspaper that puts up its price where another one does not.

Mr. J. J. Quinlan, Q.C., (Deputy of Investigation and Research, Department of Consumer and Corporate Affairs): The position we have taken in the Branch on the question of identity of prices where you have a homogeneous article and there are only relevantly few sellers is that mere identity of price by itself is not evidence of an offence against the Combines Act. You must have something overt and the Director has taken the position in situations like this that mere identity of price does not give him reason to

believe—he must have some other evidence—and the fact that, say, one newspaper says it is increasing its price today from 7 cents to 10 cents and another one comes out later with the same announcement does not necessarily mean that there has been collusion. It may be a price leadership situation.

Mr. Osler: Because their service and their advertising rates might be different?

Mr. Quinlan: Well no, but the tendency would be for one to come reasonably close to or the same as the other, although in some cases if one does not move up then the other one has to go back under normal situations.

Mr. Osler: It seems to me the same observation would apply to the majority of general insurance companies. Mind you, I think it works to the advantage of the industry and the public. I was in the general insurance business myself but I have always wondered under what legal basis underwriting boards operate because an underwriting board is really the majority of the strongest companies getting together and deciding how they are going to attack rating problems.

Mr. Quinlan: So far as the insurance business is concerned, in the general business you have three types of companies; board companies which are members of the CUA, conference companies and what are called the independent companies. While the board companies agreed upon rates,—in fact, a condition of membership, I believe, was that they observe the minimum rates—with the conference they had suggested rates and, of course, the independents were free to follow the rates they chose.

• 1000

On that basis, where you might have had agreement on rates, say, among one group, there would undoubtedly be some restriction of competition, but the Director's view was that this would not be an undue restriction in that situation. There were ample sources of insurance beyond the particular group. As a

matter of fact, in the annual report for last year, I believe it was, we dealt with the subject of insurance at some length. We gave developments to date. It is too long for me to read but it is at pages 19 to 22 of our annual report for 1967. If you do not have a copy of that available I can send you one, Mr. Osler.

Mr. Osler: I have just one other question and this is probably just as easy for you to solve as the other two. Looking at the other side of the fence, you have some industries where the capital requirements are very standard and the content of the product boils down pretty much to the labour content. When you have something like the typographers union that is very strong and sets rates uniformly across the country, is this not the same sort of thing the gasoline companies are doing, in that the shareholders of a particular printing company probably are buying the best equipment they can afford because that is the most efficient way to do it?

So, presuming that they all have a relatively high standard of printing equipment, the only other major input is their wages which are absolutely non-negotiable and standard through the industry. Is this not really, in a reverse way, the same sort of thing the gasoline companies are doing?

Mr. Quinlan: Are you talking about the union getting together on wage rates?

Mr. Osler: That is right.

Mr. Quinlan: So far as the question of unions is concerned, there is a specific exemption applying to workmen in the Combines Investigation Act. It was in the original statute when it was enacted in 1889 as an act for dealing with suppression of trade. It says that nothing in the Act shall be construed to apply to combinations of workmen or employees for their own reasonable protection as such workmen or employees, and negotiations over wages, of course, is considered a matter for their own reasonable protection, and striking in that respect, and so on.

Mr. Osler: That is all I have to say.

The Chairman: Mr. Robinson?

Mr. Robinson: Mr. Chairman, I want to follow up for a minute the question that was raised last day with regard to the retailing of gasoline and I am wondering if any investigation is made by the Department into so-called retailers associations with regard to price setting?

Mr. Quinlan: There have been inquiries. The one in Vancouver I mentioned involved the setting of prices at the retail level through an association, at least that was the allegation. They were convicted but were acquitted on appeal.

Mr. Robinson: I am thinking of a situation where an outlet for a chain of stores—I think it was Canadian Tire Corporation, Limited—wished to set up a number of gasoline bars, as they call them, throughout the country and they ran into difficulty, apparently, with retailers organizations or associations that are operating throughout the country with the individual lessee of a gasoline outlet where apparently they set the rates, as I understand it, and the larger company or larger distributor with the gasoline bar is able to sell the gasoline at a lower price, possibly on the basis that they have many other products and it is an enticement to people to purchase their other products. They do this by offering them a lower price for gasoline. I wonder whether there is any investigation into this kind of price fixing?

Mr. Quinlan: There is a number of non-brand, shall we say, organizations that are selling below the price of brand gasoline. I know it occurs in Ottawa and presumably it happens in other cities as well but so far as retail dealers are concerned, if they get together to fix prices that can be just as much an offence against the Combines Investigation Act as if companies agree to do it.

Mr. Robinson: Could you explain why the individual purchaser, for instance, would in effect pay more for the same product just because it has a brand name on it?

• 1005

Mr. Quinlan: I do not know just what the reason is but, of course, the reason for some of it is that people prefer to deal with the lessee of a particular service station. He does all their work, mechanical and otherwise, and they prefer to deal with him on a regular basis and they buy their gasoline from him as well. That may be one of the reasons.

Mr. Robinson: I am thinking of another product that might fall within the same ambit. This concerns the purchase of tires. You could buy a name-brand tire, say Goodyear, Firestone or Uniroyal, I suppose—any of these brands—and you will pay more for it than if you buy the same tire without the brand name on it, say, through Canadian Tire Corporation Associate

Stores. Why is there this differential in price when it is the same product?

Mr. Quinlan: I presume it is because the brand name is regarded as giving something extra. People may regard it as that.

Mr. Robinson: What does it give extra? I fail to see it. The product is exactly the same. Why should you have to pay more for it by getting the brand name?

Mr. Quinlan: Presumably the market is competitive so you are able to get a better price for the tire that is a non-brand name and people are prepared to pay that; it would be a competitive price.

Mr. Robinson: In my view, with respect, it appears that people just do not know they are getting the same brand. They are not getting the information they should if they are told that when they buy a Good-year, Firestone or some other tire with a brand name and the brand name is on it they know what they are buying, but you go to some other dealer such as Canadian Tire Corporation Limited and you buy a first-grade tire that has been made by one of the top companies. It is considered to be a first-grade tire equal to that of other companies with the name brands except that it does not have the name brand on it. It seems to me that the people should know they are getting the same product and they are buying it for less.

Mr. Quinlan: It may be the power of advertising that is doing it.

Mr. Robinson: Leaving that for a moment, I should like to...

Mr. Osler: May I ask a supplementary question?

The Chairman: Yes.

Mr. Osler: Is this not, then, very close to a company's advertising something that, in fact, it is not delivering? If somebody says, for example, "Firestone is the best" and you can prove that you can buy an identical tire made by Firestone under a different name, then you have almost proven that the advertisement saying "Firestone is the best" is not telling the truth.

Mr. Quinlan: I do not know whether that would be considered as simply puffing or whether it would be a matter under section 306 which prohibits false advertising, but at the moment section 306 is not under our

jurisdiction. The ministers have stated, as you may remember last year in the Omnibus Bill, that section 306 was to be moved into the Combines Act as section 33D, and I understand ministers have said that it will be.

Mr. Robinson: Is the Department interested in such matters as I have just mentioned, where they are, in effect, fixing the price just by taking the brand name off?

Mr. J. F. Grandy (Deputy Minister, Department of Consumer and Corporate Affairs): Yes, we are interested in this in the context of the whole program of consumer information and in the context of the role we expect to have in relation to advertising. Whether that means this particular kind of thing can really be dealt with I would not want to say at this stage, because it would not be an easy matter to ensure that in all cases a non-branded product which happened to be of the same quality as the branded product was clearly described as such and that the point really got across to everybody.

Mr. Robinson: Mr. Chairman, what I was really trying to get to is the kind of thing that we have discussed from time to time in relation to drugs where we talk about generic drugs and brand name drugs and it seemed that people were paying a higher price for the same thing just because it has a brand name on it.

I think the same thing applies exactly in the tire business. Here you are, buying the same tire but you are paying less for it or, putting it another way, if you have the brand name on it you are paying \$10 or \$15 more for the tire, and it seems to me that people should know they can buy the same tire for less without the brand name.

• 1010

I think this is an area in which we should be getting involved, not only so far as drugs are concerned but for tires, gasoline and anything else of this nature. Perhaps there is some puffing here; perhaps the advertising is getting out of hand; perhaps we should be setting some limits on how far you can go in advertising to puff up your product in order to inflate the price when the standard of the product is exactly the same as one without the brand name on it. I would leave this open to you to consider further, and along with that I am wondering to what extent we are actually carrying out research in the Department. What are the areas of research that we are actually involved in?

Mr. Quinlan: I cannot speak for the rest of the Department. The other evening, I believe you were here, I told you the research matters in which we in the combines branch were engaged.

Mr. Robinson: I was concerned more at this time with regard to the restrictive trade practices, whether there was any research in this area at all?

Mr. Quinlan: The subjects I mentioned the other night are: a general merger survey; a research enquiry into concentration; and a research enquiry on bid depositories in the construction industry.

Mr. Robinson: What research are we doing with regard to the everyday little products that the ordinary little man is buying, apart from drugs. I understand there has been a great deal of investigation in this field.

Mr. Quinlan: We did have a published report in the drug field, yes.

Mr. Robinson: I notice there is no special category for public advertising in this particular budget. Is there any advertising for this Branch?

Mr. Quinlan: For this Branch, no. There is no advertising for the Branch. Only for recruiting, that is all.

Mr. Robinson: I see. Under restrictive trade practices, is there any research or investigation going on through this Branch with regard to so-called "tied" houses?

Mr. Quinlan: We did an enquiry, sir, some years ago into what they called the T.B.A. arrangements in the service station field—tires, batteries and accessories—and the Commission made some recommendations in its Report. That was a research enquiry. The matter was referred to at the time the reference was made by the Government to the Economic Council. The advice of the Economic Council was asked on this as well because, as the Minister stated in his press release, while the Government was sympathetic to the recommendations, he thought that to institute these as criminal law, which is the basis of the anti-combines legislation, would not give them the relief that they sought. So the matter was referred as well to the Economic Council along with other aspects relating to combines mergers and restraints of trade.

Mr. Robinson: I understand at the present time that if a person wishes to go into a gasoline service station

business, then to become a lessee of one of the major oil companies he is required to sign a contract that he will purchase and sell their products to the exclusion of any other company's products. He will not only not have any products of competitors on his station, he is not to have any products of an equal standard that might be without brand names, shall we say. I am wondering to what extent there should be some control over this so that he has more freedom of movement, that he has more freedom to act as an entrepreneur in this gasoline service station business?

• 1015

Mr. Quinlan: This report to which I referred made recommendations to deal with what they call directed buying and full-line enforcement.

Mr. Robinson: Is this report readily available?

Mr. Quinlan: Oh, yes.

Mr. Robinson: I wonder if I could get a copy.

Mr. Quinlan: I would be glad to provide you with it.

Mr. Robinson: I notice an item called "fees and expenses of legal counsel, accountants, special assistants, reporters and witnesses" here under the Restrictive Trade Practices Commission. The amount established for 1967-68 was \$11,000 and the same amount is indicated for 1968-69.

Mr. Quinlan: I think that is rental of office equipment you are looking at.

Mr. Robinson: Oh, is it?

Mr. Quinlan: That \$11,000.

The Vice-Chairman: No, under the Commission.

Mr. Quinlan: Oh, under the Commission, I am sorry.

Mr. Robinson: I was wondering, if I have the right account here, if there was any improvement or changes or anything additional going on in the Department this year over last year. Are you doing more research or more investigations? Is this sufficient?

Mr. Quinlan: This item deals only with the Restrictive Trade Practices Commission, that is, if they should retain counsel or professional services for their assistance. The main expense on this item will be found on the previous page under "fees and expenses

of legal counsel" for our Branch, which shows a substantial increase from \$150,000 to \$185,000.

Mr. Robinson: Yes, I notice that.

Mr. Quinlan: The Branch of which Mr. Henry is Director is the Branch responsible for the investigation. When an investigation is made, then the matter may come before the Restrictive Trade Practices Commission for a hearing and a report, but the actual investigation is done by the Branch of which Mr. Henry is the Director.

Mr. Robinson: I have no further questions under Item 10.

The Vice-Chairman: Next I have Mr. Knowles.

Mr. Knowles (Winnipeg North Centre): Mr. Chairman, I was not on this Committee last week, so if I duplicate a discussion which took place perhaps you will stop me. I believe that Mrs. MacInnis raised some questions about quinidine tablets when she was on the Committee last week.

Mr. Quinlan: No, I do not believe so.

Mr. Knowles (Winnipeg North Centre): Is that not correct?

Mr. Quinlan: No, I do not believe so. I do not recall that.

Mr. Knowles (Winnipeg North Centre): Well if not, I will proceed with her material from the start.

I have here a copy of a letter which Mr. Turner, then Registrar General, wrote to Mrs. MacInnis on May 4, 1967, regarding the existence of an international cartel in which Dutch interests played a prominent part. This had to do with quinidine sulphate tablets, and I understand that these are a derivative of quinine itself. Mr. Turner's letter would indicate—as a matter of fact perhaps I might read on:

The situation is rather complicated but the evidence given appeared to indicate the existence of an international cartel in which Dutch interests played a prominent part. The United States maintained a large stockpile of quinine (of which quinidine is a derivative). The presence of this stockpile had the effect of keeping prices down. Then the United States decided to sell a large part of its stockpile. Most of the released supplies were purchased by the cartel. Having gained control of most available supplies of the drug, the cartel

increased prices, reportedly as much as 500 per cent.

Later in his letter Mr. Turner referred to some clippings that he enclosed, and they are here, indicating a rather serious situation. I understand that quinidine is a drug used by heart patients as well as by others. At any rate, Mrs. MacInnis had complained about this and had called upon the Branch to do something about it. This is the key sentence of Mr. Turner's letter.

While it appears clear that increased prices have been due to the action of the cartel, all of the operations of the cartel have taken place outside Canada and beyond the reach of Canadian law.

That letter was dated May 4, 1967, from Mr. Turner to Mrs. MacInnis.

I have here another clipping. This is not one of those Mr. Turner sent Mrs. MacInnis. This is another one from the *Toronto Star* of some date in October, 1968, indicating that 15 drug firms in the United States had been charged with conspiracy under United States law. The officials will correct me if I am off base here, but it looks to me, from my reading of this material, as though these United States firms were in the same relationship to the Dutch interests or to the international cartel as the Canadian firms, and yet it would seem that the United States was able to lay charges against its firms but Mr. Turner said that the law in Canada is such that the Canadian firms are beyond the reach of Canadian law.

• 1020

I have two questions. First, is that a correct statement of the case? And second, if it is, should not something be done about the Canadian law?

Mr. Quinlan: I do not know all the details of the American case and where the charge has been laid. Presumably they had evidence tying in some of the American firms with the alleged international cartel. You will notice that although there are a number of co-conspirators named in that case they did not name any Canadian companies as such.

Mr. Knowles (Winnipeg North Centre): You are right, there is no reference to Canadian firms. Six Dutch firms and three from West Germany were among those involved in yesterday's indictment.

Mr. Quinlan: As far as jurisdiction is concerned, to be able to charge them they must be present in some way in the United States. If a company is outside the United States I do not see how they can get at it through a charge in the United States.

Mr. Knowles (Winnipeg North Centre): Is there nothing that we can do with the Canadian firms that seem to have gone along with these huge price increases, even up to 500 per cent.

Mr. Quinlan: I do not know that there is necessarily any evidence that the Canadian firms were a party to any conspiracy. I mean, in order to charge them, they would have to be party to the conspiracy. If they were buying overseas they presumably would have to buy at the price they could get.

Mr. Knowles (Winnipeg North Centre): In other words, you are telling me they were just caught by the prices set by the cartel.

Mr. Quinlan: The fact that they have not been named as co-conspirators here would lead to that conclusion, because this deals with not only US companies but companies outside the US that are charged in this alleged conspiracy.

Mr. Knowles (Winnipeg North Centre): Is it true of this kind of law generally that there is no way to get at international cartels except where there is conspiracy?

Mr. Quinlan: You have to have somebody involved within your jurisdiction before you can get at it. In other words, if there was conspiracy of foreign companies to effect prices at which they were going to sell to Canada but they had no representation in Canada, I do not see how we could get at them.

Mr. Knowles (Winnipeg North Centre): Do you know whether anything further has happened with respect to this case?

Mr. Quinlan: On the question whether any inquiry is made, Mr. Knowles, the position taken by the director is in accordance with the statement of policy by the Minister in the House, that we never confirm or deny whether an inquiry has taken place unless and until a report is published.

Mr. Knowles (Winnipeg North Centre): I have just one other question. I would like to follow up something that Mr. Robinson was saying a few minutes ago when he expressed the view that the Department as a whole should engage itself pretty actively in a process of consumer information. Is there an adjustment taking place in the thinking of the Department? I have in mind the fact that at one stage of the game it was felt that the one and only effective way for a government to protect a consumer was by the maintenance

of competition, hence the Combines Investigation Act, hence the legislation against resale price maintenance and so on. Is Mr. Robinson not correct, that maybe now governments could do more to protect the interest of the consumer by an aggressive program of information so that people will not get rooked, and should not this activity at least equal the activity of the Combines Investigation Branch?

Mr. J. F. Grandy (Deputy Minister, Department of Consumer and Corporate Affairs): Yes, I think this philosophy was really responsible for the creation of the Department as it is now and in particular of the Consumer Affairs function in the Department. It is recognized that there are many aspects of the problem of protecting the interests of the consumer that cannot be left to the Combines Act itself and these have to be dealt with in other ways. I am sure we will get a good deal more discussion of this on Vote 25, but there is no doubt that this is our approach and our intention.

• 1025

The Vice-Chairman: Thank you, Mr. Knowles. Mr. Howe is next.

Mr. Howe: Mr. Chairman, during the inquiries, particularly the other night, there was an inference that there are times when this Branch of the government has not enough people to do investigations and things like that. Do the Consumer Affairs Department and the Combines Branch co-operate to the extent of interchanging personnel when there are investigators available who may be able to do a competent job in either department.

Mr. Quinlan: In particular situations we have obtained through co-operation, assistance from other departments when we needed additional people.

Mr. Howe: I think one of the suggestions of the Glassco Commission was that there should be more co-operation and co-ordination in this way between departments, rather than when a new project comes up transferring people from a department which is not particularly busy at the time.

Mr. Quinlan: However, you are limited to the extent you can use outside assistance because it does take some time to train a person to do investigations in this particular field. It usually takes several months to train an investigator. It depends on the type of inquiry received whether you can provide assistance, and in those not so difficult cases you can.

Mr. Howe: Among other things, Mr. Robinson was speaking about retail associations that sometimes control competition in the particular community. I may be stepping into a sacred cow area now but I note in today's paper that Ontario doctors are to raise fees ten per cent, I also sometimes think that the legal profession and dentists set fees, and in the Drug Committee we heard where there was a set fee for prescription drugs. Has any investigation been conducted on the necessity of this, hearing in mind the implication might have on the cost of living? As we all know, everybody uses these services, some to the same extent as they buy from a store—on a daily basis.

Mr. Quinlan: Professional services—you mentioned medical and others—are considered pure services and, as such they do not come within the purview or ambit of the legislation.

Mr. Howe: You mentioned pure services.

Mr. Quinlan: Pure services, yes.

Mr. Howe: What are impure services?

Mr. Quinlan: For instance, the legislation mentions transportation, storage and rental of articles—in other words there is some association with an article in the service. They are specifically mentioned in the legislation and come within the purview of it.

As far as services not within the legislation are concerned, our Research Section has completed a study into that aspect of it, which also included professional sports.

The Vice-Chairman: Excuse me for a moment, Mr. Howe. I see a quorum and I would ask for a motion that all the recorded proceedings from the opening of the meeting be printed this morning as part of the official records of the Committee.

Mr. Thomas: I so move.

Mr. Paproski: I second the motion.

Motion agreed to.

Mr. Howe: You have not that report as yet, Mr. Quinlan?

Mr. Quinlan: No, and the report is not being made public. It was an internal study but it is being made available to the Economic Council in their study of the legislation.

Mr. Howe: Because so many people are being brought under this is the Department giving any thought to bringing under this organization professional people as well?

Mr. Quinlan: The Minister stated on estimates last year that since services account for a substantial part of the gross national product some consideration should be given to the matter, and I believe Mr. Basford made some reference to it in the budget speech on Friday.

• 1030

Mr. Paproski: I have a supplementary question, Mr. Chairman. Does this now include the legal profession, the medical profession and so on?

Mr. Quinlan: The Minister merely said that this is something to which consideration should be given, and I would not want to anticipate government policy on this matter.

Mr. Howe: It is rather interesting to note on page 2591 in the Commons Debates of Friday that doctors, surgeons, engineers, architects, lawyers, notaries and dentists are at the top of the list with regard to earnings—much higher than business proprietors who are always under fire by Consumers Affairs and other people in that area.

With regard to some of the things that Mr. Robinson was saying, it is not true that increased competition does not necessarily reduce prices?

Mr. Quinlan: I will leave that for my colleague, Mr. Gascoigne, who is an economist.

Mr. F. C. Gascoigne (Deputy Director of Investigation and Research (Combines Investigation Act), Department of Consumer and Corporate Affairs): The only thing I would hazard on that subject is that the allocation of investment funds and of the means of production is closely related to the prices at which these things are valued, so that if you have an industry in which prices are very high due to a large demand and a low supply, resources will be attracted into that industry and this will have the tendency of depressing the prices, and vice versa.

Mr. Howe: But are there many areas where there are short supplies of merchandise these days?

Mr. Gascoigne: Take for example the drug industry. I was reading an article the other day by a well-known

professor of economics in the United States in which he was arguing that the very high prices of drugs in the United States have been the result of the necessity of attracting capital into research and development, and that when the time comes that this sort of research and development is not demanded by the public then the prices will go down. But of course there is a great deal to be said about all these kinds of things besides the argument.

Mr. Howe: Is not research and development necessary in the drug industry?

Mr. Gascoigne: Are you asking me if it is necessary?

Mr. Howe: You implied that that was one of the high costs.

Mr. Gascoigne: Yes.

Mr. Howe: Well, is it not necessary? We know that research is very high in any industry. This is probably why Goodyear tires may cost more, as they are in the business of research all the time whereas when they sell an unbranded tire they do not have any money tied up in research and development.

Mr. Gascoigne: Well, certainly to the extent that research and development is demanded by the public it will have to be paid for, and it will have to be paid for through price.

Mr. Howe: Well, of course, this is competition to get something like a better mousetrap.

Mr. Gascoigne: This is competition; this is one aspect of competition.

Mr. Howe: But it does not necessarily reduce prices.

Mr. Gascoigne: Well, competition in research and development might increase prices if the products which have been the result of this research and development are highly demanded.

• 1035

The Vice-Chairman: Thank you, Mr. Howe. Mr. Foster?

Mr. Foster: Mr. Quinlan, my question relates to this international conspiracy or cartel situation. How much interchange of information is there between Canada and the United States and other countries concerning this? For instance, if you have information here that price fixing is taking place in the gasoline industry that

is affecting the Canadian consumer, do you forward this information to the Combines Investigation administration in Washington in order that this can be controlled?

Mr. Quinlan: With respect to the United States we have what is known as the Fulton-Rogers Understanding, which was entered into in 1959, I believe. It is a procedure of notification and consultation. We also have a somewhat similar procedure now being set up in the OECD. Canada is a member of the Committee of Experts on Restrictive Business Practices there, and the question of international co-operation is dealt with in our current Annual Report at page 20.

If there was a situation where we had a complaint here, to answer your specific question, and it appeared to us that this was a result of something being done outside Canada that we could not get at, then we would, of course, bring it to the attention of the country in question because there would be nothing we could do here to deal with it. The only possibility of anything being done would be if it came within the laws of that other country.

Mr. Foster: How many such cases do you have in an average year where you are forwarding information to another country?

Mr. Quinlan: I have no statistics but it is rather rare that this sort of situation would arise where we are not able to make an inquiry in Canada and deal with the matter here.

Mr. Foster: Have you ever had any outside the United States, for instance European countries?

Mr. Quinlan: I do not recall any at the moment.

[Interpretation]

The Vice-Chairman: Mr. Thomas.

Mr. Thomas (Maisonneuve): Mr. Chairman, I hope you can understand me without ear-phones. Mr. Robinson mentioned tires which do not bear manufacturer's name. I was wondering, if Mr. Robinson was sure that the product was, exactly, the same?

The reason, I am bringing this to your attention, is that I have been in industry myself and, at the time, my company had to take appropriate measures to preserve its reputation. A chain store had asked the company to provide special packaging for a particular article or else produce a product of inferior quality which could be sold on the market.

This, of course, would have been a trick on the consumer. The company did not wish its name to be placed on the labels of these boxes, or of these packages. That is why, I wonder whether the question of tires might not have something to do with quality.

I shall take this opportunity—I wonder if this question is relevant to item 10, or whether it is more relevant to item 25—to talk about weights and measures. The Department of Trade makes surveys in various industries, I believe, and makes some verifications, checks the scales and so forth. However, some products, when freshly manufactured, have a certain degree of humidity. I am thinking especially of brown sugar which contains a certain percentage of humidity, at the time of packaging; which loses a great deal of it during storage. Between storage and sale, the humidity drops, therefore, it weighs less. I was wondering if there was something we could do, by forcing the companies to add a given number of ounces to compensate for this loss due to evaporation? . . .

[English]

Mr. Grandy: On the first point, this is one of the complications about the kind of suggestion that was being made earlier about non-branded products that are of the same quality or are said to be of the same quality as the branded product. In some cases they are of the same quality and in some cases they are not.

In some areas there are standards set out, for example by the Canadian Government Specifications Board, which would allow one to say that a particular product was technically of about the same quality as another product. But in other cases where there are no standards, it is not always easy to judge whether the quality of the non-branded product is the same.

We do know that a number of chain department stores, for example, buy products such as refrigerators from a company that makes the same refrigerator and markets it under its own brand name and the department store sells it under a different brand name, often at a lower price. In those cases where you happen to know that, the product is obviously of equal quality. The same sometimes happens in the grocery trade where you have what they call "house brands" which again are often the same product made by a brand name manufacturer but sold under the name of the supermarket chain. But there are other cases where someone may claim that the non-brand product is of the same quality as the branded product and this may or may not be true. In some cases it will be true and in some cases it will not be true. Therefore it is a very difficult thing to be sure of.

• 1040

The other point really relates to the question of measurement of products where there is a loss of moisture, the problem of applying the Weights and Measures Act if there is a loss of moisture, or applying other legislation in that field such as the legislation that is administered by the Department of Agriculture. I think the short answer is that in cases where moisture and similar factors are relevant, allowance is made. In some products the problem is so great that it has not yet been possible to work out standards where the problem of moisture in particular is very serious. Does that answer your question?

Mr. Thomas (Maisonneuve): Thank you.

[Interpretation]

The Vice-Chairman: Are you through, sir?

[English]

Mr. Robinson: I have a supplementary. In view of a question that was raised by my friend and the reply that Mr. Quinlan gave to it, I think Mr. Quinlan has actually missed in part what I was trying to say with regard to the brand name products as against the non-brand name products. I am concerned about the situation where a company that has a very good reputation for quality in the field, such as Goodyear, manufactures a first-line tire which is then sold by another company with a very good reputation, we will say Canadian Tire Corporation, and it is sold as a non-brand name product. Now the people at Canadian Tire—and I have spoken to them—will say this is a first grade tire; this group came from Goodyear, or from Firestone or some other company, and they sell it as the best tire they have. It is certainly exactly the same in every detail, they will tell you, as the name brand product and yet you are purchasing the tire for perhaps \$10 or \$15 less. Now there is no suggestion at all that you are getting a product that is lesser in quality. You are getting the same brand, if I may say, although it does not have the brand name on it. This is the kind of thing that I am concerned about.

The Vice-Chairman: Mr. Robinson, we have heard your explanation. I think we will go on to Mr. Paproski now and then you can come back later on.

Mr. Paproski: Under "fees and expenses of legal counsel", could you explain, sir, who sets the standards as to what lawyers get paid per case or per fees? Who sets the standards and the amounts that lawyers

get paid, as far as your cases are concerned. Do you do this, or does the Department have any fee schedule for certain cases? Could you explain this?

• 1045

Mr. Quinlan: Our counsel are retained through the Department of Justice, and the setting of the fees and the taxation of the fees is done by that Department.

Mr. Howe: Is that a public document? I mean the fees that are set.

Mr. Quinlan: Not the rate, so far as I am aware. There have been questions asked from time to time as to expenses of a particular case, and the fees paid to counsel have been disclosed in that case. But I do not know that the particular rate has been.

Mr. Paproski: Then you would say that some probably cost more than others, is that right?

Mr. Quinlan: It depends on the type of case yes, for instance a misleading price advertising case compared to a conspiracy case that might last six weeks to two months in the courts.

Mr. Paproski: I see you are projecting here an extra \$35,000 for next year?

Mr. Quinlan: Yes.

Mr. Paproski: Can you explain why you think you may need an extra \$35,000?

Mr. Quinlan: Well, our recruiting is bringing us closer to establishment. We are practically up to establishment, and we are getting some additional positions, which means that we should be bringing more cases along.

The Vice-Chairman: Thank you, Mr. Paproski.

Item 10 agreed to.

The Vice-Chairman: I now call Item 15, Corporations Branch.

Consumer and Corporate Affairs
15 Corporations Branch

\$280,000

Shall Item 15 carry?

Mr. Robinson: Mr. Chairman, do we have a general statement to be made with regard to the Corporations Branch by a representative of the Department?

Mr. Grandy: We had not planned to have an opening statement because the Minister made a statement at the first meeting of the Committee. However, we would be glad to answer any questions that arise. We have with us Mr. Tasse, the Assistant Deputy Minister and Mr. Lesage, the Director of the Branch.

Mr. Robinson: Might I ask a question? What is the Corporations Branch doing with regard to the whole question of research? There seem to be many forms sent out to companies. They seem to be deluged with forms to complete and return for various reasons. Some of them I suppose are for the statistics for the Department of Consumer and Corporate Affairs, and so on. I am wondering if you would give us some indication of what research is being done and what all these statistics are being compiled for?

Mr. Grandy: We do not send out questionnaires from the Corporations Branch. There are certain statutory requirements about documents that must be filed annually, an annual financial return and an annual summary which states who the directors are and where they are located, and that sort of thing. But the Branch does not send out questionnaires, and is not engaged in research as such. We have been doing research in preparation for the revision of the Act, but that has been done with the assistance of a special task force under Dr. Dickerson, as a special operation.

Mr. Robinson: Would this be in part the item called "Professional and Special Services" with an allotment of \$2,400?

Mr. Lesage: Regarding that item of \$2,400 for professional and special services. A part of it so far has been applied to the payment of professional fees, and to date we have reached \$220. But the big amount of approximately \$2,000 which was forecast last year was for special services. It was intended to be used for a reproduction of our index of names. This index comprises approximately 1 million cards, on which we have the names of all the companies incorporated since Confederation, provincially and federally. This is a unique record in Canada and if it were to be lost it would be impossible to replace, and because of technical difficulties or perhaps because of technical facilities which will be available only in the near future, the program is being postponed at the present time. That

is the reason why I do not think that we are going to spend that \$2,400 this year.

• 1050

The Vice-Chairman: Mr. Robinson, are you finished?

Mr. Robinson: Yes, Mr. Chairman.

The Vice-Chairman: Mr. Howe?

Mr. Howe: Mr. Chairman, I notice in the *Ottawa Journal* of yesterday a heading "Federal Overhaul Expected Early in 1969", regarding the securities laws. Could the witness give us any information as to what form this overhaul is going to take with regard to corporate . . .

Mr. Grandy: I am sorry I did not see that article, but the Minister has stated in the House that he intends to introduce a securities act during the present session of Parliament. We have had some discussion with the provincial governments at the official level about co-operation in the field of securities administration, and about the role that the federal act might play in this field.

Mr. Howe: Some implications are made there concerning what form it will take.

Mr. Grandy: Yes; the heading on this article is a little misleading.

An hon. Member: That is par for the course.

Mr. Grandy: It refers to securities laws and the overhaul of federal securities legislation, but the paragraphs that follow reflect the proposals that the government intends to put forward to Parliament in the revision of the Corporations Act in the current session of Parliament.

The Vice-Chairman: I have just one remark. Are you saying that this reflects accurately the laws which the Minister said he cannot discuss with us?

Mr. Grandy: No sir. This is a mention of the key subjects which, in fact, he has already described in Parliament and in other speeches.

The Vice-Chairman: Oh, I see.

Mr. Grandy: These are the five main topics that will be covered in the forthcoming act.

Mr. Howe: Was this subject discussed in the recent meeting with the Minister and his colleagues in the provinces?

Mr. Grandy: No, that meeting was purely on consumer affairs, not on corporate affairs.

The Vice-Chairman: Mr. Knowles?

Mr. Knowles (Winnipeg North Centre): Mr. Chairman, may I ask what the record is of corporations with regard to making the report that they are required to make by statute? I am not asking for full details, I am asking for . . .

Mr. L. Lesage (Q.C., Director, Corporations Branch): The number of reports?

Mr. Knowles (Winnipeg North Centre): Yes; how do they do? Are they 10 per cent or 100 per cent?

Mr. Lesage: Oh, the proportion. The proportion at the present time will reach 78 or 79 per cent of compliance for the returns which were due on June 1. We expect that within the next two or three months we will reach what we consider to be the maximum possible—90 per cent—as we did last year.

The 10 per cent not complying is comprised of companies which have to be dissolved because they have ceased operations and are considered non-active corporations.

Mr. Knowles (Winnipeg North Centre): In other words, your Branch does its best to get 100 per cent compliance of corporations that are active.

Mr. Lesage: At the present time, we do our best.

Mr. Knowles (Winnipeg North Centre): Does that apply also to returns under the Corporations and Labour Unions Returns Act?

• 1055

Mr. Lesage: The responsibility for collecting those returns falls upon the DBS and not our Department. All we do is receive in bundles the second copy received by DBS, which is the agency responsible for the collection of those reports.

Mr. Knowles (Winnipeg North Centre): You do not know what the record of performance is in that respect?

Mr. Lesage: We do not know; of course not. It is not our responsibility.

The Vice-Chairman: Mr. Paproski?

Mr. Paproski: Mr. Chairman, on completion of the documentation of these corporations in your Branch, if we wanted to find out who the directors of a certain company are would this information be at our disposal?

Mr. Lesage: At any time.

Mr. Paproski: Thank you.

The Vice-Chairman: I cannot ask questions.

Mr. Knowles (Winnipeg North Centre): What would you like to ask, Mr. Chairman?

The Vice-Chairman: Shall Vote 15 carry?

Vote 15 agreed to.

The Vice-Chairman: We will proceed to Vote 20.

20 Patent Division, Copyright and Industrial Designs Division and Trade Marks Office including contributions to the International Office for the Protection of Literary and Artistic Works and the International Office for the Protection of Industrial Property—\$4,522,400.

Mr. Robinson: Mr. Chairman, I have one question. I notice there is an increase in salaries under these various headings. Are there some increases in establishment in these departments?

Mr. Grandy: Yes, sir. There is a steady growth in this field, purely related to the work load which grows fairly substantially each year. The man years are shown on the left-hand side of page 62 for the Patent Office: then, further on, for the other divisions. I wonder whether Mr. Laidlaw could comment on this, as well as Mr. Robitaille. Mr. Laidlaw is the Commissioner of Patents and Mr. Robitaille is the Registrar of Trademarks.

Mr. A. M. Laidlaw (Q.C., Commissioner of Patents, Patent and Copyright Branch): I think, Mr. Robinson, I can perhaps add something to what the Deputy Minister has said in connection with those increases. There was a sizable increase throughout the Patents Branch last year and it was back-dated. This is the result: about half of that increase, which is quite

noticeable, should, in effect, be in 1967-68 but it did not appear that particular year.

Mr. Robinson: May I assume that the positions were just not filled?

Mr. Laidlaw: That is correct, although we have nearly every position filled at the moment.

Mr. Robinson: Is there any backlog of work to be processed at the present time that is causing any serious delay that you know of?

Mr. Laidlaw: We have a serious problem in backlog. We are now approximately 70,000 patent applications behind which, if no applications came in starting today, would take us about 2.5 years to process. At the moment we are getting some 30,000 or more applications each year and issuing about 25,000 patents each year.

Mr. Robinson: This is the concern that I have. I have had queries concerning getting patent applications through expeditiously, and the feedback seems to be that they just cannot cope with the amount of work involved. I am wondering what the Department is going to do to alleviate this. Do the patent applications not, in effect, pay for themselves or is it a charge to the community to provide this service?

Mr. Laidlaw: No; as a matter of fact the Patent Office is operating on a profit. Fees that are taken in more than cover the actual cost. At the moment, the Canadian taxpayer at large is not paying for the upkeep of this Branch.

• 1100

Mr. Robinson: Are we unable to obtain the necessary staff in order to pick up this backlog of work and become, shall we say, a little more current than we are at the moment?

Mr. Laidlaw: At the moment, of course, we are frozen so far as the staff is concerned. It is difficult to get more staff in the sense that the people we have are approximately 200 professionals—engineers and chemists. It requires a unique, kind of person if I might put this way, and the majority of scientists and such people who leave universities prefer to work in industry or with the National Research Council; and there is usually a first charge by outside industry on men of this type, before we really get a look in.

Mr. Robinson: How many vacancies are there for appointments on your staff at the present time?

Mr. Laidlaw: In the examining staff—and I may be wrong—about eight to 10.

Mr. Robinson: And what steps are being taken to fill these positions?

Mr. Laidlaw: We are interviewing and bringing people in constantly.

Mr. Robinson: You see, we continue to complain, and not only in this area, which we might call a minor complaint area. There are other areas in the community where there are far more complaints because they just cannot seem to get things done; and there is such a time lag. One makes an application in some other field and it may be a year or two years, or three, or four, or even five, before anything really happens. I have had several complaints about the Patent & Copyright Branch. They are not getting anything done. There seems to be a tremendous delay.

Mr. Laidlaw: I can explain that. First of all, Canada is not unique in this position. Every patent office in the world is heavily overloaded, and the situation is really deteriorating, if I may put it that way, from the point of view of efficiency.

If we put a greater workload on our examiners, or instruct them to issue at least twice as many patents as they are now issuing—"You have got to work twice as hard"—what happens is that the patents go out all right, but the chances of issuing invalid patents goes up enormously. This is the problem.

You can get rid of a backload by just issuing the patents, but nobody wants to see invalid monopolies around the country.

Mr. Robinson: I do not pretend to know very much about patents, but it seems to me that quite a number of them are of a rather minor nature. They are almost insignificant, just a new wrinkle in a machine, and that sort of thing, that could be readily handled, yet I suppose, because of the date on which their applications are made, they have to wait until other much more cumbersome patents, requiring a great deal more work, are handled.

Could the Department not have a few officials to deal with these relatively simple matters, to try to get them through the patent stream, rather than their having to wait for some of the more important ones to be dealt with?

Mr. Laidlaw: Our system at the moment, sir, is to take everything in order, as it comes in. We do not discriminate. I am of the opinion—and it is my off-the-cuff opinion—that if we did discriminate and had patent applications examined out of their order we might have more difficulties than if we follow our present procedure.

Mr. Osler: May I ask a supplementary, Mr. Chairman?

The Vice-Chairman: Yes, Mr. Osler.

Mr. Osler: It is really for information. What percentage of your patent investigations would normally involve other countries over which you have no control? In other words, as you say this is a self-supporting Department, it would then seem that, freeze or no freeze, you would have a very good argument for expanding it to get the work done.

However, that argument would fall apart if, for instance, the Americans, or the British, or somebody else, were so far behind that you could not get through their workload anyway.

Mr. Laidlaw: This is correct. The US or the UK patent offices are operating with about the same delay as are we at the moment.

Mr. Osler: And you are dependent upon them?

Mr. Laidlaw: No, sir.

• 1105

Mr. Osler: No, no; what I mean is that there must be certain things that you have to clear. If I think of something and an American has already thought of it then presumably I will not get a patent.

Mr. Laidlaw: Canada's law on this is that the patent goes to the first inventor, anywhere in the world.

Mr. Osler: Therefore, you would have to check around the world?

Mr. Laidlaw: We have to do all this checking, yes.

The Vice-Chairman: Mr. Howe?

Mr. Howe: Mr. Chairman, I wish to refer to just one item. It looks as though the Trade Marks Journal is going to cost a lot more this year. Is that because of the increased postal rate?

Mr. M. Robitaille (Registrar of Trade Marks): No, Mr. Chairman; I really believe that it is because of the cost to the Queen's Printer for publications.

Mr. Howe: It is not that there is more work being done on the Journal, that it is a bigger document, or that it is more complicated?

Mr. Robitaille: The issues are much more voluminous than they were originally.

Mr. Howe: I have one other question, Mr. Chairman. Not very often, but occasionally, one hears of somebody who has patented or developed a new type of carburettor for a car. This is an "oldie", of course, but one sometimes wonders whether or not it is authentic.

It disappears. We do not hear very much about it afterwards. The inference is that probably some oil company or somebody involved in this type of business, may have bought it for a large amount of money.

As I say, these are all suppositions, and it occurs occasionally, but one sometimes wonders whether the government departments know about it, or what they do, or can do, about it.

Perhaps this would all come under the new Department of Consumer and Corporate Affairs . . .

The Vice-Chairman: Can we wait, then, for the Department of Consumer and Corporate Affairs?

Mr. Howe: . . . but it has to do with patents too. This is a patent that may be bought by somebody just to take it off the market.

Mr. Laidlaw: This story, Mr. Howe, comes up off and on and I think I can state, without any question about it, that it is usually a newspaper story. Nothing about this particular type of situation has ever come to our knowledge.

Certain ideas coming into the patent office we reject because they are not patentable, or are not useful, or cover a principle, and we apply the law in this way, but at least to my knowledge nothing has ever come up about this secret carburettor that people buy and conceal. I think it would be rather difficult to conceal anything that has any invention or merit in it at all.

The Vice-Chairman: Mr. Howe?

Mr. Howe: That is an indication that many of these stories in the press are not authentic? They are not substantiated by facts.

Mr. Laidlaw: If I could see some of the stories I could certainly check them out.

The Vice-Chairman: Mr. Knowles?

Mr. Knowles: Mr. Chairman, may I pursue a moment longer a question which was asked a moment ago?

I took the witness to say that the Canadian policy is to issue patents only to the first inventor. If something has been patented, say, in the United States and a Canadian, not knowing that, comes up with the same or a similar invention, can he, or can he not, get a patent in Canada?

Mr. Laidlaw: He cannot get a patent if we can turn up any prior art. One of the first things our examiners do is to make a search of the art, and that includes all Canadian patents and quite a number of US patents. If they pick up prior art then that man cannot get a patent.

Mr. Knowles: I found that out the hard way a couple of years ago. I invented something that I thought was pretty valuable. The patent lawyer to whom I went in Toronto said that we had better check with Washington first. Sure enough, somebody had thought of it there.

The Vice-Chairman: Mr. Robinson?

Mr. Robinson: This is on a point of information.

What is the life of a patent?

Mr. Laidlaw: Seventeen years from the date of issue.

Mr. Robinson: And then it is free for anybody to use?

Mr. Laidlaw: Free for anybody; it falls into the public domain then.

The Vice-Chairman: Shall Vote 20 carry?

Item agreed to.

On item 25: Consumer Affairs Branch.

The Chairman: We will adjourn until 9.30 on Thursday.

HOUSE OF COMMONS

First Session—Twenty-eighth Parliament

1968

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STANDING COMMITTEE

ON

HEALTH, WELFARE AND SOCIAL AFFAIRS

Chairman: Mr. GASTON ISABELLE

MINUTES OF PROCEEDINGS AND EVIDENCE

No. 6

THURSDAY, NOVEMBER 14, 1968

RESPECTING

The items listed in the Revised Main Estimates for 1968-69, relating to
Consumer and Corporate Affairs.

WITNESSES:

From the Department of Consumer and Corporate Affairs: Messrs. G. F. Osbaldeston, Assistant Deputy Minister (Consumer Affairs); John Catley, Assistant Director, Consumer Service and Information Branch; and G. E. Anderson, Assistant Director, Standards Branch.

ROGER DUHAMEL, F.R.S.C.
QUEEN'S PRINTER AND CONTROLLER OF STATIONERY
OTTAWA, 1968

STANDING COMMITTEE
ON
HEALTH, WELFARE AND SOCIAL AFFAIRS

Chairman: Mr. Gaston Isabelle

Vice-Chairman: Mr. Steve Otto

and Messrs.

Mr. Alexander,
Mr. Forget,
Mr. Fortin,
Mr. Foster,
Mr. Gendron,
Mr. Godin,

Mr. Guilbault,
Mr. Howe,
¹ Mrs. MacInnis,
Mr. McBride,
Mr. McGrath,
Mr. Osler,

Mr. Paproski,
Mr. Robinson,
Mr. Rochon,
Mr. Saltsman,
Mr. Thomas
(*Maisonneuve*),
Mr. Valade—20.

(Quorum 11)

Gabrielle Savard,
Clerk of the Committee.

¹ Mrs. MacInnis replaced Mr. Knowles (*Winnipeg North Centre*) on November 13.

ORDER OF REFERENCE

HOUSE OF COMMONS,
WEDNESDAY, November 13, 1968.

Ordered,—That the name of Mrs. MacInnis be substituted for that of Mr. Knowles (*Winnipeg North Centre*) on the Standing Committee on Health, Welfare and Social Affairs.

ATTEST:

ALISTAIR FRASER,
The Clerk of the House of Commons.

MINUTES OF PROCEEDINGS

THURSDAY, November 14, 1968.

(6)

(Text)

The Standing Committee on Health, Welfare and Social Affairs met this day at 9.55 o'clock a.m., the Vice-Chairman, Mr. Otto, presiding.

Members present: Mrs. MacInnis, Messrs. Fortin, Gendron, Godin, McBride, McGrath, Otto, Paproski, Robinson, Rochon, Saltsman, Thomas (*Maisonneuve*) (12).

Other Member present: Mr. Ritchie.

In attendance: From the Department of Consumer and Corporate Affairs: Messrs. G. F. Osbaldeston, Assistant Deputy Minister (Consumer Affairs); John Catley, Assistant Director, Consumer Service and Information Branch; and G. E. Anderson, Assistant Director, Standards Branch.

The Committee resumed consideration of the items listed in the Revised Main Estimates for 1968-69, relating to Consumer and Corporate Affairs.

On Vote No. 25,—Consumer Affairs Branch including a grant of \$30,000 to the Consumers Association of Canada ..\$6,004,400,

Messrs. Osbaldeston, Catley and Anderson supplied information to the members of the Committee.

On motion of Mr. McBride,

Agreed,—That the addresses of the Consumer communiqués be given in full and incorporated in the record of the Committee.

This information is as follows:

1. "Consumer Communiqué" (Published by Consumer Service and Information Branch), Department of Consumer and Corporate Affairs, Box 99, Ottawa, Ont.

2. "Canadian Consumer, Le Consommateur", (Publication of Consumers Association of Canada), 100 Gloucester Street, Ottawa 4, Ont.

On motion of Mr. Robinson,

Agreed,—That the proceedings previously recorded this morning be printed as an official part of the record of the Committee.

The questioning continuing, Vote 25 was allowed to stand.

At 11 o'clock a.m., the Committee adjourned to the call of the Chair.

Gabrielle Savard,
Clerk of the Committee.

EVIDENCE

(Recorded by Electronic Apparatus)

Thursday, November 14, 1968

● 0952

The Vice-Chairman: We are on Vote 25.

I propose to start the proceedings, have all the questions and if we do not get a quorum we could ask, at the next meeting, that all the minutes of this meeting be recorded and published so as to validate this meeting.

Do any members have questions on this Department?

Some hon. Members: Yes.

The Vice-Chairman: We have enough to go on. We will start with Mrs. MacInnis.

Mrs. MacInnis: Would you take Mr. Saltsman first?

The Vice-Chairman: Excuse me; before we proceed I will ask the witness to introduce himself.

Mr. G. F. Osbaldeston (Assistant Deputy Minister, Department of Consumer and Corporate Affairs): My name is Gordon Osbaldeston and I am the Assistant Deputy Minister of the Department of Consumer and Corporate Affairs.

Mr. Saltsman: I wish to ask you a few questions on advertising relative to the total budget of the Department for Consumer Information.

There is an item which shows \$15,000. Is that the total amount that is going to be spent on Consumer Information—consumer publications?

Mr. Osbaldeston: Yes; with the proviso that the cost of the stationery relative to the Consumer Communiqué, for example, falls under the item Office Stationery, Supplies and Equipment. Therefore, in that sense, the paper involved in that particular publication comes under that other item.

Mr. Saltsman: Do you have any money budgeted for advertising on the radio, or for newspaper advertisements?

Mr. Osbaldeston: As you can see, it is quite modest. We did run an advertisement earlier in the year, relative to the institution known as Box 99, but we do not have funds to run another advertisement of that magnitude.

● 0955

The money shown there, Mr. Saltsman, is relative to the production of one booklet which we hope to produce this year—it is in draft form—and, secondly, relative to the Consumer Communiqué.

Mr. Saltsman: How is the Department of Consumer Affairs going to be able to bring knowledge to the consumers with that kind of budget?

During the hearing of last year the great need for consumer education was pointed out, yet any awareness of this need does not seem to be reflected in the items in the budget.

Mr. Osbaldeston: I do agree with the need for these publications. As you know, our Branch was quite embryonic up until really November 1 of this year, and therefore we had a very small budget awaiting the amalgamation of the various units.

The Consumer Communiqué is a rather inexpensive, but, we hope, quite effective method of communication. Our mailing list is quite large, and we involve the media in that mailing list. In other words, we are looking, if you like, for secondary distribution of the information that we are putting out.

But I do agree with the need for the increase.

Mr. Saltsman: You probably do a great deal with the money at your disposal. I have seen one of the pamphlets that you issued about drugs, and it was very good, but watching the media I was not aware that this was getting wide dissemination, with the exception of the odd consumers' affairs program, or commentator on consumer affairs. It was not reaching a mass audience.

Considering the vast sums of money being spent by advertisers in this country this item is not going to do very much to counteract them.

Have you any figures on how much money is being spent on commercial advertising in Canada?

Mr. Osbaldeston: I am sorry; I do not have an indication of that. Perhaps one of my colleagues has. No, I am sorry; I do not, Mr. Saltzman.

Mr. Saltzman: Recently in the newspapers I saw a figure of somewhere in the region of \$1 billion. Fifteen thousand dollars is not going to do very much to counteract that.

Mr. Osbaldeston: I certainly hope that our information program will increase.

What this figures does reflect is the fact, as I say, that it is a very embryonic group. Until the amalgamation announced by the Prime Minister on July 12th occurred, the size of the units coming into this branch and the monies they would bring with them were not determined; and there was a problem in ensuring that we in our small branch, did not duplicate monies that would, in effect, be coming from some other unit.

As indicated in this amalgamated budget, the monies coming in with the amalgamation were not substantive relative to information.

Mr. Saltzman: Do you have any research projects going on at the moment? Do you for instance, have any plans for division for testing products so that the public may be more accurately aware of the quality of a certain product?

Mr. Osbaldeston: To answer your question, the Minister has stated that we would not become involved in comparative testing of products, comparable to what might be carried on by the Consumers' Association of Canada or by Consumers' Union in the United States.

There are perhaps two aspects to testing. One is comparative testing, and the other, which I think is related, is the development of standards so that the individual consumer can make a valid choice based on information, particularly information relative to a standard. But the answer to your question is no, we do not anticipate carrying on comparative testing.

Mr. Saltzman: Can you give the Committee your personal opinion on the need in the Department for such a program?

Mr. Osbaldeston: The Minister has made a statement, and if I correctly interpret it there

are difficulties involved in a government department doing testing.

• 1000

I think one of the difficulties is to determine the factors that are going to be tested. This is extremely difficult if you are looking at simple products such as glasses, water glasses, that sort of thing. What qualities should be tested? One of the difficulties is that that decision is largely subjective. You have to determine, in the first instance, what you are going to test. Then of course you can develop an objective test to test whatever you decided to test. I think that is one of the main difficulties.

Secondly, the fact is that comparative testing is being carried out by commercial organizations both in Canada and in the United States and I do believe that the Consumers Association of Canada has plans to increase its comparative testing work.

Probably a third element here is that you must, I think, make a decision as to why they need comparative testing. One of the answers to that question is possibly the lack of standards, comparative information, factual information. If the consumer had factual information, in a sense he could do his own comparative testing. So these are perhaps three elements that go into any decision.

Mr. Saltzman: One of the problems brought before the Committee during our hearings—I might refer back to that—was the difficulty the consumer had in evaluating the claims made by advertisers. Unless the Department of Consumer and Corporate Affairs finds some way of helping the consumer make this kind of evaluation he or she is going to be as much in the dark as in the past and is going to have to depend on whatever claims are made in the commercial media rather than on any testing process.

As far as objective standards are concerned, I realize there can never be absolute agreement on what should be tested but I think that to evaluate the performance of certain types of washing machines or refrigerators, certain tests could be devised to indicate their performance rating. Certainly with things such as soap some attempt could be made to inform the consumer of the real intrinsic qualities of the product rather than having tigers pop up under the lids. I hope your Department will take a look at the situation because unless it does it is not going to be of much help to the consumer.

The Vice-Chairman: Mr. McBride.

Mr. McBride: My questions are rather simple perhaps, but noting the grant to the Consumers Association of Canada of some \$30,000, what publications does that organization put out and what control over this association does your Department have?

Mr. Osbaldeston: The Association puts out one brochure every two months, if my memory serves me. If I may be permitted to describe the type of magazine it is, it does carry some comparative testing information and it also carried articles relative to matters of interest to the consumer.

To answer the second part of your question, it is a grant and we exercise no control whatsoever over the policies of the organization or the use to which these funds are put.

The Vice-Chairman: Do you have a copy of that here?

Mr. Osbaldeston: Of the bulletin?

Mr. McBride: They only put out one publication, then.

Mr. Osbaldeston: Yes, it is the *Canadian Consumer*. It is the only one I am aware of and I am quite sure it is the only publication.

• 1005

Mr. McBride: This \$30,000 does not seem like very much money so obviously they get support from other sources. This may not be of any concern to us here but would it be in order to ask, Mr. Chairman, what other sources contribute and what kind of budget this organization has in so far as we do contribute towards it?

The Vice-Chairman: You mean the Consumers Association of Canada?

Mr. McBride: The Consumers Association of Canada, yes.

The Vice-Chairman: I think you could ask the witness if he is aware of any other...

Mr. McBride: What sort of budget would this organization have and what sources would they draw from other than government?

The Vice-Chairman: I believe Mr. McBride was saying that the Department does give \$30,000 to the Consumers Association of Canada and was asking you if you are aware of whether it gets funds from any other source.

Mr. Osbaldeston: I am just a little concerned about their budgetary situation. To my knowledge this is the only grant that they receive from any source. Their second source of funds is from their membership, which I believe is in the order of 20,000. The membership fee is \$3,000 per year.

Mr. McBride: Expanding on what Mr. Saltsman was saying, do you feel this is the best way to handle comparative testing? By having it done independently you do not put the government seal on a product. Is this the rationale behind it?

Mr. Osbaldeston: Yes. We put no stricture on how the \$30,000 is to be spent, and we are not aware if the \$30,000 is spent on comparative testing or on some other aspect of their work. So the \$30,000 is not, if you like, for comparative testing but to support the Consumers Association of Canada in all of their activities, however they choose to do it. But the point that you make is that you are then in a situation where the Consumers Association of Canada does testing and yet it does not carry a government seal. This is quite true.

Mr. McBride: I would be interested in pursuing that but perhaps it is not germane to the discussion this morning, Mr. Chairman. On the Item entitled Continuing Establishment, I notice an increase from \$3,322,900 to \$4,661,500. Does this reflect an enlargement of staff, personnel or of office facilities or publications? I suppose it reflects all of these things, but primarily what would this increase involve? Over the last year your Department has been growing rather rapidly. Is this the reason?

Mr. Osbaldeston: I would like to make an explanation of these two columns, if I may, Mr. Chairman.

The column 1967-68 represents only the establishment and the financial resources of the Standards Branch, which was brought over from the Department of Trade and Commerce. It does not reflect the funds or personnel in 1967-68 relative to the Department of Agriculture, the Department of National Health and Welfare or the Department of Fisheries, nor does it reflect the Consumer Affairs Branch. I have had discussions with Treasury Board officials on why that comparison is here and it relates to the fact that the Consumer Affairs Branch was not in the main estimates of 1967-68. Therefore it does not appear in this 1967-68 column. The Standards Branch was in the main estimates; therefore it appears.

In the case of the Department of Agriculture the Department of National Health and Welfare and the Department of Fisheries, these units that we acquired were not isolated, identifiable units. We had to break them up and move them over and therefore those funds do not appear there. So in the 1968-69 column, you have in effect the figures related to the actual amalgamation and they are being compared against only one element, the Standards Branch. In effect what I am saying is that the amalgamation did not give rise to any increase in the resources or establishment of the federal government relative to Consumer Affairs. This apparent increase is really that—an apparent one.

• 1010

Mr. McBride: Essentially, you are frozen or static. Your staff is not being enlarged this year at all, then, the way this might suggest it was.

Mr. Osbaldeston: No; the apparent enlargement is only that—apparent; it is not a real enlargement at all.

Mr. McBride: I will ask a more philosophical question. Do you feel an urgent need for enlargement? Are you, in a sense, frustrated that you do not have the personnel or the facilities to do what you see ought to be done, or do you feel that you are running at an optimum level?

Mr. Osbaldeston: You have asked a philosophical question. If I may, I would like to just go back one notch in answering your question. In amalgamating these various units we must first reorganize them and, hopefully, we will secure a savings from that reorganization. We could then either reduce our budget—reduce our establishment—or we could take on new tasks if we find some slack or duplication; just the centralization might help us out here. Once having determined that and having developed the programs that we want on-going, then I think the time is ripe to make the judgments which you are suggesting we should make.

Those judgments are being made; I should say, the work relative to those judgments is on-going. We have taken over administrative and financial control of these units as of November 1 of this year, so we have just barely laid our hands on the organizations involved. We are establishing a regional organization which will give us, we hope, a far tighter administrative control—a far better assessment of how many people and what resources we need.

Mr. McBride: Would you be prepared to make some suggestions for my edification and, I assume, that of other members as to some specific areas into which we ought to be moving in which we, the Government of Canada, are not doing anything, not for lack of being responsible people but for lack of facilities and time and so on. In other words, I am sure in your field as in all other fields you are well aware of the landscape in front of you and the areas that ought to be developed but are not being developed.

What is the most urgent one among these, or what several are the most urgent? Where ought we to be moving? I am perhaps a new member here looking into the future and I am always more concerned with the future than with the past. What should you be doing that you are not doing, and have no permission to do, and that is not approved of yet?

Mr. Osbaldeston: As an example, the government in the last session introduced a hazardous substance bill and it has indicated it would re-introduce that bill. I think that is an example of an area in which we should be working, that we must work in, because there are hazards here.

Mr. McBride: You need legislation before you can even enter any new field of research and consumer...

Mr. Osbaldeston: That is correct. But I was just giving one example of a new field. In this particular field we would need that legislation.

Another example of an area in which we should be at work—and I am speaking broadly of Consumer Affairs—is certainly the advertising area. Here, again, the movement of Section 306...

Mr. McBride: Is that the section that Mr. Saltsman was talking about?

Mr. Osbaldeston: Yes; certainly relative to misleading advertising. If it occurs, the movement of Section 306 to the Combines Investigation Act will permit the Department as a whole and the Combines Branch in particular to move in that area. That is the second area where I think we must move.

The third area we have indicated we desire to move in is standards or regulation, whichever may be required, relative to chemicals and household chemicals in particular. To that end we have indicated that the Standards Branch would have a new chemical unit to work in that area.

We also indicated that another area we want to move in is the textile area, and again we have indicated that in the Standards Branch we would establish a textile unit. The Textile unit would be concerned with such things as labelling of fibre content of fabrics, care labelling of clothing and garment sizing. That is the sort of work that would go on in those areas.

• 1015

These are indications of some areas we think we should be moving in.

Mr. McBride: And the reason you are not moving in these is primarily a lack of budget, of a lack of time, or a lack of legislation, or what?

Mr. Osbaldeston: Most of those I have just mentioned, hazardous substances, advertising, require either a change in legislation or new legislation. In the case of the textile area, we feel that we may already have the authority. One of them we would like to do voluntarily, namely, the care labelling of fabrics. We think that should be a voluntary program; at least we should try it that way. In the case of the mandatory labelling of fibre content, we believe that we do have legislation which may cover it.

Mr. McBride: By "voluntary" do you mean bringing subtle pressure to bear upon the industry?

Mr. Osbaldeston: Perhaps more than subtle pressure. I would like to see the consumer bring pressure through his purchasing habit of looking for and buying when he finds care labelling.

Mr. McBride: This would thrust you into an advertising campaign to inform the consumer, for which we do not have money either.

Mr. Osbaldeston: We will be doing that in co-operation with the Canadian Government Specifications Board which we are told and we hope will be mounting a program before the end of this year. We can do that through the consumer communiqué. The care labelling was developed in co-operation with industry and we hope to get their support in advertising it. We hope to involve the departmental stores in advertising this new consumer benefit in their shops.

So, we are of the opinion that in some of these areas it is to the advantage of all to publicize and that we are not entirely reliant upon our own resource.

Mr. McBride: Mr. Chairman, would it be possible to have printed into the minutes of today's meeting—assuming that we get a quorum and it becomes official at some point, either retroactively or today—the address for this consumer communiqué? I assume you decide who gets this, or that it is something the public can write for.

Mr. Osbaldeston: The public can write in and be put on the distribution list on a free basis.

Mr. McBride: Like a subscription.

Mr. Osbaldeston: Yes. They can write to The Consumer, Box 99, Ottawa, and we will put them on the list.

Mr. McBride: Is a fee being charged at all?

Mr. Osbaldeston: No, there is no charge.

Mr. McBride: Mr. Chairman, what is the address of the other association?

The Vice-Chairman: Mr. McBride, it will be moved at the next meeting—you may want to move it—that the proper mailing addresses of both publications mentioned be appended to the Minutes of Proceedings and Evidence.

Mr. McBride: Thank you. That is all, Mr. Chairman.

The Vice-Chairman: Thank you, Mr. McBride. Mrs. MacInnis?

Mrs. MacInnis (Vancouver-Kingsway): Mr. Chairman, is there a possibility of having these people along the wall introduced? Most of us would like to know who they are.

Mr. Osbaldeston: Yes. Miss Wishart, who is from our Research Branch; Mrs. Côté, who has been working on the amalgamation; Mr. Catley, the Assistant Director of the Consumer Service and Information Branch, with particular responsibilities in the area of Box 99; Mr. Swayne, my Executive Assistant; Mr. Anderson from the Standards Branch—the No. 2 there—and Mr. Dagenais and Mr. Charboneau from the Departmental Administration.

Mrs. MacInnis (Vancouver-Kingsway): Thank you very much. It is probably Mr. Catley that I would like to question first about Box 99. Could you give us a breakdown, Mr. Catley, of the number and nature of the complaints or communications that you have had in Box 99?

Mr. J. L. Catley (Assistant Director, Consumer Affairs Branch, Department of Consumer and Corporate Affairs): Mr. Chairman, I will answer Mrs. MacInnis' questions in general from April until the end of October—a few days before the end of October. We received in Box 99 a total of just over 2,200 complaints. In the same period we had 670-odd inquiries. These complaints are subdivided in two ways. We have 31 major subject classifications and 13 categories. Perhaps it might be useful if I touched on some of the major ones.

• 1020

In the subject breakdown, foods are by far the largest group.

Mrs. MacInnis (Vancouver-Kingsway): While you are talking about food, would that be complaints about quality of food, or price, or what?

Mr. Catley: Perhaps I should have said, Mrs. MacInnis, that the subject breakdown is merely the first breakdown. It could be anything within the 13 categories, but relating to food.

Mrs. MacInnis (Vancouver-Kingsway): Yes.

Mr. Catley: About 500 complaints, which is nearly one quarter of the total number, dealt with food. Some of the other major categories were automobiles and accessories, housing, wearing apparel and appliances. The miscellaneous group, which is just sort of a catch all, naturally had a fairly high number too.

In the categories the largest single group was concerned with trade practices. This is a very broad area. It includes what could be fraud and deception. Cases that may be breaches of the Combines Investigation Act or may raise questions under section 306 of the Criminal Code are referred to those combines officers on a daily basis and we have excellent liaison with Mr. Henry's staff. Prices was the second highest category and the third one was quality standards and grades. Perhaps I might touch on the...

Mrs. MacInnis (Vancouver-Kingsway): Could you give me some idea about the size of those three categories, such as the percentage that would be first in fraudulent and then in price and grade?

Mr. Catley: The trade practices including fraud and deception, Mrs. MacInnis, were approximately 440 out of the 2,200. The prices were just under 400—397—and the third lar-

gest, quality standards and grades, were 330-odd. You can mentally calculate a percentage of the 2,200.

Mrs. MacInnis (Vancouver-Kingsway): Yes.

Mr. Catley: Those were the three major ones. Perhaps I might touch on the area where the prices concerned consumers, what was bothering them particularly, high cost in food itself, drugs and various other categories. High cost was one of their major concerns but we have these other general subjects such as the change in size or shape of the container which allegedly conceals a price increase—that is a rather common one; resale price maintenance which, of course, has overtones for the Combines Investigation Act and any allegations in that regard are referred to Mr. Henry's staff for consideration—price fixing or monopolistic conditions and anything in that regard.

The next one I mentioned was quality standards and grades and quite often we get questions about meat grading, the fact content in meat, and overtones of frozen food spoilage. Many of the questions that come to us from the consumer about food quality raise questions where the expertise lies with one of the Departments such as Agriculture or Fisheries, or it could be that Health and Welfare have a direct interest.

That has been a rather general answer. I do not know whether I have covered every point you raised.

Mrs. MacInnis (Vancouver-Kingsway): There is one other point I would like to raise. Have you any geographical breakdown showing where most of the complaining comes from?

• 1025

Mr. Catley: I do not have the figures here, Mrs. MacInnis, but roughly I can say that it has followed the population proportion in the country. To be honest, we have had very few complaints from Newfoundland. Our message has not got through to the island province yet. I do not think—again to be very fair about it—we have had a due percentage of complaints from Quebec province in relation to its very large population. For the rest of the country I think they bear the kind of relationship you might expect to the total percentage of population in Canada.

Mrs. MacInnis (Vancouver-Kingsway): May I just ask again whether you have any thought at all of the consumer committee, the

prices committee, that both Mr. Saltzman and I were on? We had quite a bit of discussion about the possibility of the Department at some time using radio or perhaps even television to reach people, perhaps not too often but once in a while. Has any consideration been given to using the other media directly to get at people to advertise the possibilities of Box 99?

Mr. Catley: Very much so, Mrs. MacInnis, but as our Assistant Deputy Minister mentioned, our budgetary limitations have restricted and hampered us very much. Also, as he stated, we are very embryonic. We have only been going legally since last December 21, although some of our staff were recruited just before that, and we have been in the formative period of training and recruiting staff.

We hope to be able to reach the consumer through all the major media, hopefully TV too, although this, as everyone knows, is a very expensive form of communication. For the present we have had to rely upon the press, magazine and secondary generation of the kind of releases we have made through our communiques and news releases from our departmental group.

Mrs. MacInnis (Vancouver-Kingsway): As a member of the Consumers Association of Canada I know that its influence is considerable but I do not think it should be relied on to do the job of sort of getting the consumers in contact with the Department. I think there ought to be a supplementary drive from the Department itself to let consumers know about the facilities.

Mr. Catley: I am sure we will move in that direction, Mrs. MacInnis. I noticed that in one of last night's local dailies—although I searched it did not give us credit—there was quite a piece on the ladies' page about our Consumer Communique No. 2 which dealt with carpeting, and reading it over rather hastily I gather that it was almost a repeat. This is the kind of thing we want to see.

Mrs. MacInnis (Vancouver-Kingsway): Yes.

Mr. Catley: If the message can get across to the consumer by being repeated in the daily and weekly papers of the country and through magazines and other ways, this will fill the gap until we do have the funds allocated to use the other media.

Mrs. MacInnis (Vancouver-Kingsway): Yes, thank you. I want to ask a question about Vote 25, and perhaps it is the Assistant Deputy Minister that I need to ask about this. The vote for Short Weight Supervision has come down from \$14,600 last year to \$12,800 this year.

First of all, is this a taking over of Weights and Measures from the Department of Trade and Commerce?

Mr. Osbaldeston: If I may I should like to ask Mr. Anderson to explain the short weight item for you, Mrs. MacInnis, but I might say that the short weight item is only a portion of the Standards Branch total budget. In actual fact the 1967-68 figures that you have represented the total budget of the Standards Branch in 1967-68.

Mrs. MacInnis (Vancouver-Kingsway): Would Mr. Anderson explain what it now comprises? First of all, did you get some out of the Department of Trade and Commerce? Did you transfer some of the responsibilities from Trade and Commerce to this Department?

Mr. Anderson (Assistant Director and Chief Engineer, Standards Branch): All of the responsibilities of the Standards Branch have been transferred to the Department of Consumer and Corporate Affairs.

Mrs. MacInnis (Vancouver-Kingsway): Is that weights and measures?

• 1030

Mr. Anderson: The Standards Branch, previous to the switchover, comprised the Electricity and Gas Inspection Service, the Weights and Measures Inspection Service, the Commodity and Precious Metals Marking Service, a laboratory and an administrative headquarters. Exactly why factory prepack and short-weight checking appears as a separate item, I am not quite clear. It is always shown that way, but it is really just one of many activities of the weights and measures division. That is a relatively small amount and it accounts for the hiring of shoppers. If we believe that a certain merchant is just a little shady we will watch him and if, on the basis of one or two checks by our inspectors and after the issuing of warning letters, we still feel that he is a shady character we will probably hire one or two women shoppers who are unknown to the merchant, an inspector will accompany them—sometimes we get an inspector from another district—and they

will go in and make a purchase. They may purchase a pound of hamburger and a couple of pounds of sirloin steak, which we have to pay for. We buy it and then we take it around the corner and weigh it and if it proves to be short, below the permitted tolerance, which is comparatively small, we will then launch a prosecution. This small amount of money is to cover the purchase of meat, that is the principal expenditure. There are also legal fees for processing the prosecution. It is really just one aspect of the weights and measures service. Does that tend to clarify it?

Mrs. MacInnis (Vancouver-Kingsway): Yes. Of course, I was interested on the side in finding out whether it was under this particular item that my investigation about the fudgesicles in Calgary was going on, and whether this would come under this vote.

Mr. Anderson: If we were to actually purchase fudgesicles ourselves, yes, but it so happened that because of the fact there were three departments involved it turned out ultimately that it was the direct responsibility of the Department of Agriculture, this being a dairy product because of the butterfat content of these particular fudgesicles.

Mrs. MacInnis (Vancouver-Kingsway): This leads me to my next question. In the Department of Consumer Affairs there are two or three different departments involved. You see, when this legislation was going through I was trying to incorporate an amendment which would make it possible for the Minister to ask directly for information from departments, and to get it right away, which would make it mandatory to hand it over to the Consumer Department. That amendment was not accepted. I am wondering if there will not be very long delays where there are two or three departments involved. How do you handle such a situation where there are two or three departments involved? This may not be a question you can answer, I do not know. Where there are delays, how do you get this information in a reasonable length of time?

Mr. Osbaldeston: I think we have two methods of co-operation with other departments. The broad one is how we handle communications on an on-going basis. I would like to deal with that one first, which is supplementary to your question.

The interdepartmental committee of 14 departments of government at the deputy ministerial level assists us in that. When we come down to your particular question as to

how we get immediate action relative to something that concerns us, it is done through close co-operation and I must say, having been heavily involved with the Department of Agriculture, Department of National Health and Welfare and the Department of Fisheries during the period of this task force and arranging for this sort of co-operation, that without exception we have received this sort of co-operation as fast as in any reasonable sense one could expect them to provide it.

I think there is an interdependency, Mrs. MacInnis, that is developing. We have the retail inspection and they will seek our assistance in carrying out some of their activities. Equally we need their assistance in carrying out some of our responsibilities. I think in that sense the interdependency is good. There is a mutual reliance and, frankly, I think that is the way the government should operate.

• 1035

Mrs. MacInnis (Vancouver-Kingsway): May I ask, a question in another area. Because consumer responsibilities are divided between Ottawa and the provincial governments, what sort of communication does your Department have in this respect? What are the organs with which you communicate in the provinces, or is there yet anything established of that kind?

Mr. Osbaldeston: Yes. Preparatory to the federal-provincial conference which was just held in June, I would like to give you some examples of the techniques that we used. In June I was invited to attend an interprovincial conference on consumer protection as an observer, which I did, and I had the opportunity and privilege of listening to their provincial problems, and this was done so that I would have a full view of the total problem, or at least it would contribute to it.

Secondly, after that conference I visited every province and I identified and spoke to the provincial officials who had responsibility in this area. Prior to that time the Prime Minister wrote to the provincial premiers asking which minister would be responsible. Many steps took place to identify the individual with whom we should work. In the case of all the provinces, such an individual has been identified. Probably in the case of a majority of the provinces a unit of varying size exists with which we work, and at the federal-provincial conference of officials this was again re-emphasized. The same people who had been at the June conference were again in attendance in Ottawa. So, there is

a—what shall I call it—structural framework developing now right across the country composed of people concerned in the area, people able to take action in the area and people knowledgeable in the area. In addition to that, our consumer services information branch and our research branch are almost in daily contact with one province or another by letter or telephone, whatever is required, to straighten out matters. Let me put it this way: to make sure that the consumer gets full protection, be it at the federal-provincial level.

Mrs. MacInnis (Vancouver-Kingsway): Would this just be in one or two areas? For example, in credit buying, or something like that, or does it cover the whole spectrum of consumer activities?

Mr. Osbaldeston: From our point of view, of course, we are dealing with the whole spectrum. While we realize there are jurisdictional responsibilities, we are concerned about the whole spectrum. In the case of the provinces, it is true that their beginning, and in large measure their constant concern, is credit. However, one of the purposes of this conference which was just held—and the purpose of my visit—was to illustrate or put before them the broader range that we were concerned about and which they perhaps do not have responsibility for because of jurisdiction. Again we took the attitude that jurisdiction should not impede full knowledge of the problem. If we have a consumer problem in any area that we think a provincial government could contribute to the resolution, we will get in touch with them and then we will talk about jurisdiction, or who can do what, and how do we approach the problem.

Mrs. MacInnis (Vancouver-Kingsway): Thank you very much.

The Vice-Chairman: Mr. Robinson?

Mr. Robinson: Thank you, Mr. Chairman. I have a number of questions but before I get into them I would like to ask about this organizational chart of the Bureau of Consumer Affairs which we received some time ago. I have a copy of it here, and I think it would be much more helpful and much more meaningful if it contained greater detail. By that I mean if each of the pages for these various branches contained an addendum indicating the kind of work done, or the sub-branches or subgroups that are involved in each of the branches, I think it would help us a great deal in orienting ourselves to the

Department, its job and the kinds of questions we want to ask about it. When you merely look at the headings, such as the research branch, you do not really know too much about what the research is. I think Mr. Saltsman asked a question with regard to testing. Apparently they do not do any testing. I think if we had more detail when we come to these meetings it would be much more helpful.

I was wondering if you could generally give me some indication of the relative size of these five subdepartments that you have. Are some of them much larger than others, do they have much more staff, and so on. Could you give a general outline of that for us?

Mr. Osbaldeston: Mr. Chairman, relative to the first part of the comment on the organization chart it may be of some help to know that there was a press release on the reorganization of the department which was issued on October 28, and if it is agreeable to the Chairman perhaps we could provide you with copies of that. I now understand that the Minister has already done so. Perhaps that will be of some help to you.

Mr. Robinson: I think I have that particular release but I do not have it in chart form, and I thought it would be much more helpful if this was itemized.

Mr. Osbaldeston: May I then comment on your request for information on the size of the unit?

Mr. Robinson: Yes, if you would, please.

● 1040

Mr. Osbaldeston: The service and information branch is divided—if I may I will also comment on the breakdown beneath these items—into two sections. One is the service section, which I think you could describe as the complaint bureau, and the other one is the information section. The number of people working in that branch at the moment is 22. That includes both the service and information sections. If my memory serves me correctly, there are 6 people on the information side and 16 on the complaint side, and that is an all-inclusive figure which includes stenographers, clerks and officers. The establishment in the research branch is 17 positions. It is not broken down into divisions or sections, it is a unit, and in that branch we have economists and lawyers.

Their task is to do research in such areas as hazardous products and what their scope,

the size of the problem, how it is being attacked perhaps in other jurisdictions and what are the legal and jurisdictional problems that we are engaged in looking at such a problem. That is one indication of the type of work they do.

The Operations Branch is the headquarters administrative unit which will unify our various field offices.

The headquarters branch will be comprised of six people only, and the total officers' establishment strength in the field is something of the order of 613 people. As indicated here, what we have done is to set up regional offices as opposed to a large Ottawa unit. We have a very small control unit in Ottawa because we want to decentralize our operations very substantially across the country; so that we are where the action is and our control is out there.

The regional offices, if I may just drop down below that Operations Branch, will be comprised of a regional manager and an administrative officer who will be concerned with the personnel and finances in the region. He will also have with him a consumer-consultant whose job will be on information, which was referred to earlier.

In the Compliance Branch, which is our enforcement or legal branch, we will have two departmental positions, and the Department of Justice will provide us with two legal positions—a group of four.

The Standards Branch, as shown on this chart, represents the policy and laboratory units in Ottawa. It is comprised of approximately 73 people. As you will see, in my own office there are myself and Mr. Swayne; and I will also have attached to me, for administrative purposes, the Director of Research of the Canadian Consumer Council.

Mr. Robinson: Thank you very much.

Is it the intention of your Department to have this chart expanded upon at all to make it more meaningful?

Mr. Osbaldeston: Yes; we definitely will be expanding it. Again, if I may be permitted to say so, we took over the administrative control on November 1 and some of the organizational changes are still in process, such as the attachment of a chemical unit and a textile unit to the Standards Branch.

Mr. Robinson: It might be helpful to have a news release informing the public just exactly what services are to be provided and where people can go to get them.

The chart might also indicate the head office of, say, each of your regional offices, where they are located and, possibly, who to contact. Perhaps an informative booklet could be prepared containing this kind of information, that people could pick up at the Post Office or something like that.

Mr. Osbaldeston: I quite accept your recommendation or suggestion. At this point in time we neither have any regional managers nor an office into which we could put the booklet to which you refer, but I do accept it as a valid thought when we are ready to do so.

• 1045

Mr. Robinson: In addition, could there be a compilation of the numbers of groups, organizations and committees that are also working with the Department? Perhaps this could be appended to it as an addendum. For instance, I think it is important that people know who the Canadian Consumer Council are. There is a release on it, I understand, but this also could be incorporated in the booklet, showing who are the people in the community who are interested in working with the Department.

We might also have some information on who is involved in the Canadian Committee on Mutual Funds and Investment Contracts. And there are other groups as well which I do not really know at the moment.

If all this information could be collated and put into one informative little booklet by your Department it could be very helpful.

Under the Consumer Research Branch you mentioned the question of hazardous chemicals and hazardous products of one sort or another. Does your Department consider, for instance, that a cigarette is a hazardous substance or product?

Mr. Osbaldeston: At the moment there is a unit of government concerned with this. It is located in the Department of National Health and Welfare.

The division that took place with National Health and Welfare, when some of their people came to us and some remained there, was that we would concern ourselves with economic fraud and they with health problems.

Perhaps the answer is that if cigarettes are a hazard they would probably fall in the health hazard field and therefore be the responsibility of the Department of National Health and Welfare.

Mr. Robinson: Would you say that a cigarette, or tobacco, was an economic fraud as well? I cannot think of any material benefit that is derived from them.

I noticed in the press recently that Britain is preparing to restrict the promotion of cigarette sales because of the appalling increase in lung cancer. Apparently Burton has already had some minor curbs in cigarette advertising, mainly banning it from television screens before 6.00 p.m., and so on.

Is your Department involved in this sort of thing and, if so, to what extent? Do we have this kind of campaign going on, or are we just sort of mouthing inanities when we talk about the health hazards of cigarettes, and so on?

Mr. Osbaldeston: As I say, this does fall in the Department of National Health and Welfare.

The only real comment I could make on it is that I have noticed television shorts, or spots, relative to health vis-a-vis cigarettes. What their total program is, I am sorry, I could not...

Mr. Robinson: To approach it from another point of view, which may fall within your purview, have you received any complaints from the public about cigarettes or tobacco?

Mr. Osbaldeston: Mr. Chairman, perhaps I may just have a moment to consider that. I do recall one relative to an advertisement and the claim of the cigarette maker about the effectiveness of this particular filtration process.

We are involved in that in the sense that if it was a case of misleading advertising—and if this could be one—we would have to look in to it from that point of view. But if that were not the case, and it has now gone back into the field of health, it would be referred to the Department of National Health and Welfare.

Mr. Robinson: Would it be fair to say that it is misleading advertising to say that the filter in the cigarette filters the smoke? As I understand it, it is not the smoke that does the harm. The filter does not filter out the tar and the nicotine and the other impurities. Would that not fall within the definition of misleading advertising and be a matter of concern to you?

Mr. Osbaldeston: If the claim, whatever it happened to be, was not substantiated and it was in error, or fraudulent, it would certainly fall within that orbit.

Mr. Robinson: You are missing my point, I think. I am talking about the advertising by the cigarette manufacturers of a filter that is supposed to filter the smoke. People reading this assume that it is filtering the tar and the nicotine and the impurities that are the health hazards. In actual fact, it does not do that at all.

It is true that it does what they say it will do, in that it filters the smoke, but does this help? Why would this not be considered fraudulent advertising?

Mr. Osbaldeston: I hesitate because of the legal question involved in what is, and what is not, misleading advertising.

I do not believe that non-disclosure, unless it substantially contributed to a misrepresentation, would necessarily be considered, of itself, to be misleading. That is, unless it substantially contributed to the creating of a misleading impression in the person involved.

This question of "misleading" of course, could also be handled by referring it to the Combines Branch and their advertising section.

• 1050

Mr. Robinson: Could this other gentleman tell us, then, whether he has had any complaints through his Department with regard to a product such as a cigarette filter that has not done what it is supposed to do, or what they assumed it was supposed to do.

Mr. Catley: I do not recall any, Mr. Robinson. There was one that definitely lodges in my memory to which Mr. Osbaldeston just referred that had to do with a filter and that was referred to National Health and Welfare where they have a lot of background on this. I do not think this subject subcategory of tobacco has been at all prominent in the complaints that we have received at Box 99 at all.

Mr. Robinson: Now just shifting slightly to another...

Mr. McBride: May I ask a supplementary before we leave this point?

The Vice-Chairman: Proceed.

Mr. McBride: Would it not come within the purview of advertising of cigarettes that there ought to be on the package some statement that they are a possible health hazard or, if used over a long period of time, could result in impairment to health, or something? Does

this not come under your Department? It seems so facile to pass the buck to Health and Welfare because this is just stating what the product does, and I do not think any longer it is in the realm of what people think or feel; it is statistically a fact now that smoking is a hazard to health.

The Vice-Chairman: Mr. McBride, do I understand you correctly? Are you asking whether omission is the same as fraud? Is that what you are asking?

Mr. McBride: Well, should this not be the concern of the Department? Taking the chronology of it, there was a time when it was sort of up for grabs. Some people said it was a problem and could be a hazard to health and others said it was not. I think it seems to be clear now that we have moved beyond that. Therefore, while it was not the concern of your Department at one time in recent history because it was not incumbent upon the government to state what was known because there was nothing known, now that there is something known it seems to me that it does become incumbent upon the government to state what is known, just as you would on some drug or medicine. You can buy certain cold tablets, and so on, and it is stated that they are dangerous if taken more than three times a day, or some such thing. Similarly, ought we not to be saying on packages of cigarettes "dangerous" or "possible danger" or some such thing?

Mr. Osbaldeston: Any such statement I am sure you will agree would refer to health and quite clearly we have not been given responsibility for health. It remains in the Department of National Health and Welfare.

Mr. McBride: Why were you talking about hazardous substances, then?

Mr. Osbaldeston: Well, here we are talking about accident. In particular we are talking about accident hazard. You can get into a situation where...

Mr. McBride: If I may interrupt, Mr. Chairman, I heard on the CBC network this morning as I drove in to the city your Minister, Ron Basford, talking on a Toronto station and saying that he was concerned about lead paint on children's toys. Now, this is a hazardous thing and it is dangerous to health. Is this not parallel?

Mr. Osbaldeston: Yes. It will be legislation; therefore both departments would have access to any legislation relative to hazardous prod-

ucts. We would both have access or any other department of government, so far as that is concerned. In terms of a dividing line—which you have quite clearly pointed out is a very tenuous dividing line and one we are working out with National Health and Welfare—we are trying to divide it, as I indicated, between a health and an accident situation. You also are into a case where a product such as glue is not of itself a health hazard; it is what happens to it that makes it a health hazard.

Mr. McBride: The same applies to lead paint.

• 1055

Mr. Osbaldeston: Yes, and our opinion, and I think this is the way it will develop, is that in that situation we are talking about a possibility of misuse that perhaps should be regulated, but the product itself is not something that should be removed from the market because it is a health hazard under any circumstances in normal use.

An hon. Member: You mean cigarettes.

Mr. Robinson: Do you not have a duty, then, to point out the health hazard to people?

Mr. Osbaldeston: If it is a health hazard I think action by the Department of National Health and Welfare would be proper.

The Vice-Chairman: Mr. Robinson, if you feel Mr. McBride is stealing your thunder you still have the floor, you know.

Mr. Robinson: No, he is doing very well. I will just follow-up on it.

The Vice-Chairman: Very well. Mr. McBride you may proceed.

Mr. McBride: It seems to me that this is like saying cigarettes are no health hazard if they are not used. The point is that you have to assume they are going to be used, just as that toy is going to be chewed by the child—take any illustration you like—and therefore the very fact that they exist constitutes a hazard and action should be taken.

Also it seems to me, Mr. Chairman, a very interesting fact that the estimates of this Department, some of which do not have much bearing on health and welfare, are coming before the Health and Welfare Committee and it seems to me the consumer end of it—this one today—is the most direct tie-in to the concerns that ought to be before a Committee such as ours; in other words, the health of the people.

Therefore, I think in a sense you are before the wrong Committee. If you want to say we are not interested in health and welfare, because we are interested in it, you almost have to ask why your estimates are before us if it is not a legitimate concern of the people concerned about the health and well-being of people.

Mr. Osbaldeston: May I just reiterate that the Department of National Health and Welfare does have a unit that is working on this particular aspect. There is concern by the federal government concerning this aspect. The question is, what department? The decision was made that that particular matter should be in the Department of National Health and Welfare.

Relative to our concern about health and accident, we will be very concerned with toys, as an example, that can give rise to an accident. It would be handled by our department; it would not be handled by the Department of National Health and Welfare. We would be concerned with household cleansers which might fall into the hands of children and in that sense be misused. That is not their intended purpose. It is an accident hazard. I am trying to give examples of our concern which you might very well encompass, and perhaps I would, in the general area of health.

Mr. Robinson: Are you concerned about the labelling of products that might be considered hazardous?

Mr. Osbaldeston: Yes, relative to products such as I mentioned, bleaches or other household chemicals. There should be a warning on them that if inhaled, or if ingested when not intended for ingestion, they could give rise to an accident.

Mr. Robinson: Then why would you not carry out the same kind of thinking and program with regard to tobacco?

Mr. Osbaldeston: The program is being carried out.

Mr. Robinson: I beg your pardon?

Mr. Osbaldeston: The program is being carried out but it is being carried out in the Department of National Health and Welfare.

Mrs. MacInnis (Vancouver Kingsway): Mr. Chairman, may I raise a point? The estimates of the Department of National Health and Welfare are coming before this Committee a little later are they not?

The Vice-Chairman: Yes.

Mrs. MacInnis (Vancouver Kingsway): So we will have a chance to do tobacco pretty thoroughly.

The Vice-Chairman: Yes, we will.

May I just interfere for a moment. I now see a quorum and I would like...

Mr. Robinson: I move that all the proceedings previously recorded this morning be printed as an official part of the record of the Committee.

Motion agreed to.

Mr. Robinson: I would like to ask this gentleman why we do not see a package of cigarettes today with a skull and crossbones on it the same as you used to see on a bottle of poison years ago? This may be rather facetious, and perhaps I should call it 11 o'clock, Mr. Chairman.

Mr. McBride: Mr. Chairman, perhaps putting it into extreme form Mr. Robinson has brought up the point I am concerned about and it does come under advertising, because what is written on the package...

Some hon. Members: Is that not advertising?

Mr. McBride: Mrs. MacInnis' point that we can talk about this in Health and Welfare is not my main concern, because if you talk about it in Health and Welfare what are you going to learn? I do not think we are going to learn anything that we do not already essentially know. My concern is that we get what we know out to the people, especially the users of the product.

The Vice-Chairman: Thank you, Mr. McBride. It is now 11 o'clock and I am going to adjourn this meeting until the next time. We will then carry on with Vote 25 and the department officials will be back again. Thank you, very much.

OFFICIAL REPORT OF MINUTES
OF
PROCEEDINGS AND EVIDENCE

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Translations under the direction of the Bureau for Translations, Secretary of State.

ALISTAIR FRASER,
The Clerk of the House.

HOUSE OF COMMONS
First Session—Twenty-eighth Parliament
1968

STANDING COMMITTEE
ON

HEALTH, WELFARE AND SOCIAL AFFAIRS

Chairman: Mr. GASTON ISABELLE

MINUTES OF PROCEEDINGS AND EVIDENCE
No. 7

THURSDAY, NOVEMBER 21, 1968
MONDAY, NOVEMBER 25, 1968

Respecting

The items listed in the Revised Main Estimates for 1968-69, relating to
Consumer and Corporate Affairs, and to the Medical Research Council.

WITNESSES:

From the Department of Consumer and Corporate Affairs: Mr. J. F.
Grandy, Deputy Minister; Miss Eleanor M. Ordway, Director, Con-
sumer Service and Information Branch.

Representing the Medical Research Council: Dr. G. Malcolm Brown,
M.D., Chairman.

ROGER DUHAMEL, F.R.S.C.
QUEEN'S PRINTER AND CONTROLLER OF STATIONERY
OTTAWA, 1968

STANDING COMMITTEE
ON
HEALTH, WELFARE AND SOCIAL AFFAIRS

Chairman: Mr. Gaston Isabelle

Vice-Chairman: Mr. Steve Otto

and Messrs.

Alexander,
Forget,
Fortin,
Foster,
Gendron,
¹ Gilbert,
Godin,

Guilbault,
Howe,
MacInnis, Mrs.
McBride,
McGrath,
Osler,

Paproski,
Robinson,
Rochon,
Thomas
(Maisonneuve),
Valade—20.

(Quorum 11)

Gabrielle Savard,
Clerk of the Committee.

Mr. Knowles (Winnipeg North Centre) replaced Mr. Saltsman on November 21.

¹ Mr. Gilbert replaced Mr. Knowles on November 25.

ORDERS OF REFERENCE

THURSDAY, November 21, 1968.

Ordered,—That the name of Mr. Knowles (Winnipeg North Centre) be substituted for that of Mr. Saltsman on the Standing Committee on Health, Welfare and Social Affairs.

MONDAY, November 25, 1968.

Ordered,—That the name of Mr. Gilbert be substituted for that of Mr. Knowles (Winnipeg North Centre) on the Standing Committee on Health, Welfare and Social Affairs.

ATTEST:

ALISTAIR FRASER,
The Clerk of the House of Commons.

REPORT TO THE HOUSE

TUESDAY, November 26, 1968.

The Standing Committee on Health, Welfare and Social Affairs has the honour to present its

SECOND REPORT

Pursuant to its Order of Reference of Wednesday, October 16, 1968, your Committee has considered the items listed in the Revised Main Estimates for 1968-69, relating to Consumer and Corporate Affairs.

Your Committee commends them to the House.

A copy of the relevant Minutes of Proceedings and Evidence (*Issues Nos. 1 to 7*) is tabled.

Respectfully submitted,

GASTON ISABELLE,
Chairman.

(Text)

MINUTES OF PROCEEDINGS

THURSDAY, November 21, 1968.

(7)

The Standing Committee on Health, Welfare and Social Affairs met this day at 10:00 o'clock a.m., the Chairman, Mr. Gaston Isabelle, presiding.

Members present: Mrs. MacInnis, Messrs. Fortin, Gendron, Howe, Isabelle, McBride, Otto, Thomas (*Maisonneuve*)—(8).

Other members present: Messrs. Haidasz and Ritchie.

In attendance: From the Department of Consumer and Corporate Affairs: Mr. J. F. Grandy, Deputy Minister; Miss Eleanor M. Ordway, Director, Consumer Service and Information Branch.

Representing the Medical Research Council: Dr. G. Malcolm Brown, M.D., Chairman.

The Committee resumed consideration of the items listed in the Revised Main Estimates of 1968-69, relating to Consumer and Corporate Affairs.

On Vote No. 25,—Consumer Affairs Branch including a grant of \$30,000 to the Consumers Association of Canada \$6,004,400, Mr. Grandy and Miss Ordway supplied information to the Members.

Item 25 was allowed to stand.

The Chairman called *Vote 50* of the Medical Research Council—Administration, Operation and Maintenance \$303,000.

Dr. Brown made a few remarks. Copies of a brief outline of the activities of the Medical Research Council, prepared by him, were distributed to the Members.

Vote 50 was allowed to stand.

At 11:00 o'clock a.m., The Committee adjourned to 3:30 o'clock p.m., Monday, November 25, 1968.

MONDAY, November 25, 1968.

(8)

(Text)

The Standing Committee on Health, Welfare and Social Affairs met this day at 3.55 o'clock p.m. The Chairman, Mr. Gaston Isabelle, presided.

Members present: Mrs. MacInnis, Messrs. Forget, Foster, Gendron, Gilbert, Guilbault, Howe, Isabelle, McBride, Osler, Paproski, Robinson, Thomas (*Maisonneuve*)—(13).

Other Member present: Mr. Ritchie.

In attendance: From the Department of Consumer and Corporate Affairs: Mr. J. F. Grandy, Deputy Minister; Miss Eleanor M. Ordway, Director of Consumer Service and Information Branch.

The Committee resumed consideration of the items listed in the Revised Main Estimates for 1968-69, relating to Consumer and Corporate Affairs.

On motion of Mr. Guilbault,

Resolved,—That the proceedings of November 21 be printed as part of the official record of the Committee.

On Vote 25—Consumer Affairs Branch, etc. \$6,004,400, Mr. Grandy and Miss Ordway supplied information to the Members.

Vote 25 was carried.

Vote 1 was carried.

The Chairman was ordered to report to the House recommending the Estimates of the Department of Consumer and Corporate Affairs.

At 4.55 p.m. the Committee adjourned to the call of the Chair.

Gabrielle Savard,
Clerk of the Committee.

EVIDENCE

(Recorded by Electronic Apparatus)

Thursday, November 21, 1968

● 1002

The Chairman: Mrs. MacInnis and gentlemen, I do not see a quorum but we will proceed with the discussion. We have the officials of the Department here and they will be ready to answer your questions. The meeting is open for questions.

[Interpretation]

Mr. Thomas (Maisonneuve): On a point of order. Would it be possible to find out from our colleagues who are away this morning, what interest they have in the committee? I know that some of them are away from Ottawa on assignment but if we don't do something, we might find ourselves facing the same problem, at other meetings. We have work to do, and perhaps you could find out and if they are not interested in the committee, see that they are replaced.

The Chairman: Yes, I will certainly put your idea to the authorities to see if we can arrive at a more sensible solution. It seems to me that some people think that the meetings are scheduled for 9.30 at night, not in the morning.

[English]

We will proceed with Vote 25.

Mrs. MacInnis (Vancouver-Kingsway): Mr. Chairman, I have one question and that is the matter of the Canadian Consumer Council. I want to ask a little bit about its functions and how it is going to operate. It may be that I have missed some explanations by the Minister but about the only thing I have been able to lay my hands on so far is the press report by the Chairman where he said:

The Canadian Consumer Council should act as the Government's conscience in a sense in the same role as the Economic Council is the conscience for economic planning.

And then he said:

The Department of Consumer and Corporate Affairs will have to deal with the trivia.

Now, that is all I have been able to get and it is a very fragmentary press report. I hardly know to whom I should direct this question. Is Dr. Leighton available or are you the proper person to ask about the functions of the Canadian Consumer Council?

● 1005

Mr. J. F. Grandy (Deputy Minister, Department of Consumer and Corporate Affairs): First of all, of course, the Council is entirely independent in the sense that it will arrange its own order of business and perform its own studies without influence from the government. It can choose its own subjects to study. The only qualification is that the Minister also has power to refer to the Council a problem that he or the government thinks is important and could thus be studied by that body.

The terms of reference have been deliberately left broad. The feeling was that if they were made too specific and too narrow the Council might feel that it was restricted from doing something it thought it should do; therefore, they were left fairly general. The statute, of course, provides that the Council may advise and assist the Minister or perform such duties or other functions that the Governor in Council may specify, but the terms of reference the Minister gave them include performing such studies as they see fit, offering such advice to the government as they see fit, and doing what they can to improve the channels of communication between consumers, businessmen and government.

I do not know that I can add much more in general terms, but you may have a more specific question.

Mrs. MacInnis (Vancouver-Kingsway): Yes, I have some more specific questions. You speak about the channels of communication between consumer and government. I notice that it is a very impressive list of publicly-known people and I am wondering what sort of channels they would be using. Is each supposed to use the organizations through which

he operates or is there some other machinery through which they are going to reach the consumer?

Mr. Grandy: Perhaps "channels" was not a good word. I think what we are saying is that we hope they will improve the degree of communication that takes place between, say, consumers and businessmen, but we do not have in mind any sort of mechanical arrangements for that other than the fact that being a representative body and having people from diverse interests, there should be a cross-fertilization of ideas and a better understanding by these various interests of the problems of the others.

Mrs. MacInnis (Vancouver-Kingsway): Is there a stated time? Does this Council meet, and if so, how often and where?

Mr. Grandy: In the first instance it will meet at the call of the Chairman. After that the Council itself will probably decide how many meetings they want to have in a year. The Chairman expects that they will wish to meet three or four times a year. I know he is now giving consideration to the date of the first meeting and we rather expect that he will make known his plans for the first meeting in the very near future.

There is no limit to the number of meetings. On the other hand, I think their idea is that these meetings are going to be most useful if they are properly prepared for. This probably means that an interval is needed between meetings during which research papers can be prepared for the Council and proposals be prepared—by their staff, not by us. And then you have the question of how often it is convenient for a group from all across a country like this to come to Ottawa which is probably where they would meet. It is on this basis that I think the Chairman is assuming that something like three or four meetings a year would be about right.

• 1010

Mrs. MacInnis (Vancouver-Kingsway): Would there be any consideration given to the idea that instead of meeting at all times in Ottawa, there should be meetings where they could hear what the public has on its mind?

Mr. Grandy: This would be entirely in the hands of the Council. There is no restriction on where they should meet or what kind of meeting they should have. This is an idea that I think we could pass on to Dr. Leighton.

Mrs. MacInnis (Vancouver-Kingsway): I was not looking for increasing expenses in connection with the Council. In my experience the worst thing that can be done with people is to be secretive about something which concerns their welfare. To put it positively, the best thing is to consult them, and it would appear to me that if the Council could meet in different centres, large centres across the country, it could have perhaps one or two days or even a half day session when public organizations would be permitted to present their side. In other words, to make it a two-way street. This is a suggestion I would like to pass on.

The other thing I wanted to ask about is reports. Is it going to be like the Economic Council and make an annual report to the Minister which will be perhaps made available to the public, or what type of report can we expect?

Mr. Grandy: There will be an annual report which formally would be made to the Minister but which the Minister of course would table in Parliament. There would also be individual ad hoc reports on particular subjects that the Council decides to study. When they are studying one particular problem, I do not think they would want to save it for their annual report, but rather issue an individual report on it.

Mrs. MacInnis (Vancouver-Kingsway): Thank you. I imagine at this stage I cannot expect answers in great detail because I suppose nobody knows the answers in detail yet. But I think we have established the fact that there will be more communication with the public through this body; that this is going to be a body which will reach out to meet the public in some way or another.

Mr. Grandy: Yes, we are very anxious to maintain their independence and this is one of the reasons it is difficult for us to make commitments on their behalf, as to just how they will operate. If we start to do that, then we are really telling them how to operate, and we do not want to do that.

Mrs. MacInnis (Vancouver-Kingsway): Seeing one or two of the names makes me think that there will be a possibility of a degree of independence anyway. I refer particularly to Mrs. Mary Batten and there are one or two others that are very hopeful too. I was glad to see that both existing consumer groups are represented. I think it a good thing to have the continuing organization of the boycotters

or the women against soaring prices or whatever they call it locally as well as the Consumers Association of Canada. At this stage I certainly hope that the thing will function well, a two-way method of communicating the government's or the Department's ideas to the consumer but on the other hand of picking up the consumers' ideas, not just from a study or an office or a bureau or something, but functioning so that the consumers come locally, from time to time, and give their opinions. Thank you, Mr. Chairman.

The Chairman: Thank you Mrs. MacInnis.

• 1015

Mr. Howe: Mr. Chairman, I would like to ask a few questions in connection with Box 99. I was not here last week and if I duplicate the questioning you can stop me. But I notice you are getting quite a few complaints and quite a few inquiries through Box 99. What percentage of these complaints are authentic and what percentage of them are sent in by persons who are more or less in the habit of complaining and do not really know what they are complaining about, so to speak, almost fraudulent complaints, frivolous?

Miss E. M. Ordway (Director, Consumer Service and Information Branch): Out of these 2,200 complaints we have received, 15 per cent are not justified.

Mr. Howe: You have about 300 that were not responsible complaints, so to speak.

Miss Ordway: Well, when I say not justified, they may have been lacking in information. We have written back to them but we have not heard from them, so we have classified them as not justified.

Mr. Howe: I see. I notice this Item 25, "Professional and Special Services", has gone up from \$3,000 to \$91,100. Is this in the area where you would have to hire people to do testing on products?

Mr. Grandy: No, it is not the intention that we would hire people to do testing on products. We have of course, considered that, but concluded that it is really not a proper function for the government itself, except in regard to products which may be hazardous or where there is clear public interest involved.

The largest part of that \$91,100 Item was the cost of the consultant study we had done on the reorganization of the government's

activities in consumer affairs, which was in part the basis for the reorganization the Prime Minister announced last July which is now being carried out. That was an item of \$70,000.

Mr. Howe: Do I understand you to say that this was to go into all the affairs of the Department and bring it up to date?

Mr. Grandy: No, it was rather a study of the consumer affairs activities of the government and in particular of this Department's role in consumer affairs, and how these activities might best be rationalized and co-ordinated. It was really carrying on from the work the Economic Council did in their interim report and elaborating on that in much more detail and in practical terms for us, so that we could make recommendations as to the ultimate organization of the Department. Those were the recommendations that helped to bring about the changes that were announced in July.

Mr. Howe: I notice there has been some discussion with the provinces in regard to securities legislation. Was there some discussion at the recent meeting they held with provincial ministers?

Mr. Grandy: That was not in the consumer affairs meeting. It was a separate discussion. That was a meeting of a federal-provincial committee of officials on financial institutions and securities regulation, which has been in existence for several years. But it was not in the Consumer Affairs field at all; it was a discussion of the Federal Government's role in securities regulation.

• 1020

Mr. Howe: It is not going to be taken on by the Consumer Affairs Department? It is being handled by the consumer affairs department in the Province of Ontario, is it not?

Mr. Grandy: It is called the Department of Financial and Commercial Affairs in Ontario. In our Department it would be on the Corporate side rather than on the Consumer side.

Mr. Howe: Is new legislation envisaged in this?

Mr. Grandy: Yes; the Minister has announced in the House that he intends to introduce the federal securities act.

Mr. Howe: I noted in the questioning the other day an indication that the Standards

Branch has been referred to the Consumer Affairs Department. Is this correct?

Mr. Grandy: Yes, sir.

Mr. Howe: When inspectors go out to inspect scales and other measuring equipment they make a charge, do they not?

Mr. Grandy: Yes.

Mr. Howe: If my memory serves me correctly there was a suggestion in the Auditor General's report that the charges should pay the cost of the service. He said that the charges for inspection were too low and that they should be raised so that they would carry the cost of the inspection. Is any consideration being given to this aspect?

Mr. Grandy: Yes; we are now making a study of the fee structure to bring it up to date.

Mr. Howe: With the idea that the charge be enough to cover the cost of the inspection?

Mr. Grandy: In most cases, yes; there may be some instances where the public interest is such that the fees should not necessarily cover the cost but, in general, our position is that the fees should cover the cost.

Mr. Howe: There has been an indication that you propose setting up some standards of content in the labelling of merchandise such as clothing and other things that the general public buys. Is this true? Is some legislation proposed on this?

Mr. Grandy: What we have in mind about textiles is that there be compulsory labelling of fibre-content so that the purchaser will know what fibres are in either the garment or the piece of cloth.

Proposals are also being developed for a voluntary system of "care" labelling for textiles; that is, for labelling which will be standardized and will show the washing and drying instructions, and so on.

A good deal of work has already been done on this, but I am not sure just how quickly it will be completed and introduced.

We are also making certain studies to try to discover what other areas of labelling need to be improved and made more effective in terms of regulations.

• 1025

Mr. Howe: You mentioned textiles labelling of. We see on textiles such labels as "60 per cent polyester; 40 per cent cotton," or some such wording.

I think Mr. Robinson was inquiring about what facilities you have for checking and testing products that are brought to your attention. You do not have anything in the Department at the present time?

Mr. Grandy: No, not in the Department; and I am not sure that it would be economical for us to have those facilities. There are facilities available in other agencies in Ottawa at the National Research Council, for example, the Department of National Defence, or the Department of Public Works. There are various government laboratories capable of doing almost any kind of this work for us when the need arises.

This can be done on the basis of our paying them for the service instead of trying to duplicate their facilities.

We do, of course, have the laboratory in the Standards Branch for all the work connected with weights and measures and electricity and gas inspection. But that, of course, is only one specialized field.

Mr. Howe: Do you very often go outside Government agencies?

Mr. Grandy: We have not so far had occasion to, but, of course, much of our work is just beginning.

Mr. Howe: We have had a bulletin on the tar and nicotine in cigarettes. That study was done at Waterloo University, I understand. Has your Department had occasion to use any of the facilities of the University for these purposes?

Mr. Grandy: No, not so far.

Mr. Howe: Would you consider doing this?

Mr. Grandy: Oh, yes. The first thing we would do would be to locate the facility best suited to study our particular problem. If one were available to us within the Government at a low cost we would use it, but if what we wanted to do was beyond the capacities of the facilities available in Ottawa we would go to the universities, or any other outside agency.

Mr. Howe: You do not foresee the necessity in the immediate future of having to increase the facilities for testing and checking on, would it pay you to incorporate them in your Department?

Mr. Grandy: No; certainly not at this stage. It may take several years of experience before we reach any such conclusion.

Mr. Howe: Thank you, Mr. Chairman.

The Chairman: Mr. Fortin?

[Interpretation]

Mr. Fortin: Thank you, Mr. Chairman. The first question I would like to ask is about the complaints received. Just a minute ago we were told that your department received about 2,200 complaints and that some of these—about 300—were not justified. Were the valid complaints classified by subject?

[English]

Miss Ordway: Our monthly report on complaints we break down into subjects and categories. The 15 per cent covers the prices, the fraud and deception, the labelling and the packaging. The 15 per cent covers the over-all field of our subject category.

[Interpretation]

Mr. Fortin: Among the complaints you have received about labelling and packing you say—among the complaints—were there any about specific products? If the answer is yes, then, would you give us a name of the main products about which you have received complaints?

[English]

Miss Ordway: Yes. Some of these, sir, dealt with specific products, and I am speaking of the labelling and packaging area in respect to food products. For example, I do not have the particular products in front of me, they would be in the files, but I am thinking of jam, crackers, many food commodities.

• 1030

[Interpretation]

Mr. Fortin: Among these complaints, have you received any about the problem created by cigarette smoking?

[English]

Miss Ordway: No, sir, I do not think we have received any complaints regarding cigarette smoking. At least, I do not have them listed.

[Interpretation]

Mr. Fortin: Could I ask the same question about alcohol? This has nothing to do with the alcohol that was seized in Quebec City.

[English]

Miss Ordway: The only complaint I can recall is that a gentleman was complaining about the fact the alcohol content seemed to be very weak.

[Interpretation]

Mr. Fortin: What did you do in that particular case?

[English]

Miss Ordway: If I recall, I think we referred it to Canadian Distilleries, the liquor people. This also went to the Food and Drug Directorate, which have some control in this area, with respect to specific gravity, nomenclature, geographical location, and so on, under the Food and Drugs Act.

[Interpretation]

Mr. Fortin: You read my thoughts. I was just going to ask you what the relationship is between your office and the Food and Drug Directorate?

[English]

Miss Ordway: We have a very close relationship with the Food and Drug Directorate. The complaints that come under their jurisdiction are forwarded to them, and a copy of their reply is sent to us. We also follow these up very carefully.

[Interpretation]

Mr. Fortin: The point I really want to make is this: alcohol, in my opinion, is a product that is dangerous for the public and perhaps more so than other products.

What I just cannot understand, is that alcohol is not considered very important in the eyes of the federal government in general, and that no effort seems to be made to find what could be done for prevention, education or rehabilitation, despite the fact that alcoholism is a disease in Canada and I would even say a national curse.

Could I ask you if the proposals were made to you by specialized agencies in the field of alcoholism, and what has resulted from this?

[English]

• 1035

Mr. Grandy: I think this is where one gets into a real question of jurisdiction and responsibility. I think the public health problem created by alcoholism, both in terms of its health aspects and in terms of its welfare aspects, are really the proper responsibility of the Department of National Health and Welfare. The way I see it is that the Department of Consumer and Corporate Affairs is more concerned with the economic side of the matter and, if you like, the quality and labelling of the product in the sense that if a consumer, rightly or wrongly, wants to buy a bottle of whisky that it should be accurately described on the label. He should get the product he asks for and he should not be misled in

any way in regard to the quality and content of the purchase that he is making. In other words, I do not think it is up to the Department of Consumer and Corporate Affairs to either make a moral judgment or a sort of public health judgment about whether or not people should be allowed to buy or to drink alcohol. However, I think it is our responsibility to make sure that the information about the product is accurate and that the contents are accurate, that sort of thing, from the point of view of avoiding economic loss to the person who is making a purchase.

[Interpretation]

Mr. Fortin: Still on the same subject, and to end my remarks, just one more question, Mr. Chairman. A while ago, in the House of Commons, I asked the Minister of Health and Welfare, what he intended to do to prevent and eliminate alcoholism in Canada. I submitted figures, at that time, to be found in the revised estimates showing that the Canadian government collected more than \$280 million—I am referring to last year—from taxes and customs on alcohol. I also asked him how much, on the other hand, that same Department invests to eliminate alcoholism, or to prevent drinking or inform drinkers of the dangers of alcohol. It is not enough to be against alcoholism, instead, people should be told about its ill effects.

The Minister replied that his Department provides about \$15,000 a year for the prevention of alcoholism. Also, he told me that it is a jurisdictional problem. Let us take, for instance, the case of the government of Quebec which has taken certain steps, but nonetheless this is still a very limited effort because the problem is not simply limited to Quebec.

At the beginning of your statement, which was quite good by the way, you said that you sometimes made studies that you would submit to the Minister, to the Department or to a department concerned about the problems caused directly by alcoholism among consumers? Do you not think then that it would be appropriate to carry out a study with regard to the possible jurisdiction, and also regarding education and rehabilitation?

Could you not undertake a study on the disproportion that exists between the revenue from the sale of alcohol and the amount of money invested by the government to fight the curse of alcoholism and submit this to the Minister, so that he may take the appropriate steps to eliminate this scandalous imbalance?

[English]

• 1040

Mr. Grandy: One of the real problems in defining the role of our Department is the problem of drawing a line and deciding where the limits of our responsibility must lie. It is true in a very real sense that the problem of alcoholism is a problem for the consumer. It is true that the housing problem is a problem for the consumer. The question of the provision of proper transportation at a reasonable price is a problem for the consumer, and I take these as three examples, and yet it would not really make sense for our Department to become almost the whole government, in a sense and take on the problems of the Canadian Transport Commission and the problems of Health and Welfare, even though these touch very directly on the consumer, or to take on the work of Central Mortgage and Housing, for example.

Therefore, in saying that this is outside of our jurisdiction I want to make it clear that I am not trying to be narrowly legalistic about it. I think in a rational organization one has to have fairly clearly defined limits of responsibility between one department and another and I think the problem of alcoholism is much more a problem of health and of welfare than a purely consumer problem as such, if you see the distinction I am trying to make.

[Interpretation]

Mr. Fortin: Yes, I see the difference, but this does not satisfy me, it is not what I had hoped. I believe it is a matter of setting up a fact-finding commission to establish who has jurisdiction in matters related to the problem of alcoholism. I had hoped you would tell me that, some day, it might be possible for your Department to take the matter in hand so as to submit a study to the Government to show its full importance.

In closing, I wish to mention that there are over 250,000 alcoholics in Quebec, and the number is even higher in Ontario, and the picture is the same throughout Canada. Take hockey games, for instance, they are sponsored by breweries—I agree, the advertizing itself is quite beautiful.

I have nothing against drinking, nevertheless, there ought to be something to offset it. Therefore, so long as people will indulge in passing the buck, claiming that this falls under the jurisdiction of the Department of Transport, some other department, or even under the Government of Quebec or some

given municipality, I don't think that we are assuming our responsibilities. Anyway, I understand that you can't take the decision for the Minister. Thank you.

[English]

The Chairman: Dr. Haidasz?

Mr. Haidasz: Mr. Chairman, I would like to ask the witness whether she has received any complaints from parents of children or consumers who suffer from allergies and have requested protection from, let us say, the lack of labelling of ingredients on foods and drugs and other substances?

Miss Ordway: Yes, sir, we have received complaints on this and I see that we have a total of 17.

Mr. Haidasz: How are these complaints answered or dealt with?

Mr. Grandy: I should perhaps add, Dr. Haidasz, that in addition to the individual complaints that have come in through Box 99 from individuals, there have also been formal representations by the association concerned which is called Allergy Information, a quite active group in this field. They have done a good deal of study of the problem, there is a study now in progress and there has been a good deal of discussion between us and Food and Drug on the one side and the Allergy Information people and some individual doctors concerned with this problem on the other. I think some progress has been made but I would not like to say just how far it will go or how soon because these discussions are still in progress.

• 1045

Mr. Haidasz: Thank you.

The Chairman: Mr. Howe, on a supplementary.

Mr. Howe: No, I will wait. I have another question.

The Chairman: Mr. Thomas?

[Interpretation]

Mr. Thomas (Maisonneuve): Mr. Chairman, after having discussed the problem of alcoholism, I would like to look into the price of soap. The number of complaints received from housewives, did any refer to so-called premiums given in the form of facecloths or other items while also mentioning that this constitutes a form of exploitation? You may have

noticed that some boxes which sell at 69 cents contain a facecloth worth about 15 cents, while the same product, or one similar to it, can be bought for 49 cents. So, unbeknown to them, they paid 5 cents more than they normally would have. Were there any complaints about this?

[English]

Miss Ordway: Yes, sir; we have received quite a few complaints regarding premiums in packages. We have also had discussions with some of the manufacturers regarding this. As you know, quite of the few of the supermarkets have stopped this practice and we hope the rest will follow. That is about all I can say. Where we have received complaints of this we have sent them right to the manufacturer. I cannot give you the exact number because it is not broken down that finely, but I see that it is included in the category under packaging in general.

[Interpretation]

Mr. Thomas (Maisonneuve): Now, my second question is about tomato juice or maple sirup, two liquid products. Is there any protection for the consumer with regard to the density of the product? Because a manufacturer may produce tomato juice containing 25 or 30 p. 100 of water, while his competitor has only added 15 p. 100 of water. Is your Department doing anything to protect the consumer?

[English]

Mr. Grandy: There are standards for these products. If I may take tomato juice as an example, there is a standard laid down in the Food and Drug regulations which defines what tomato juice must consist of and what it must not contain and this is designed to ensure that anything sold as tomato juice is up to that quality standard. The same applies to most liquid food products. I am not sure whether maple syrup is covered by the Food and Drugs Act. There is a separate Maple Products Industry Act administered by the Department of Agriculture which is designed to ensure the quality and standards of maple products.

[Interpretation]

Mr. Thomas (Maisonneuve): All the same, as my colleague from Lotbinière said, it is not a matter of finding out who is responsible, but rather whether the consumer could rely on you in the future to give him total protection?

[English]

Mr. Grandy: This is one area where the changeover is taking place now, the economic side of the sale of food and the quality. That is moving over to us, but the health aspects are staying with Health and Welfare.

• 1050

[Interpretation]

Mr. Thomas (Maisonneuve): Thank you, Mr. Chairman.

[English]

The Chairman: Mr. Howe?

Mr. Howe: Mr. Chairman, I have a couple of questions about the actions of this Department. Has your Department laid any charges against people for fraudulent advertising or for food that did not come up to a standard? Has you Department done this when you have found there has been a case?

Mr. Grandy: This really falls into three categories. Misleading advertising itself is still in the Criminal Code. As you know, there are plans to transfer it to the Combines Investigation Act but this has not yet taken place, so in that area.

The second category is misleading price advertising under Section 33(c) of the Combines Investigation Act and there have been quite a number of prosecutions there. I think these were discussed at an earlier meeting of the Committee.

The third category is misleading advertising in relation to food products. That will now become our responsibility but as this change has just taken place we have not been involved in any prosecutions under that heading. The Food and Drug Directorate have in the past, of course.

Mr. Howe: I have one further question, then. This has to do with the bottles that pills are put up in that are a hazard to children. Now, there was a firm down in Windsor that claimed they had a child-proof bottle for this. Would this come under your jurisdiction and have you made any study of it?

Miss Ordway: This problem has been discussed very thoroughly by the Food and Drug Directorate. Are you referring to the "palm and turn" safety cap in the Windsor area?

Mr. Howe: That is right.

Miss Ordway: I understand that there is a committee discussing this. It really comes under the jurisdiction of the Food and Drug

Directorate. It was recommended by a special committee that the Food and Drug Directorate got together, and they are looking after it, I understand.

Mr. Howe: I see. My second question is in somewhat the same category. It is in connection with injurious substances and has to do with bleaches and liquid detergents in bottles that children sometimes pick up and drink and are very badly burned. Is anything being done in any department with regard to the possibilities of eliminating this hazard as well?

Mr. Grandy: This will be covered by the legislation on hazardous substances which, you may remember was introduced in the Senate in the last Parliament but did not pass all stages before Parliament was dissolved. A bill of this kind will be re-introduced, probably on a somewhat broader basis than before. The purposes for a product like a bleach, for example, would be not to prohibit the sale of the product because that would obviously be unnecessarily extreme since the product is useful, but to regulate the sale and the kind of warnings on the labelling, and possibly the container, so there would be a provision there for regulation of this kind of product. Now, a product that obviously should not be on the market at all would be prohibited altogether.

Mr. Howe: Thank you, very much.

• 1055

Mr. Otto: On a point of order, Mr. Chairman, I was going to suggest that we stand Vote 25 and since Dr. Brown is here we go on to the introduction of Vote 50 because Dr. Brown will be away for quite a while. We can come back to both Vote 25 and Vote 50 at a later time, but I leave it up to you.

Mrs. MacInnis (Vancouver-Kingsway): Mr. Chairman, on that point of order, I know that Mr. Stanley Knowles wants to come on the Committee when health matters are under discussion and I really do not think it would be a fair thing to introduce some of these health matters when there are going to be Committee changes, particularly in view of the fact that we do not have a very full sitting of the Committee anyway.

Mr. Howe: We do not have a quorum.

Mrs. MacInnis (Vancouver-Kingsway): Yes. I know it is important to get ahead with things but . . .

The Chairman: I agree that we have to stand Item 25, but Dr. Brown has been here all morning and besides that I think everyone could have a copy of his opening statement, so this is as far as we are going to go. Instead of asking Dr. Brown to come back and make a statement when everyone already has a copy, we might as well proceed with his opening statement.

Shall Item 25 stand?

Some hon. Members: Agreed.

Item 25 stood.

The Chairman: I hope this will conclude the study of the estimates of the Department of Consumer and Corporate Affairs. On behalf of the members of the Committee I want to thank all the officials from the Department of Consumer and Corporate Affairs who have appeared before us. Also I wish to thank them for their patience in answering questions of members with real competence. Thank you, very much.

The House has also referred to our Committee the estimates of the Medical Research Council.

On Item 50.

Department of National Health and Welfare

B-MEDICAL RESEARCH COUNCIL

50. Administration, Operation and maintenance \$303,000

I introduce at this time Dr. G. Malcolm Brown, M.D., who is a very learned man. He has held appointments throughout Canada on universities and hospital staffs. Dr. Brown is also the Chairman of the Medical Research Council and he will make an opening statement this morning. A copy of this statement, I understand, is already in your hands. Dr. Brown are you ready to proceed?

Dr. G. Malcolm Brown (Chairman, Medical Research Council of Canada): Thank you, Mr. Chairman. Because of the hour and because the printed statement is being circulated I will be especially brief. The goal of the Medical Research Council is, of course, to increase the health and the well-being of Canadians. It moves towards this goal, it tries to do this, by strengthening and providing the basis for the scientific and technological backup of the health care services of the country. Its main tools in the doing of this lie in the universities, the hospitals and the medical research

institutes of the country. The operation of the Medical Research Council is entirely extramural. It provides financial assistance, advice, other services, for the health researchers of the country who do their work in research institutes and in universities that are outside the government. The Council does not operate laboratories of its own.

• 1100

In addition to supporting good research and research which is going to make its contribution to medical care directly in the hospitals, and is taking place in other hospitals, it is very interested in the support which research provides to education and the training of additional health care personnel. It has its own training programs which are directed particularly at research, but these programs and, in fact, the entire operation of the Council has its bearing on the entire educational process in medicine, in dentistry and in pharmacy. In view of the statement that has been circulated, Mr. Chairman, I think I will stop there.

The Chairman: Thank you, Dr. Brown. The meeting is adjourned until Monday afternoon after the question period.

• 1555

Monday, November 25, 1968

The Chairman: Mrs. MacInnis and gentlemen, I see a quorum.

As a quorum was not present at our meeting last Thursday, a motion to print the evidence is necessary. Will someone so move?

Mr. Guilbault: I move that the proceedings of the Committee on November 21 be printed as part of the official record of the Committee.

Mr. Paproski: We should have a member from the other side of the Committee to second that.

The Chairman: We do not need a seconder.

Mr. Paproski: Oh, do you not? That is too bad.

Mrs. MacInnis (Vancouver-Kingsway): It might be desirable because somebody might list it as an error.

The Chairman: It might be a good idea, but not necessarily.

25. Consumer Affairs Branch including a grant of \$30,000 to the Consumers Association of Canada, \$6,004,400.

The Chairman: Vote 25 stands as well as Vote 1. As you know, the officers of the Department have been questioned at length and were cross-examined, as we say, and I think the study of the Estimates of the Department of Consumer and Corporate Affairs has been concluded. Shall Vote 25 carry?

Mrs. MacInnis (Vancouver-Kingsway): Mr. Chairman, I have one more point I want to bring up that I did not have a chance to do at the last meeting and that is the matter of non-returnable bottles. This is a fairly live issue in a good many parts of Canada right now. As a matter of fact, one of my colleagues, Mr. Saltsman, raised the matter in the House on October 3 and I know there has been departmental correspondence about it. I do not know how much but I know there has been some, and this is not confined only to Canada.

Down in the United States, Mayor Lindsay of New York recently has written to 14 soft-drink manufacturers who use non-returnable bottles and he pointed out that until quite recently when they got going on it, bottles were returnable and there was a real incentive to turn them in to get the small deposits of money, but now these non-returnable bottle people are beginning to press very hard to get the market.

So far they have been able to get a very small share of the beer market but for pop and soft drinks they are going ahead with great quantities, with the result that the streets of New York as everywhere else in cities and the countryside are being littered with these bottles that people throw down, with the sharp shards from them all over the place.

There are tremendous dangers to people as a result of these bottles being broken all over the place, particularly to children. It is a menace to traffic to have these bottles thrown around. It is a great burden and a cost to the sanitation people to have to clean them up, and there is the unsightly litter everyone is familiar with—the mess of broken bottles and debris that we see around.

In reply to Max Saltsman on October 3, the Minister's assistant said there were going to

be departmental talks on this matter and that after these talks he was going to invite representatives of the manufacturers, users and retail distributors to come to discuss ways and means of dealing with this question. I know the provinces can deal with it under legislation if they want to but this goes wider than provinces because of the travel involved and the moving about.

I think this is a good idea, but I think others should be included besides the retailers and the people who manufacture and sell these bottles. I think the Department should also invite consumers and people in the medical profession who have to deal with the wounds that are constantly caused by bottles. There should be representatives of the civic authorities, the sanitation people, the town planners, and enough of the consuming side of the public to see whether this problem can be cleaned up by legislation.

Having said this, I would like to ask, what is the view of the Department and where do we stand? Is anything serious being done about this, or what can be done?

• 1600

Mr. J. F. Grandy (Deputy Minister, Department of National Health and Welfare): The Minister and his officials very much share the views that Mrs. MacInnis has expressed. I do not think I need to elaborate on the problems that have been created by the non-returnable bottle. I think Mrs. MacInnis has done this very well. The Department is making a full study of the problem with the Minister. The Minister has initiated this series of discussions with the various interests affected. He had a meeting with the Glass Container Council just a few days ago and he will be talking to the soft drink people, to the grocery distributors, the supermarkets and so on, and to other bodies that are interested including the Consumers' Association of Canada and a number of other interests that are affected one way or another by the non-returnable bottle.

I would not want to try to predict here what action is either feasible or likely because I think that would be anticipating the result of his discussions with these various bodies. Obviously to some extent this is a problem that may require provincial action, but I would not want to say that this is necessarily the only kind of action that can be taken.

Mrs. MacInnis (Vancouver-Kingsway): Would the federal department attempt to work with provincial authorities on this matter? I understand that the Province of Alberta was on the verge of passing legislation of its own but that it is waiting to see whether there is any hope of the federal government passing blanket legislation.

Mr. Grandy: I think that is the situation. We have had some communication with the Government of Alberta and we will be having more with them but I think, whatever the jurisdiction involved, it will be up to our Department to take a lead by discussing the problem with the provincial governments to see how co-ordinated action can thus be taken once the kind of solution that may be appropriate appears evident.

Mrs. MacInnis (Vancouver-Kingsway): Have other provinces shown any inclination to deal with this matter?

Mr. Grandy: I would not like to say offhand. It is obviously of concern in a number of other provinces but I do not think any of them have got quite as far in their study of it as the Government of Alberta has. I am just speaking from memory on this point.

Mrs. MacInnis (Vancouver-Kingsway): Could there be blanket legislation passed federally which would not necessarily compel the provinces to come in but which would make sort of over-all provisions that would be standard for this country and would permit provinces to come in if they so desired? Do you think that would work?

Mr. Grandy: I do not think I could say at this stage, but we will certainly be looking at all possibilities.

Mr. Howe: Are any research organizations directing their efforts toward making other types of bottles that could be safely used? We have heard of cases where they almost dissolve after they have been emptied.

Mr. Grandy: I think some work on this has been done in one of the European countries, I think Sweden, but offhand I could not say whether there is any other research being done—for example, in Canada.

Mr. Howe: Plastic bottles of course do not have the dangerous implications, breakage for example that glass bottles do.

Mr. Grandy: That is right.

Mr. Howe: But they still constitute a garbage problem that is affecting so many cities and towns these days.

Mr. Grandy: Yes, although I think plastic creates a less serious garbage problem. One of the problems is that you have to allow for a pretty high pressure per square inch inside the bottle when you are dealing with soft drinks, and not every sort of plastic will work on that basis.

• 1605

Mr. Howe: This brings up the problem of the quart milk container in that there is a disposition to change the size of them, as a result of which...

Mr. Grandy: Yes.

Mr. Howe: ...the consumer does not always get the same amount of milk as was indicated previously by the content printed on the outside. Is this not true?

Mr. Grandy: I have seen something to this effect, although I am not very expert on that. Of course the problem with the milk bottle in some ways is not so serious because you do not have this problem of pressure that you get with a carbonated beverage.

Mrs. MacInnis (Vancouver-Kingsway): What about cans?

Mr. Howe: Of course cans are still a garbage problem.

Mr. Grandy: They are still a garbage problem but they are not quite so much of a hazard to the children and so on because they obviously do not break.

Mr. Paproski: If I may ask a question, have you done any research on this yourself?

Mr. Grandy: We have done some research, we have a study going on, but we have not been doing research into other materials.

Mr. Paproski: You have done research on containers, such as cans and bottles?

Mr. Grandy: Our research really has been confined to the study of the actual problem created by the non-returnable glass bottle as such.

Mr. Paproski: You have made this study?

Mr. Grandy: We have also been acquiring a certain amount of information about substitutes, but only on the basis of what we can

learn from published sources. We are not doing original research on the question of whether a plastic alternative could be devised.

Mr. Howe: Will it be the policy of this new Consumers Affairs Department to set up research facilities and to employ experts and scientists to go into these things that are a national problem so that it will not be left to private enterprise to do the whole job?

Mr. Grandy: It would certainly be our intention to make use of research facilities, but there are a good many research facilities available within the government without duplicating them by creating new ones.

Mr. Howe: Is it the intention of your Department to issue a directive in this connection to some of those research facilities, or have you done that already? These bottles have posed a major problem for many years.

Mr. Grandy: No, we have not commissioned any research studies from other departments on this problem at this stage.

Mr. Paproski: Do you intend to?

Mr. Grandy: I cannot answer that until the results of our own study are made. Ours is a study of the problem itself and the apparent alternatives.

Mrs. MacInnis (Vancouver-Kingsway): Have you had representations from many different organizations on this?

Mr. Grandy: Yes, quite a lot.

Mrs. MacInnis (Vancouver-Kingsway): What types?

Mr. Grandy: Municipalities, the Provincial Government of Alberta of course, individuals and individual groups such as the Consumers' Association of Canada.

Mr. Howe: If I may change the subject, I would like to ask some questions about a type of credit card.

I quote from the Collingwood paper:

A new venture is in the process of organization in Collingwood. It is known as "Discount Advantage Card" and its stated purpose is to offer discount prices to consumers and cash sales to retailers participating in the programme.

I look askance at this type of thing because the very essence of the name Discount

Advantage Card indicates that this is of tremendous importance to people but no actual proof is given. Do you have many cases of this type of thing happening, and have you heard of this particular card?

• 1610

Mr. Grandy: I have not heard about that particular one, but there are other credit plans of this sort—for example Chargex which has been developed by some of the banks—which purport to offer a service at a better rate of interest than you would get if you simply made ordinary loans, but whether they actually provide a discount as compared with a cash purchase, I do not know. I think some of them purport to do so. I do not know enough about it to know whether all the advantages are what they are claimed to be.

Mr. Howe: This is what I am getting at. Would you not think that the name Discount Advantage Card could be termed as almost misleading advertising?

Mr. Grandy: I would not want to say that without knowing what the arithmetic of it is. There might in fact be an advantage.

Mr. Howe: Have you received any enquiries from people asking you to check on this particular plan to see if there is in fact an advantage to people buying from this organization?

Mr. Grandy: We have not had any complaints or comments about this particular plan. We have had complaints of course from individuals about the receipt of unsolicited credit cards which they did not want.

Mr. Howe: Members of Parliament know all about that. They get credit cards from car rental agencies and everybody else in all sorts of businesses.

Mr. Grandy: I think some of the people who get them are worried about the implication of them—if they lose the card can somebody else use it, and so on. I understand the situation is that as long as the recipient does not make any use of the card he cannot be billed for anything that is done in his name under the card.

Mr. Howe: This is somewhat disturbing to me. As I say, the name Discount Advantage Card in itself implies that people who receive such a card just have to go to this particular agency and they can be sure of buying everything at less than they would have to pay to

the chain store, the corner grocer or whatever it is, and in my estimation I think this type of a heading is a bit misleading. Would you not agree?

Mr. Grandy: I do not think I could agree without knowing more about the actual facts.

Mr. Howe: Of course in your position you become quite sceptical about all these things, do you not?

Mr. Grandy: I would have to know more about this particular scheme and how it works before making a judgment on it.

Mr. Howe: Mr. Chairman, you may not feel that my next question comes within the ambit of this particular Committee, but it has to do with a question I raised in the House on Friday about farm tractors being brought over to Canada at a saving to the particular people that bought them. In *The Globe and Mail* of Saturday it was implied that the seven farmers who bought them saved \$20,000. Now of course farmers are consumers and the cost of their farm machinery has an effect on the cost of consumers products in Canada. There may be something going on within the ambit of the machinery business that is not quite fair. It is my understanding that all the tractors that are used in Canada are not built in Canada but in other countries in the world—a great many of them in England. If this happens in connection with tractors it could happen with respect to a lot of other types of farm machinery and somebody would be making a large profit because the product being wholesaled or sold in Canada was built in another country. Have you any comment on that?

• 1615

Mr. Grandy: It does not come within our responsibilities in the ordinary way. I suppose it is of primary concern to both the Department of Industry and the Department of Agriculture. There is, of course, a royal commission on farm machinery now. I have no doubt that this is one of the problems with which they will be dealing.

Mr. Howe: You would think so; a tractor that costs \$6,000 to \$7,000 in Canada was, through this medium, laid down in Canada for about \$4,000. Of course, I understand there is a regulation that says that a tractor with 95 per cent of its use still available can be called a second hand tractor. This may be the area in which these are brought in.

Mr. McBride: They were; they are used.

Mr. Howe: How do we know that the farmer in Britain, did not buy it from the machinery company, drive it to his farm, and then send it to the dock? That would not constitute too much usage.

Thank you, Mr. Chairman.

Mr. Gilbert: Mr. Chairman, I wish to direct a question to the official.

It says here that in the last session of Parliament, as the result of a great deal of pressure from the Opposition, the then Prime Minister, Mr. Pearson, set up a review board.

I do not think he called it a prices review board; he called it a review board of some kind.

Can you tell us how many are on the review board, what their terms of reference are and, thirdly, what work, if any, they have done?

Mr. Grandy: This agency has not, in fact, Mr. Pearson made in the spring, but then the been set up yet. It was forecast in a speech election and the change of administration intervened. The present government has reaffirmed its intention to proceed with the creation of an agency.

I think it would be best for me to refer you to the statement Mr. Basford made in the House in the budget debate on November 8, which is the last official statement of the government's intentions in this field.

Mr. Gilbert: Is it going to set up this board? That is the first question.

Mr. Grandy: Yes; this was part of the purpose of that statement to which I referred you.

Mr. Gilbert: And is it going to be under the jurisdiction of the Department of Consumer Affairs?

Mr. Grandy: That has not been stated.

Mr. McBride: Would that be likely?

Mr. Grandy: I do not think that I can anticipate the White Paper that the Minister said the government would publish later this year.

Mr. Gilbert: What research, if any, has your Department done on food prices, rents and clothing? Let us take food prices to start with.

Mr. Grandy: What aspect do you have in mind?

Mr. Gilbert: Mr. Chairman, in the last three years we have had a tremendous increase in inflation in the country. The average in the last three years has been 3.3, which amounts to cruel robbery of people on fixed incomes.

I thought that your Department would do research on this to be able to tell the Canadian public just what foods have gone up in force, what the percentages of the increases are and what, if anything, the government intends to do about them.

• 1620

Mr. Grandy: We, of course, do not try to duplicate the work of the Bureau of Statistics on trends in prices. The series that they publish is fairly comprehensive on the factual side.

Mr. Gilbert: Are you suggesting that you do not collate these figures on increases in food prices, for example, and show what sharp increases may have come about as a result of...

Mr. Grandy: We are not a statistical agency.

Mr. Gilbert: No; I know you are not a statistical agency; but surely you can study those figures. Is this not the purpose of your Department in research?

Mr. Grandy: Of course we study them, but the kinds of problems that give rise to particular price increases in particular areas are quite complex. Some of them, for example, may be price increases arising out of restrictive trade practices, in which case they are the concern of the combines branch.

In other cases they are general trends arising out of international forces, or are simply a reflection of the state of the internal economy.

Mr. Gilbert: Surely the purpose of the Department is to protect the consumer. That being so, would you not make a detailed study on food increases and increases in rent, increases the clothing prices, and possibly on the automobile manufacturers?

Mr. Grandy: Some of your questions really relate to the purpose of the agency that the Minister talked about in his statement on November 9.

That is about as far as I could take it at this stage.

Mr. Gilbert: Is your Department aware of administered prices in certain fields?

Mr. Grandy: Yes, sir.

Mr. Gilbert: What, if anything, has your Department done?

Mr. Grandy: Are you talking about the fixing of prices, contrary to the Combines Investigation Act?

Mr. Gilbert: That is one field.

Mr. Grandy: On those we act. We had quite a discussion on that in earlier meetings of the Committee.

If what you mean, however, is that whenever the Department sees some kind of price increase that it does not like it somehow has the power to intervene and stop it, the answer is no.

Mr. Gilbert: What you are really saying is that unless it comes within the province of the Combines Investigation Act and warrants prosecution there is little if anything you can do about it other than expose it. Is that it?

Mr. Grandy: Essentially that is it. The power to fix or control prices is not a federal power under our constitution.

Mr. Howe: But federal actions do have an effect, do they not?

Mr. Grandy: That is right; and that is why I keep returning to the Combines Investigation Act. It is a device within the federal power which is effective where there is evidence of an offence under the Act.

Mr. Howe: In that same connection, Mr. Chairman, in the postal legislation, for instance, which is a piece of government legislation to which we objected because it was going to increase the cost of consumer prices all across Canada, was the Department of Consumer Affairs taken into consideration? Was there discussed with you the question of how much pressure this increase in postal rates, particularly in bulk postage and the throw-away type of postage for promotion, was going to put on the cost of living in Canada? Was this brought to your attention? Was any inquiry made of you on what effect it was going to have?

• 1625

Mr. Grandy: All government policies of that kind are discussed within the cabinet and within cabinet committees; and obviously this was.

Mr. Paproski: Mr. Chairman, I feel that the Minister himself should be here to answer this question. This is one thing that I object to in committees. The ministers deputize their deputies to answer the questions, but it is the ministers who deal with them within the cabinet and with government policy.

It is a downgrading of a committee when the minister does not think it worth while to attend when his departmental estimates are being discussed.

I hope that you will indicate that there are certain members of the Committee, Mr. Chairman, who feel that the Minister should be here on all occasions when we are discussing the matter within his Department.

The Chairman: You think the Minister should be tied up here all the time the Estimates are being discussed?

Mr. Howe: After all, Mr. Chairman, millions of dollars are involved, and it is the Canadian taxpayer's money. The Minister is the one who has the final say in the spending of it.

I am sure the people of Canada would expect him to be here to answer questions on situations that develop within his Department, such as the one I asked to which the witness replied that it might have been discussed within the cabinet. We do not know whether or not it was but I think it should have been. I am referring to my question on the effect that the increased postal rate would have on the cost of consumer products in Canada.

The Chairman: I will see the Minister about this. He was present at our first meeting.

Mr. Howe: Just to present his initial statement.

Mr. Grandy: Without getting into this point, I think that I should make it clear that obviously the Minister, even if he were here, could not reveal what went on in cabinet.

Mr. Howe: Yes; but he should be able to say whether this was discussed with his Department. After all, he is supposed to be the protector of the consumer. Who, if not he, is going to protect the consumer from the Government?

Mr. Paproski: Surely the Deputy Minister is aware of what is going on.

Mr. Osler: As a new boy, may I ask a supplementary question in relation to this?

It seems to me, with all respect that if that course of action is followed we would be wasting even more time in the process of governing this country than we are at present.

The intent of the questioning is commendable but if we discuss policy at the ministerial level in Committee and then discuss policy, again at the ministerial level, when the Estimates go before the House we are going to be talking about the same thing over and over again in two different rooms.

Is it not a fact that these policy matters are discussed in the House when we confront the cabinet and the Minister?

The Chairman: Our job here is not to discuss policy, as I understand it. It is to ask questions about the Estimates that are before us. This of course, could raise other questions, but those on policy should be brought up in the House of Commons.

Mr. Paproski: Mr. Chairman, we are not asking that the Minister attend every meeting, but there are times when questions are asked of the Deputy Minister or his officials to which they say, "We do not know; we cannot say, because it was discussed in cabinet". It is fine to hide behind the coattails of the Minister, but it should not be done. There are questions which we have to ask, and we would like to have them answered at this stage of the meeting.

The Chairman: I will discuss it with the Minister. We do not want to start any debate here.

Mr. Paproski: That is right; but there are times when we can pose a few questions to the Minister. Some Members may say that this is a waste of time. I disagree with them. If we had had the Minister here we could have completed the review of these Estimates long before now.

Mr. Foster: As the previous speaker has said, there is a time for questioning the Minister, and that is when the Minister is here. I do not think he should be present during the whole course of study of the Estimates of the Department. We have the technical personnel here and most of us welcome the opportunity to question the technical and administrative people of the Department. We should take advantage of the time when the Minister is here, which is usually at the first sitting.

• 1630

Mrs. MacInnis (Vancouver-Kingsway): I know this Department is just getting re-organized, but there has to be some vehicle where the problems of daily living, the consumer problems, are given a chance to be investigated and aired in a public forum. We have not got that chance, and this is the general complaint.

There is another way of passing on advice to the Minister. I agree that the Minister cannot be tied up all the time, but on the other hand it is not satisfactory to be able to question officials because officials can answer only on stated policy. I would suggest that it would be a very good idea if the Minister would consider—as a matter of fact I suggested this to him in the House setting up once again either the joint committee with the Senate that we had, or else a straight standing committee of the House of Commons where we could bring in such consumer problems, not little nit-picking problems, but the big problems of clothing and housing and shelter and food. We can put it off, if we like, but sooner or later we are going to have to bring out the facts about rises in price and other things, and the public has got to know what is going on.

There is no way in which we can get the facts out now. There really is not any way. We have a chance of maybe one or two short sharp little questions in the House. I know the Minister was very willing but he was here for only the one day. He made his statement and went, after a little bit of questioning. I am suggesting there must be another organ, and for my money I would not tie up the Minister at all, but I would have a regular committee where we could investigate.

Take the question of automobile transportation, which affects the consumer vitally. We were just on the edge of getting that inquiry started, or we were beginning to press for it, when the Consumer Committee was wound up. We ought to have a chance to go into these steady consumer problems in a standing committee and, frankly, I wish the Minister would reconsider, or the Cabinet or whoever makes this decision. I guess it is the Minister recommending. I think if we had a standing committee on consumer affairs it would be a very good idea, instead of showing us as a little et cetera into the Health, Welfare and Social Affairs Committee in this way. I do not think it gives enough chance for consumers. I feel strongly on this.

Mr. Howe: I am also of the opinion that much government legislation, before it is brought in, should be brought before this Committee so that the people involved could tell us, just as in the case of the postal rate, whether this was going to be an upward pressure on the cost of living, as I am sure it will be, and how much, and if it was going to be substantiated by the saving they are talking about of \$35 million in the Department. I think that this is important.

Mrs. MacInnis (Vancouver-Kingsway): I do too. I think if you try to fence people away, try to face the consumers with a fait accompli and say this is it, this is the legislation, you are going to have trouble. If you take them in at the consulting stages and get the facts out first, you can get away with having the legislation made properly.

The Chairman: This would involve changes in the procedure of the way we are doing things right now.

Mrs. MacInnis (Vancouver-Kingsway): Not a great deal. It would involve a standing committee on consumer affairs, just as there is a veterans committee or an agriculture committee or something else. I think the consumer is important enough to have a standing committee to deal with his problems regularly.

The Chairman: But you understand, as well as I do, that it does not belong to us to make these decisions.

Mrs. MacInnis (Vancouver-Kingsway): I know, but you were good enough to say you would give this other advice to the Minister, and I wanted to get on those coattails, because I would like you to give the Minister this advice too. I think it is important.

Mr. Chairman: Mr. Guilbault.

[Interpretation]

Mr. Guilbault: Mr. Chairman, I wonder whether our witnesses could inform us about the present policy of the Department concerning the premium stamps given when purchases are made?

[English]

Mr. Grandy: I am sorry. I missed a word.

Mr. Guilbault: Premium stamps. Is there any policy on premium stamps? What are you doing about it?

• 1635

Mr. Grandy: No, we do not have a policy on premium stamps. There seems to be some evidence that the popularity of these is dropping off of its own accord. As you know, some of the main supermarket chains have dropped them because they found that housewives were tired of them. Also I think they found that they could—at least some of them have said that they could—sell at slightly lower prices if they got rid of the premium stamps.

I do not think that the Department, as such, has formulated a view on these, and indeed I am not so certain that the Department should, provided they are not forced on the consumer and provided the consumer has a choice as between purchases with stamps and purchases without stamps. I think it would be unfortunate if the consumer had no choice but to go to a place that insisted that he take stamps with his purchases.

Mr. Guilbault: The problem is, I think, that when you go into a store you are not forced to take the stamps, but we all figure out that if we have stamps the prices are slightly higher. If you do not take your stamps, you lose.

Mr. Grandy: No, I am sorry. That is what I mean when I say force you to take the stamps. You pay for them whether you take them or not.

Mr. Guilbault: But have there been inquiries? Have you received complaints or letters from consumers or consumer groups?

Mr. Grandy: We have probably had some complaints.

Miss Ordway: Yes, we have.

Mr. Grandy: This is not a thing on which the consumer has been unanimous in his view, as you can imagine.

Miss Ordway: We have had complaints about premiums. We have also talked to manufacturers about it.

Mr. Guilbault: In what sense?

Miss Ordway: Regarding their policy, whether they plan to continue with this type of merchandising.

Mr. Guilbault: Is it the opinion of the officials in the Department that these things are

detrimental to the consumers, or do they feel that it is quite all right that stamps be distributed this way?

Miss Ordway: Well, if it is going to cost the consumer any more, I do not like it, personally, but there are some consumers who do like it. As Mr. Grandy has mentioned, it is not a clear-cut decision. Some consumers feel that they want premiums.

Mr. Howe: A supplementary, Mr. Chairman. Does not the Department feel that all premiums, all stamps, all gimmicks, add to the cost of merchandise? None of this comes free, Mr. Chairman.

Mr. Grandy: No.

Mr. Howe: It is all added into the cost.

Mr. Grandy: This is right. It does not come free; it is part of the cost. At the same time you are faced with the fact that a good many customers seem to like some of these premiums. I do not think it is our job to tell people what they ought to like. I think our job is to try to ensure that there is a free choice available to the consumer, and that he be reasonably well informed about what he is paying.

Mr. Howe: Have you made any survey to find out just how many people like premiums, or how many would appreciate the reduction in price that should be given if the premiums were done away with?

Mr. Grandy: No. We have discussed this with a number of people in the business. They make their own surveys. Some of them feel that the premiums are good for their business, in other words that the customers like them. Others feel that the customers do not want them or get tired of them.

• 1640

There have been a number of well-known examples. For example, detergents sold with towels and detergents sold without towels. There have been cases where manufacturers have dropped the premiums and have found that their sales dropped. So that it is not an open and shut case, the question of what the consumer really wants in this field.

Mrs. MacInnis (Vancouver-Kingsway): Do you not think it would be part of your job, legitimately, to tell the consumer that these things do add to the cost, and by how much they add to the cost? Then leave her a free choice?

Mr. Grandy: I will go part way. I think that it is certainly one of our responsibilities to make it clear to the consumer that premiums and gimmicks do cost them money. Whether we could say how much is a different question because that is difficult to determine.

Mr. Howe: Are not the advertising costs of these firms available so that you can check what is charged up to gimmicks and special advertising?

Mr. Grandy: It is not all that easy. It requires some sophisticated cost accounting to be certain.

Mr. Howe: Will you agree that when the giving of gimmicks becomes universal, one firm feels that they have got to keep up and do the same thing, that it is a policy that does create an increase in the cost of consumer products. If Loblaw's do it, A & P have to do it, and Dominion Stores have to do it. So all across the board this is an additional cost. Probably the government should consider some type of legislation in regard to gimmicks and giveaway programs. Has this ever been discussed within the Department?

Mr. Grandy: I do not know. Many things have been discussed within the Department, some that I know about, some that I do not. But I do not think myself that legislation to abolish gimmicks is really of the highest priority.

Mr. Howe: Probably this is another place where we should have the Minister, to question him about it.

Mr. Paproski: What would be the highest priority?

Mr. Grandy: When you are talking about gimmicks, you are talking about an area where, as I was saying, there are very mixed views among the consumers themselves. Some like them; some do not. It seems to me, as I was saying earlier, that the important thing is that the consumer have a choice, that he not be forced to take gimmicks. But I am not sure that it would be right to take away from the consumers who do like gimmicks the opportunity of having them.

Mr. Paproski: You are in the wrong business. You should have been a politician.

Mr. Foster: I am wondering if the Department has any idea what the chartered banks of Canada are spending on advertising now

that the laws have been changed. It seems to me that they must be spending millions, especially on television advertising, this "red convertible loan", and the one with the girl swaying back and forth under the palm tree.

It seems to me that the policy of the government should be to make money available to people as cheaply as possible. We are all consumers of money, interest. I wonder what this is costing the country and the people. Surely we have had much higher interest rates this past year. I am wondering if part of this is due to the extra money that is being spent on advertising, especially in television, the very expensive type of advertising the banks are doing?

Mr. Grandy: I have no idea how much they are spending now. The competition, as you know, between the banks and the finance companies has been quite severe in the past year or two and no doubt this advertising is part of it, but whether you could put a figure on it and say this has cost so much, I do not know.

• 1645

Mr. Paproski: Mr. Chairman, may I ask one further question. Does the issuance of these different stamps come under provincial legislation or does it come under federal legislation?

Mr. Grandy: Provincial, almost certainly.

Mr. Paproski: You do not have any jurisdiction over what provinces do? In my province of Alberta, you do not see too many stamps issued. They are outlawed by law. I do not know how many other provinces are the same, but we feel because of the outlawing of these stamps that the consumer is getting a much better shake in food prices and in any other prices in Alberta because of the protection of the consumer by the provincial government. I just wondered if you would not take the initiative and try to force something like this along the whole lines across Canada? I know your department is new, but this is food for thought.

Mr. Grandy: Yes. I think this probably falls into the area of property rights and this is, as you know, very much a provincial field of jurisdiction. What seems to have been happening, though, is that these stamp premiums, in the supermarkets at any rate, are being abandoned one by one and I do not know how many still use them.

Miss Ordway: I think IGA still have them but Dominion Stores have gone out of them, as have Loblaws just recently.

Mr. Paproski: As I say, they do not have them in Alberta.

Miss Ordway: No. You have a law.

Mr. Paproski: That is right.

The Chairman: Shall Item 25 carry?

Mr. Gilbert: Mr. Chairman, I want to ask the officials a few more questions. I wonder if a study has been made with regard to the corporate ownership of some companies in Canada.

I recall when the Joint Committee on Consumer Affairs met, there was a revelation with regard to the George Weston empire. They have not only a horizontal but a vertical expansion in that Weston empire. Is it the intention of your Department to make a study of the corporate ownership? Because with this vertical and horizontal development in corporate ownership you have control of not only backwards but forwards and also the advertising field. I am just wondering what the views of your Department are with regard to this very serious problem.

Mr. Grandy: We do have a fair amount of knowledge about corporate ownership that has been acquired over the years by the Combines Branch, for example. This is something that we will study from time to time as our resources permit and where it seems to us to be likely to produce useful information.

Mr. Gilbert: Is it the intention of your Department to have a liaison with the different corporate consumer departments in the different provinces so that you can have a uniformity of legislation across Canada in certain fields?

Mr. Grandy: Yes. As you probably know we have had a recent federal-provincial meeting of officials. The provinces themselves have already done a good deal in the direction of more uniform legislation, particularly in the consumer credit field, and we would like to do what we can to encourage still more uniformity. When our field organization

is fully established we intend to have our local offices keep in very close touch with the provincial consumer protection offices as well.

● 1650

Mr. Gilbert: Does this apply to advertising? Are you hoping to get a uniform code with regard to advertising?

Mr. Grandy: That is a complicated one, again because of the division of jurisdiction.

Mr. Gilbert: Every time I hear you say division of jurisdiction it seems to me that all you have is a boat without a paddle. Just what strength has the Department?

Mr. Grandy: I was not saying that we have no jurisdiction. I was saying there is a division of jurisdiction, and with divided jurisdiction you cannot always have uniformity because you cannot go at the same problem in the same way.

Mr. Gilbert: Have you made any study with regard to the advertising expenses of different corporations and the percentage of their costs?

Mr. Grandy: No.

The Chairman: Shall Item 25 carry?

Item 25 agreed to.

Shall Item 1 carry?

Item 1 agreed to.

Shall I report to the House recommending the estimates?

Some hon. Members: Agreed.

The Chairman: Last Thursday we had before us Dr. Malcolm Brown, Chairman of the Medical Research Council of Canada, who made brief remarks. He tabled copies both in French and in English of a statement which is already in your hands. For those who have not received a copy it is available from the Clerk, Miss Savard. Unfortunately, Dr. Brown has to be away for two weeks but will return on December 7, 1968. After that we will call back Dr. Brown for consideration of the estimates of the Medical Research Council which have been referred by the House to our Committee. Until then our Committee will adjourn to the call of the Chair.

HOUSE OF COMMONS

First Session—Twenty-eighth Parliament

1968

STANDING COMMITTEE

ON

**HEALTH, WELFARE AND
SOCIAL AFFAIRS**

Chairman: Mr. GASTON ISABELLE

MINUTES OF PROCEEDINGS AND EVIDENCE

No. 8

MONDAY, DECEMBER 9, 1968

Respecting

The items listed in the Revised Main Estimates for 1968-69,
relating to the Medical Research Council.

Including

- 1—Third Report
- 2—Index to Reports
- 3—Index to Witnesses
- 4—Index to Appendices

WITNESSES:

Representing the Medical Research Council: Dr. G. Malcolm Brown,
M.D., Chairman; Dr. J. M. Roxburgh, M.D., Secretary; Miss D. V.
Wright, Executive Assistant to the Chairman.

ROGER DUHAMEL, F.R.S.C.
QUEEN'S PRINTER AND CONTROLLER OF STATIONERY
OTTAWA, 1968

STANDING COMMITTEE
ON
HEALTH, WELFARE AND SOCIAL AFFAIRS

Chairman: Mr. Gaston Isabelle

Vice-Chairman: Mr. Steve Otto

and Messrs.

Forget,
Fortin,
Foster,
Gendron,
Gilbert,
Godin,
Guilbault,

Howe,
MacInnis (*Vancouver-
Kingsway*) (Mrs.),
McBride,
¹ Monteith,
Osler,

¹ Ritchie,
Robinson,
Rochon,
¹ Rynard,
Thomas (*Maisonneuve*),
¹ Yewchuk—20.

(Quorum 11)

Gabrielle Savard,
Clerk of the Committee.

¹ Messrs. Rynard, Ritchie, Yewchuk and Monteith replaced Messrs. McGrath, Alexander, Patroski and Valade on November 26.

ORDER OF REFERENCE

TUESDAY, November 26, 1968.

Ordered,—That the names of Messrs. Rynard, Ritchie, Yewchuk and Monteith be substituted for those of Messrs. McGrath, Alexander, Paproski and Valade on the Standing Committee on Health, Welfare and Social Affairs.

ATTEST:

ALISTAIR FRASER,
The Clerk of the House of Commons.

REPORT TO THE HOUSE

MONDAY, December 9, 1968.

The Standing Committee on Health, Welfare and Social Affairs has the honour to present its

THIRD REPORT

Pursuant to its Order of Reference of Wednesday, October 16, 1968, your Committee has considered the items listed in the Revised Main Estimates for 1968-69, relating to the Medical Research Council.

Your Committee commends them to the House.

A copy of the relevant Minutes of Proceedings and Evidence (*Issues Nos. 7 and 8*) is tabled.

Respectfully submitted,

GASTON ISABELLE,
Chairman.

(Text)

MINUTES OF PROCEEDINGS

MONDAY, December 9, 1968.

(9)

The Standing Committee on Health, Welfare and Social Affairs met this day at 3.50 o'clock p.m., the Chairman, Mr. Gaston Isabelle, presiding.

Members present: Mrs. MacInnis (*Vancouver-Kingsway*), and Messrs. Forget, Foster, Gendron, Gilbert, Godin, Guilbault, Howe, Isabelle, McBride, Monteith, Osler, Ritchie, Thomas (*Maisonneuve*), Yewchuk—(15).

In attendance: Representing the Medical Research Council: Dr. G. Malcolm Brown, M.D., Chairman; Dr. J. M. Roxburgh, M.D., Secretary; Miss D. V. Wright, Executive Assistant to the Chairman.

The Committee resumed consideration of the items listed in the Revised Main Estimates of 1968-69, relating to the Medical Research Council.

The Chairman introduced the witnesses.

Agreed,—That the brief outline of the activities of the Council, tabled by Dr. Brown on November 21, be taken as read and printed in the Committee's proceedings.

On Vote 50,—Administration, Operation and Maintenance . . . \$303,000

Dr. Brown was questioned at length and was assisted by Miss Wright. Dr. Roxburgh also supplied information to the Members.

Vote 50 was carried.

Vote 55,—Scholarships and Grants in Aid of Research, etc. . . \$26,943,000

Dr. Brown supplied further information.

Vote 55 was carried and the Chairman was ordered to report to the House recommending the estimates.

At 5.40 p.m. the Committee adjourned to the call of the Chair.

Gabrielle Savard,
Clerk of the Committee.

EVIDENCE

(Recorded by Electronic Apparatus)

December 9, 1968

• 1551

The Chairman: Gentlemen, we now have a quorum. We will resume consideration of the estimates on the Medical Research Council.

We have the pleasure to have before us again today, Dr. Brown, the Chairman. We have also Dr. Roxburgh who is the Secretary, and Miss Wright, Executive Assistant to the Chairman. On November 21, Dr. Brown, as you know, tabled a brief outline of the activities of the Medical Research Council which was sent to all members of the Committee. It is agreed that this statement be taken as read and printed in our proceedings?

Some hon. Members: Agreed.

The above mentioned document follows:

A brief outline of the activities of the MEDICAL RESEARCH COUNCIL prepared for the information of the Standing Committee on Health, Welfare and Social Affairs.

The Medical Research Council was established in 1960. It is now the main channel through which federal support is provided for medical research in Canadian universities, affiliated hospitals and institutes. It has the responsibility of stimulating and supporting good research in all basic health sciences and in all clinical fields except dentistry and public health. Beginning in 1968 it was also given the major responsibility for the support of research in pharmacy.

The Council itself consists of a full-time Chairman, appointed during pleasure, and up to 20 additional members representing all major aspects of health science research, who serve without remuneration for periods of three years. Council is supported by 20 standing committees, comprising approximately 100 additional senior scientists on whom it relies for expert advice and recommendations in the operation of its various programs. Administrative services are provided by a small full-time secretariat of 15.

The program of the Medical Research Council is entirely extramural and apart from

administrative requirements (Vote 50), consists of a single appropriation for what is broadly described as its "Grants and Scholarships" program (Vote 55). This program is divided into two main components: research assistance, and research development.

RESEARCH ASSISTANCE activities include:

- 1) the provision of support for postgraduate training in research at both the pre-doctoral and post-doctoral levels through the medium of Studentships and Fellowships awarded in competition to students of high academic standing;

- 2) salary support for varying periods of time for full-time university-based investigators of distinction who have the potential or the demonstrated competence to carry out independent research of high quality, through the medium of Scholarships and Associateships, awarded in competition to those who can be expected to contribute to the development of research in their particular area;

- 3) the provision of funds to assist in meeting the direct costs of approved research projects initiated and carried out by university-based teacher-scientists through a system of operating and major equipment grants;

RESEARCH DEVELOPMENT activities include:

- 1) the provision of Negotiated Development Grants on a short-term basis to enable medical and pharmacy schools to initiate new programs and attract new staff;

- 2) the support of Medical Research Council Groups devoted to intensive research in a few highly productive fields to which Canada can be expected to make major contributions;

- 3) a number of programs designed to facilitate the exchange of scientific information; these include travel grants to enable selected delegates to attend international congresses, support for scientific symposia held in Canada, awards to enable scientists from abroad to work for a limited time in

Canadian laboratories or for Canadian scientists to work abroad, and a program of visiting professorships to enable distinguished Canadian scientists to spend a short period at other Canadian universities;

4) the support of clinical trials of two potentially valuable substances, human growth hormone and antilymphocyte serum;

5) the provision of a small general research grant to the dean of each school of medicine and of pharmacy for use at his discretion for the development of research in his university;

6) the review, by means of specially convened ad hoc committees, of problems which can be expected to have widespread research implications such as the development of a system of linked medical records, the feasibility of national primate facilities for Canada, and the need for drug research institutes.

The Chairman: I now call Item 50:

50 Administration, Operation and Maintenance 303,000.

Are there any questions?

Mr. Monteith: I am sorry, Mr. Chairman, I was not here on November 21 and I did not receive one of these. I have just this moment picked one up from the Secretary. I have not had an opportunity to read it as yet. Is it the question of transferring the Medical Research Council from the National Research Council to the Department of National Health and Welfare? Has that been dealt with in this statement?

The Chairman: No, I do not think so.

Mr. Monteith: I wonder if we could have a few words from the Chairman on that aspect of it? I realize that at one time it was hoped it would be completely independent of the National Research Council, but I wonder whether the Chairman might give us an idea of the progress since 1960 and how, apparently, at this time it has developed to the point where it is becoming independent?

Dr. G. Malcolm Brown (Chairman, Medical Research Council): Mr. Chairman, as a result of Orders in Council passed during the summer, the Medical Research Council now reports to Parliament through the Minister of National Health and Welfare. It is, for financial and administrative purposes, now a separate department; it is separate, then, both

from the National Research Council and from the Department of National Health and Welfare. This, of course, is a temporary situation that will have to be repaired or remedied with legislation. In the meantime, the Council carries on its operation much the same as before with only very minor changes in administrative procedure and no changes in its operation vis-à-vis the universities.

The Chairman: Dr. Ritchie?

Mr. Ritchie: I would like to ask why this was brought about? I presume it was in the interests of efficiency. Why was this split off from the National Research Council?

• 1555

Dr. Brown: The case for having the Medical Research Council report to the Minister of National Health and Welfare is one that has been made from time to time. In the new programming that has been going on and in the re-arrangements of various agencies and functions that have taken place, the Medical Research Council has been put under the heading of health, social welfare and social services, rather than under a research heading. This would seem to be the fundamental reason for the change, but the Council remains outside the Department of National Health and Welfare although both the Department and the Council have the same Minister.

Mr. Ritchie: I understand that in the National Research Council they have a great deal of autonomy. Does the Medical Research Council retain this autonomy; that is, not quite so much in a political way or is it more now?

Dr. Brown: Under the temporary arrangements its autonomy has been preserved. It is our hope that under the permanent arrangements this will be preserved too—that is, autonomy with respect to the making of grants and awards.

The Chairman: Mr. Howe?

Mr. Howe: Mr. Chairman, in looking over this paper that we have in front of us, I was rather interested to note that in all clinical fields except dentistry and public health this Medical Research Council has a responsibility. Who does research in the particular field of public health if the Medical Research Council does not do it?

Dr. Brown: The Department of National Health and Welfare.

Mr. Howe: Is there co-ordination between your group and theirs if there are fields in which you interlock—and there might be, in the fields of pollution and things like that, might there not?

Dr. Brown: Yes, there is a good deal of co-ordination and a great deal of care is taken, too, to see that there are no gaps left between the fields of the two agencies.

Mr. Howe: Well, it is rather interesting that this morning with the Department of Transport the question came up with regard to microwaves and radio waves, and we remember that a few days ago one of the parties in the House got quite a bit of publicity because there was something over the radio and television to the effect that even television might have some effect on your system. In this connection with microwaves and things like that, is your Medical Research Council doing anything with that, or have you set aside any funds for any university groups to be looking into this particular field?

Dr. Brown: No, sir. When it is a matter of public health involving the health of people generally, that sort of thing would be the interest of the Department of National Health and Welfare.

Concerning the second part of the question, we have not been asked by universities for funds along the lines that you have mentioned.

Mr. Howe: Well, some of your research is done in connection with university groups, is it not? You designate certain specified projects...

Dr. Brown: All of it, sir.

Mr. Howe: In No. 2—salary support for varying periods of time for full-time university-based investigators of distinction, can you cite some special instances where you have referred certain investigations to universities?

• 1600

Dr. Brown: The Medical Research Council does not have laboratories of its own. It provides money for the support of research. This research is carried out in universities, hospitals and research institutes. With few exceptions the origin of the proposal lies in the

universities. With few exceptions, it is not a case of our seeking to have certain types of work done; rather the researchers came to us seeking support for research which they want to do in their institutions.

Mr. Howe: In any of your research projects have you done any research into the effect of cigarette smoking on the health of individuals?

Dr. Brown: No, sir. We have not provided support for projects of that sort. We have not been asked for it.

Mr. Howe: You have not been asked for it?

Dr. Brown: No, sir.

Mr. Howe: Can you designate some particular field where you have been asked for support with regard to cancer or medical research in cancer? Have you had any experience with that or been asked to do any of that?

Dr. Brown: Yes, we have been asked for a great deal of money for the support of research in cancer but not specifically in connection with the relation between cigarette smoking and cancer.

Mr. Howe: Have you designated any particular field of the study of cancer that is being done by any research team?

Dr. Brown: I am not sure I understand your question. The Medical Research Council provides funds for quite a large number of grantees who are working in the field of cancer research. On the other hand, it does not tell any of them what to do. The process is one in the opposite direction. The decision about what is to be done lies with the researcher and if high standards are met then he is provided with support. With few exceptions the Council has not gone out, so to speak, and said, we want this done, would you please do it and we will pay for it.

Mr. Howe: Oh, I see. You have not given any specific directions to any group to do any particular research.

Dr. Brown: In general, that is the case, Mr. Howe.

Mr. Howe: Well, for instance, there was an item in the *Globe and Mail* today that Dr. Crawford of the Department of National Health and Welfare had cited in connection with vegetables that were being brought in

from other countries and the research that was to be done on the effect of those vegetables on the health of people, or the fact that they might bring in some of the diseases inherent in those countries. Does this come under your field in any particular area?

Dr. Brown: No. That would be Public Health and Dr. Crawford's department.

Mr. Howe: Are there any fields that you have discovered that you have offered, with the Food and Drug Directorate, so to speak, something that some of your people have found out in one of their projects that you turned over to them.

Dr. Brown: Yes, the whole field of pharmacology, of course, lies in close apposition to the work of the Food and Drug Directorate and the results of this work, being made available in the open literature, are available to the Food and Drug Directorate.

Mr. Howe: I notice this volume, this document, we received the other day from the Medical Research Council, Report No. 2. I have not had a chance to study it but no doubt there is a great deal of information there in connection with the projects that have been carried out by your organization. Is this true?

Dr. Brown: On some of them, yes. By the open literature, I mean the open scientific literature, Mr. Howe.

Mr. Howe: Yes. Thank you.

Mr. Osler: Mr. Chairman, I would like to ask Dr. Brown whether he could give us an outline of a typical function of this Council. You say you have a Chairman, and so on, and up to 20 additional members. There are 20 standing committees. Could you give me a sort of run-down of a typical problem and what the function of these members would be in fulfilling their responsibilities?

Dr. Brown: Yes; perhaps we could take this example: The deadline for the last grants competition was December 1 and approximately 800 applications were received. These have all to be assessed from two or three points of view, a policy point of view and whether they come within the field of the Medical Research Council as opposed to that of other federal agencies and, most important and time consuming, they have to be assessed for their merit. Each of these applications is assigned to one of a number of grants com-

mittees, and outside referees chosen for each application—in some cases two—so that there is an outside opinion as well as a committee opinion.

The outside opinion comes back to join the original material which is then sent to the committee members some weeks before their meeting. They meet for about three days, make their recommendations, grade the proposals in order of merit from the top to the bottom and then these recommendations go to the Council which has the final authority about the making of awards.

• 1605

The Council makes its awards taking into account the ratings, the assessments, of these 800 projects which have been put in order of merit for them, and also taking into account the money available for this particular competition and, as a result, you arrive at a cut-off line. Does this answer in any way what you are after?

Mr. Osler: Yes, well...

Dr. Brown: This is an illustration of the grants-making function.

Mr. Osler: I take it, Mr. Chairman, that this is the chief function.

Dr. Brown: It is our biggest one; yes, absolutely.

Mr. Osler: Could you expand a little on the word "merit" you used a while ago? You said that things would be graded according to their merit. Is this purely scientific merit or is it merit in relation to the policy of the Council or in relation to the needs of the people or the times? What criteria would you use to arrive at the word "merit"?

Dr. Brown: The chief component of the word "merit" in that context is scientific merit and it is the defined policy of the Council to support good work—high-standard work—no matter what the field unless it is the field of another federal agency and there must be arrangements of that sort.

Encouragement is given to the development of work in particular fields, by means other than the making of awards for work of lesser merit. We do not think that is a good way to encourage work in a field. There are other ways of doing this.

The assessment of merit, then, almost entirely is an assessment of scientific merit—

the work proposed and the record of accomplishment of the investigator.

Mr. Osler: I have one more question, Mr. Chairman. Would the Council feel that its duty in any way would ever lead it into paths that were not strictly medical-scientific in the usual sense? I am thinking of a man I know who is engaged very heavily in the planning and systematizing of hospital treatment in Georgetown University, Washington, right now. This is not so much medical as organizational, but it has to do with the medical field.

Dr. Brown: The answer to your general question is, yes. We give support to projects outside universities; for instance, to departments of electrical engineering and to departments of physics. We make some grants outside medical schools and schools of pharmacy for work of high merit and of pretty immediate application to medical problems. The question inherent in your illustration has a special answer. The Department of National Health and Welfare has an interest and a responsibility for operations research, so that at the present time if we were to receive a request for support in this field we would ask them if they would take it on.

• 1610

Mr. Gilbert: The paper that you have filed sets forth the jurisdiction and the activities of the Medical Research Council. It says that you have the responsibility of stimulating and supporting good research in all basic health sciences. Then you set forth some of the areas in regard to research assistance and research development. I notice from the Estimates that we are spending roughly \$27 million in this particular department. About five questions have been directed to you, Dr. Brown, in this regard, but I am still in the dark on how we are spending \$27 million. You said that there have been 800 applications received and processed and that they have been processed on the basis of policy and merit. If I were the president of a large corporation and one of my officers was spending \$27 million, I would like to know just what he is spending it on.

The Chairman: May I interject just for a moment. We are on Vote 50, not Vote No. 55. Perhaps you could ask your question on Vote No. 55.

Mr. Gilbert: Are we restricted to Vote No. 50?

The Chairman: For the moment, yes. We will take up Vote No. 55 after.

Mr. Monteith: Mr. Chairman, might I just make a suggestion. It seems to me that we are just getting a picture of the over-all Medical Research Council. Although certain questions might be specifically applicable to the next vote, would it not be advisable to allow them now? I think by so doing we would be expediting our work.

The Chairman: There is no objection.

Mr. Gilbert: Thank you, Mr. Chairman.

Dr. Brown, would you tell me just how we are spending this money and to whom we are giving it. You mentioned 800 applications. I want to know the fields in which these monies are being directed. Your job is to stimulate and support good research. Could you tell us how you are doing that and in what fields you are doing it, so that I can build up a basis for proper questioning.

Dr. Brown: Mr. Gilbert, do you mean the institutions in which the money is being spent or the subject fields?

Mr. Gilbert: First of all give me the subject fields and then a breakdown on the institutions. Suppose you are spending it on cancer. You then determine how many grants were given to research and development in cancer, possibly to whom and what the effects have been. There must be certain categories or fields in which you attempt to stimulate this. At the moment I am completely in the dark as to just what we are doing here.

Dr. Brown: As has been indicated here, the Vote No. 55 money goes for support of research in non-governmental institutions—universities, hospitals, research institutions and so on. So this is where the money is spent and one is largely correct in saying that this is the mechanism through which the Federal Government provides the greater part of its support for medical research in medical schools and universities.

You asked what fields. All fields of medical science and the health sciences except public health, except research which has a high relevance to defence, and except for the \$400,000 odd which DVA spends—that includes pharmacy and, as from April 1, 1969, it will include dentistry. The fields are the basic sciences—atomy, physiology, pharmacology, biochemistry and so on, and the clinical sciences—medicine, surgery and so on.

The work of Dr. M. L. Barr in London, for instance, in genetics has been supported for years by the Medical Research Council. The results of this work are known and used all over the world and they are of great importance. He developed a very simple method of determining the inherent sex of individuals and then in studies of genes and chromosomes, the little bits that carry the hereditary data that we all have, went on to relate abnormalities here to abnormalities in terms of personality development and physical development. This is one example of work of absolutely top-notch standing and of great importance in many, many places.

Second, let us go to the Institute for Clinical Research in the City of Montreal where Dr. Genest and his team have made real contributions to the treatment of high blood pressure and to the distinction between various types of high blood pressure so that the appropriate treatment can be properly used for the different types.

Mr. Gilbert: Do you know whether they have used any politicians for test runs?

Dr. Brown: No, I do not know his list of patients.

Mr. Gilbert: I am sorry, I did not intend to throw you off.

Dr. Brown: Not at all.

Mr. Gilbert: So those are two of the major fields.

Dr. Brown: Those are two examples of work that is really of international significance and also has to do with common situations and common diseases that have been supported by the Medical Research Council.

Mr. Gilbert: I will pass. Thank you, Mr. Chairman.

The Chairman: Mrs. MacInnis?

Mrs. MacInnis (Vancouver-Kingsway): I am very grateful, Dr. Brown, both to the questioners and for your efforts in trying to make this picture come clear to a lot of us for whom it is a pretty new thing. I just have a couple of very practical fields that I want to ask a little bit about. There has been such a lot of discussion about the grave over-all shortage of medical personnel in Canada to handle any kind of medicare or over-all medical services for Canadians. Is there any way in which your organization contributes

directly or otherwise to trying to supply medical personnel in this country in larger numbers? Is there a direct or indirect relation there?

• 1630

Dr. Brown: Yes, Mr. Chairman, there is a very direct relation because you cannot operate a medical school of any consequence without research, and the support for the research component is sought largely from ourselves. The Medical Research Council now supplies over 60 per cent of the extramural money going into medical research in the universities.

We have been concerned very much with this and in particular with the ways in which money can be used to attract additional and high quality staff to Canadian medical schools. This is one of the significant items under the main heading of research promotion: how can you use money to get the best possible people instead of some others? One of the means we have developed for doing this is a mechanism which we have called "negotiated development grants". These are grants for the development of research at a specific institution that are negotiated almost free of rules, and a common pattern would run like this: a university approaches us to say that "so-and-so, and his collaborator perhaps, say they will come to our school provided certain research conditions are available to them; they are available to them where they are now; they will make the move if certain conditions are met. Can it be done?" As a result of discussion, the university may pay half of this new equipment bill, we may pay half of it or more of it and put the university in a stronger position to bargain with these outstanding people than it might otherwise be.

We are very much concerned with just this problem because you cannot run a medical school without a large research component and the health and size of that research component is very much our business.

Mrs. MacInnis (Vancouver-Kingsway): Is there a danger of turning out a lot of specialists in rarefied fields rather than enough good quality people to meet general medical needs? Is that a danger?

Dr. Brown: This is a hypothetical danger. The research operation, the research component, in Canadian medical schools is not yet so high as to make it anything close by, but

this quite conceivably could happen and the tail would begin to wag the dog.

Mrs. MacInnis (Vancouver-Kingsway): But your organization...

Dr. Brown: Our problem is not at the moment to avoid overshoot. We are not in a position where we could overshoot the mark in this respect. There is still a gap to be closed, a gap between the size of the research operation in the universities at the present time and the amount of research there should be for the training job that they have to do, and that training job should, as you know, increase by 50 per cent.

Mrs. MacInnis (Vancouver-Kingsway): The other matter is one which you may have nothing to do with, and may think this is rather extraneous, but, as you know, there is a matter in Canada which has been completely neglected and that is the licensing and the providing of legislation to cover animals for experimental purposes.

We cannot seem to get at it really under any head because probably we are busy dealing with humans rather than having had time yet to deal with the whole question of animal welfare. Does your organization make any attempt to discriminate or to lay down conditions or to in any way see that your grants go to organizations that have some kind of standards for experimental animals?

Dr. Brown: Yes, Mr. Chairman, we have done two things about this. A few years ago at the request of the Medical Research Council, the National Research Council set up a committee to look at this problem. It was made up of representatives of different fields and they produced a report which was concurred in by the Medical Research Council and in this report it was recommended that there be set up a Canadian Council on Animal Care. Some of the standards which it was thought such a Council should follow were set out in the report. The Medical Research Council undertook to provide half the budget of the Canadian Council on Animal Care for a period of three years with an upper ceiling. So that, along with the National Research Council, it is actually supporting the Canadian Council on Animal Care. That is the general case.

• 1635

In the particular case, it is one of the functions of the grants committees to make sure

that the ordinary humane standards that they are all familiar with will be adhered to in the proposals put before them. Occasionally, when necessary, matters of this sort are raised with the investigator and he is asked to explain and perhaps modify his proposals.

Mrs. MacInnis (Vancouver-Kingsway): Canada, I understand, is one of the few western countries without legislation in this regard. Is your organization in a position to recommend legislation to govern experimental animals?

Dr. Brown: There is some legislation now, but it is not tied together into a single act for this purpose. It is under the Criminal Code.

Mrs. MacInnis (Vancouver-Kingsway): Yes, but I mean over-all legislation governing the use of experimental animals. I believe there is a private member's bill on the Order Paper to that effect right now. However, is your organization in a position to recommend or further legislation in this matter?

Dr. Brown: The Council has not studied the act that is now before the House.

Mrs. MacInnis (Vancouver-Kingsway): No, but I am thinking in general terms. Do you believe that Canada needs over-all animal legislation, the same as other western countries?

Dr. Brown: At the time that the report was received and discussed it was felt that the establishment of the Canadian Council on Animal Care would be the best way to go about it, and that the ends of legislation could be achieved in these other ways without some of the disadvantages of legislation. That was the opinion of the time.

Mrs. MacInnis (Vancouver-Kingsway): Thank you very much, Dr. Brown.

The Chairman: Mr. Ritchie?

Mr. Ritchie: Just a couple of questions. First of all, what is the approximate geographical distribution of grants in Canada? It is pretty regional. Is most of your money spent, say, in the Toronto area, Montreal and central Canada where our universities are probably most developed? Have you any reasonable breakdown on this?

Dr. Brown: Naturally, Mr. Chairman, because there are five medical schools in Ontario and four in Quebec, the greater part of the money goes to those two provinces. For

the year 1967-1968, not 1968-1969, the figures are: B.C. \$1.6 million, Alberta \$1.3 million, Saskatchewan \$500,000, Manitoba \$1 million, Ontario \$7 million, Quebec \$7 million, New Brunswick \$6,000, which is a grant in biomedical engineering at the University of New Brunswick, Nova Scotia \$500,000, Prince Edward Island and Newfoundland, at that time, none. That is the distribution. It follows the distribution of medical schools.

Mr. Ritchie: You make some attempt, though, to see that particular areas that have medical schools get some sort of a reasonable shake, you might say.

Dr. Brown: Yes. If one looks at the numbers of faculty members engaged in research and the numbers of research students engaged in research, they get a fair shake.

In addition to this the newer developing schools and other schools that have special problems are the particular concern of these development grants I was talking about. It is to these areas, these situations, that those moneys go and we have spent three quarters of a million this year on that item.

Mr. Ritchie: You mean you weight your grants for developing medical schools?

Dr. Brown: No, not the ordinary grants. They are not weighted by anything except their own merit.

Mr. Ritchie: Yes.

Dr. Brown: But there are ways to use the money to increase the number of good applications coming from a given situation.

Mr. Ritchie: The second question is on the composition of your Council: I notice that you have 20 additional members representing all aspects. What disciplines are involved, in this? Roughly, what disciplines do you have? What disciplines do these people represent?

• 1640

Dr. Brown: Ophthalmology, anatomy, medicine, microbiology, biochemistry, an internist, a surgeon, a biochemist, a physiologist, a biochemist, an internist, and a pathologist, a biochemist, a physiologist, and then a representative from the schools of pharmacy. That is the whole list.

Mr. Ritchie: You say, ophthalmologists, internists and so on: are these people practising or do they tend to be drawn from the academic staff of the universities?

Dr. Brown: They all hold university appointments. The ophthalmologist is very much practising, but within the university setting, and so are the other internists save one, who has become a dean. And the surgeon very much so. He is the Chief of Orthopaedic Surgery in the Toronto Sick Children's Hospital.

Mr. Ritchie: You make some attempt then to balance your practising people with your theoretical research and university people?

Dr. Brown: Yes.

Mr. Ritchie: How do you pick your members and how are they nominated for this Council?

Dr. Brown: The members are appointed by the Minister, they are not nominated. The Minister takes such advice as he wants, and I give him advice. Whatever additional advice he takes, of course, is his. I would make suggestions to him after consultation in many places, but particularly in the medical school concerned. We want to have a member of Council in each of the medical schools. We look on these people as being our representatives in the schools, rather than the representatives of the schools on the Council. But the university and ourselves always agree on the identity of the next member to be suggested.

Then you have to look at the fields, as you say, and make sure that they are reasonably covered.

Mr. Ritchie: How often does your Council have to meet approximately? Are there many meetings, or a few?

Dr. Brown: It meets at least three times a year.

Mr. Ritchie: Do you do a lot of letter-writing? That is, do problems go through by means of communication?

Dr. Brown: The Executive meets once a month except during the summer, and the secretariat looks after those things that are delegated to it in the interval.

Mr. Ritchie: You have 100 additional senior scientists. Who are these people generally, and where are they generally picked from?

Dr. Brown: They are drawn from the universities and government laboratories in Canada. Some are drawn from industry.

Mr. Ritchie: And the Minister again makes these appointments on your advice.

Dr. Brown: No. They are made by Council.

Mr. Ritchie: Where do these people come from? I gather that somebody in the scientific world has to suggest them. Do you make the suggestions or are the lists...

Dr. Brown: The development of these lists occurs within the executive, again with wide consultation with people in the particular field concerned, whether it is biochemistry, cancer growth and development, transplantation, or what have you.

• 1645

Mr. Ritchie: You mentioned periods of appointments the period of three years. Do you almost invariably change them at the end of three years, or always, or...

Dr. Brown: At the present time it is about half and half. A second term is possible.

Mr. Ritchie: You say that you sift 900 applications. In various fields I think I heard that figure kicked around. That is a great deal to sift. How do you go about sifting applications, for instance, in the field of internal medicine? How do the mechanics of this work within your Council?

Dr. Brown: The figure I mentioned was 800 perhaps, but that was just for this competition. This is the competition that will end with the meeting of the Council in March. We have just finished another competition with 450 applications with respect to the next fiscal year. There will be a smaller competition in June and another one next November. So that the number of grantees is over 1200, and the number of applications is naturally bigger than the number of grantees, so the job is even larger than the first impression I gave. The competition I mentioned is just one of four during the year, but it is the biggest one.

The field of internal medicine is divided according to subject matter. There is a heart and lung committee; there is a committee on cancer growth and differentiation; there is a committee on immunology and transplantation; there is a committee on the neurological sciences, which would include all neurology and neurosurgery, so there are some of these mission committees that take an area right through from anatomy to the far end of the D of the R and D spectrum, whether it is bedside medicine or some other aspect. There is

also a clinical investigation committee. This is the committee to which all the applications in the large field of internal medicine will go which do not properly belong in one or other of the fields I have mentioned.

Also, as I am sure you realize, a number of the proposals that come from departments of internal medicine will not go to any of the committees I have mentioned, they will go straight to the biochemistry or the metabolism and endocrinology committee. So, they are divided according to subject matter among the different grants committees, and they are dealt with according to the procedure I outlined a short time ago for Mr. Osler.

Mr. Ritchie: It is obviously quite a job to sift these. Are you involved with foreign money or foreign support? The Americans seem to support things all over the world, but are they supporting such things as research in medical lines in Canada?

Dr. Brown: Yes.

Mr. Ritchie: Is this a large factor?

Dr. Brown: It has reached a plateau of about a million and a quarter a year.

Mr. Ritchie: Are you people involved in it or know about it?

Dr. Brown: Yes, we know about it. They let us know right away about their awards, and so on, so we are in close touch with each other.

Mr. Ritchie: That is all I have on that item.

The Chairman: Mr. Foster?

Mr. Foster: Dr. Brown, just to follow up Mrs. MacInnis' inquiry, I understand that an experimental animal production centre is being planned somewhere between Hamilton and Guelph. Does your council have anything to do with this?

Dr. Brown: No, we have nothing to do with that.

Mr. Foster: I believe a committee of the deans of the medical schools of Ontario were studying this problem some time ago.

Dr. Brown: Yes. We have not been asked to take any part in that proposal yet.

Mr. Foster: Another item that interested me in this list you gave us is item No. 4, the trial of human growth hormone. Can you tell

us anything about this trial? Is it just now underway? How much money has been appropriated for it and which school is it being carried on at?

Dr. Brown: Yes. It is in its third year and it is costing about \$50,000 a year. It is a national, multi-city, collaborative trial which involves the study of patients from one end of the country to the other. It is a little early to give you any results. The treatment of these unfortunate little people is a chronic affair and this is a five-year project.

Mr. Foster: I see. This is using a variety of hormones?

Dr. Brown: No, using just one. Using human growth hormone for the treatment of dwarfism, which is caused by its absence. In the case of growth hormone, in distinction to some other things such as insulin, for instance, we must use the hormone of the same species if we are to have any effect. This is why it has been a little difficult. You cannot take growth hormone from the bull and use it.

• 1650

Mr. Foster: No. I assume the other item, antilymphocyte serum, is used for treating cases of leukemia?

Dr. Brown: No, this is the serum which may have a use in the handling of the rejection of grafts.

Mr. Foster: I see.

Dr. Brown: This is the use that is now being examined. This is a most dramatic possibility because it will make an important contribution to the transplantation problem, and again a national and multi-city collaborative trial has been set up to determine whether it really is good or not. In the handling of the common transplant situation, the kidney transplant, all the medical schools that are doing them have agreed to collaborate in this trial. The trial itself is not yet underway although the production of serum for the trial is well underway.

Mr. Foster: I see. How much money has been appropriated for this project?

Dr. Brown: In order to get underway this year it cost \$35,000. Next year \$100,000 has been set aside.

Mr. Foster: Mention has been made of the fact that deans of the schools have a certain

amount of money for use at their discretion. How much money is this?

Dr. Brown: In the budget year that we are talking about it was \$24,000, which is very small.

Mr. Foster: Yes. Those are all the questions I have.

The Chairman: Mr. Yewchuk?

Mr. Yewchuk: Dr. Brown, you mentioned a few minutes ago that in order to attract high quality teaching doctors to our teaching institutions it is necessary to have expanded and high quality research facilities. The Minister of Health recently announced certain cut-backs in health spending, such as a decrease in the Health Resources Fund, a \$20 million cut in other health grants, as well as the discontinuance of the hospital construction grant to provinces. Do you foresee this as a drawback? Will it decrease expansion of medical teaching and research facilities? What is your view on that?

Dr. Brown: Inevitably, Mr. Chairman, as everyone realizes the diminishing of the amount of money that goes into construction will lead to a slowing down or a rescheduling of construction proposals.

Mr. Yewchuk: To your knowledge have any specific projects had to be cancelled this year because of this?

Dr. Brown: No, not to my knowledge. There may be some, but I am not aware of them. The explanation for this is that the Health Resources Fund is a relatively recent creation and the expenditures were still on the ascendancy.

Mr. Yewchuk: Referring to the \$20 million which has been classified as "other health grants", has this affected grants to researchers in any way?

Dr. Brown: Yes. These health grants were not all that much concerned with the sort of research with which we have been concerned in the Department of National Health and Welfare the item which has its biggest interface with us is the Public Health Research Grant. These other health grants will not affect this at the present time.

Mr. Yewchuk: You touched briefly on organ transplants. Are there any particular centre in our country which are principally doing

research on heart transplants, or have there been any particular new developments along these lines in the past year or so? Have there been requests for increased or special grants for this purpose?

Dr. Brown: It was heart transplants that you were interested in?

Mr. Yewchuk: Yes.

• 1655

Dr. Brown: The Council supports research in cardiac surgery in a number of centres; the University of Montreal, McGill University and the University of Toronto, among others. The other component of this is the immunological one, the rejection side of it. The big centres here—there are centres where there is not as much strength on the bench, although some of them are of very high quality—are a group at the University of Toronto and two groups in the City of Montreal. What have they accomplished? As you have seen, on the technical side Canadians are ready and able to transplant hearts quite as effectively as anyone else. As to the rejection side, no one knows the solution to this problem yet. We are not behind. In fact, I think we are at the front. Some very complimentary things have been said about our antilymphocyte serum project and the way that this has been gone about. Perhaps this answers your question. In both of these fields—and any transplant situation is a double-barrelled thing—there is first-rate work going on and our people are at the front of it.

If I may go into a little bit of detail, one of the areas which may be of crucial importance, and which is receiving a good deal of study in Canada, is the determination of the antigen which excites the rejection reaction, and it is in the modification of antigens and their effect that a very important contribution is being made in Canada. There may be developments along these lines similar to those that occurred with the antibiotics.

Mr. Yewchuk: Have the various research centres which are involved been pretty well getting as much in the form of grants as they have requested or need and, if not, what percentages should they be getting?

Dr. Brown: In the budget year that is under discussion, 1968-69, the award rate for grants-in-aid will be 54 per cent, give or take some decimal points but not a full percentage point.

Mr. Yewchuk: The research people are getting about 54 per cent of what they wanted. Is this correct?

Dr. Brown: Yes.

Mr. Yewchuk: How do you go about establishing this figure or cutting some of them out? I suppose it is obvious that some of the proposed projects have to be weeded out.

Dr. Brown: Yes. Some of them are weeded out, as you say. The first of them are dealt with in this way. As a result of the work of the grants committees and the different assessments they are actually put in order of merit with numerical ratings.

Mr. Yewchuk: Who sets the order of merit?

Dr. Brown: The grants committees give the ratings on a scale from zero to 1,000, and then the award rate is determined by proceeding down from the top of this list, if you like, until your money runs out.

Mr. Yewchuk: How does our contribution to medical research compare with that of Great Britain or the United States, the ratio of requests as compared to what is granted?

Dr. Brown: I do not know the recent U.K. figures. The present American figures are somewhat like ours, and in the past, of course their award figures have been very much higher.

Mr. Yewchuk: During the recent Post Office Bill debate there were various representations from scientific research people that because of the increased rates they would either have to discontinue publishing their journals, or decrease the frequency of their publications. Is there actually a danger of this?

• 1700

Dr. Brown: I did not see that story but, frankly, I would doubt it. You just increase your subscription cost.

Mr. Yewchuk: Yes; I did not believe it either, but I wanted to hear your comment on it.

Mr. Ritchie: I have a supplementary question.

Do your workers have trouble having their papers published after they have finished them?

Dr. Brown: Not when they are good.

Mr. Ritchie: But some do, do they not?

Dr. Brown: I do not think there is any great problem, Mr. Ritchie. In good journals at the present time there is a delay of six and sometimes nine months between submission and publication, but I do not really think that there are significant examples of good papers lying around unpublished because they have been rejected.

• 1700

There are so many different journals now that if, because of an error in judgment, a paper is rejected by one journal there are several alternatives to which it can be submitted. It is not a closed situation any longer.

Mr. Yewchuk: Do you feel that the government is sufficiently participating by its grants to medical research to allow of first-rate development of research facilities in Canada, in keeping with the best in the world?

Dr. Brown: It depends, first, on what you want to be best at. Here, I think, you have to set your goals.

As I have mentioned already, there is a need for an increase in the research component of medical schools, pharmacy schools and dental schools, and one will have to occur if the output from these schools is to be of a quality that I expect people, as customers, want it to be, and if the output is to be of as high a quality as is that of good American schools.

We are in an international continental market here. This is one feature of the situation. The amount of money required for this depends on the rate at which the medical schools are able to proceed with their expansion plans.

Mr. Yewchuk: Are we losing medical research people to the United States because of the superior facilities there?

Dr. Brown: We have lost large numbers, but the traffic southward has diminished in the last eighteen months. There is a significant traffic back.

The situation is still not one about which one can be complacent, but it is quite different from what it was eighteen months ago.

Mr. Yewchuk: What factors were responsible for that? The idea of the Health Resources Fund made provinces feel, generally, that they were going to extend their facilities. In your opinion, has this assurance that the provinces had of expansion of their facilities by drawing from the Health Resources Fund

played any role in bringing people back to Canada?

Dr. Brown: There were three chief factors. One was financial, the prospect, and actuality of improved opportunities for research and teaching in Canada; the second was political; and the third was social. All these factors are concerned in the decision of people to come north instead of going south.

Mr. Yewchuk: I am very concerned about these announcements of cutbacks. I may be wrong—that is why I am asking so many questions on this point—but I fear that we will possibly lose some of our research staff and attract fewer good, top-level research people for our reaching institutions as a result of these three announced cutbacks.

• 1705

Dr. Brown: It may be. We will have to wait to see what the balance is between the two countries, but it could have that result. The funding situation in the United States, too, is vastly different from what it was 24 months ago.

Mr. Yewchuk: Thank you very much.

The Chairman: Does Vote 50 carry?

Mr. Gilbert: Mr. Chairman, before we have a vote, may I thank Dr. Brown for the excellent presentation he has made to us. I am beginning to understand the subject.

Dr. Brown: Thank you.

Mr. Gilbert: Once I read the transcript, who knows, I may be able to understand about 50 per cent of it.

Dr. Brown, what grants, if any, have been made to research into alcoholism and the drug field? I recall that Dr. Gregory Fraser, who is head of the Addiction Research Foundation in Toronto, appeared before the Justice and Legal Affairs Committee. The burden of his message was that there had to be co-operation between the federal and provincial governments in the development of this field and that there did not appear to be too much support from the federal authority. What grants, if any, have been given to this type of institution?

Dr. Brown: Very few by us, because we have been asked for very few. There are other sources of funds for those who want to work

in the field of alcoholism, either in the social science or pharmacological side of it.

Researches naturally feel their way when they are looking for sources of money, and the pressures are not such as to result in many of them coming to us; and not many of them do. In Ontario they go largely to the Foundation. If they were to come to us they would be considered, as is everything else on their merits.

Mr. Gilbert: Is it likewise with drugs?

Dr. Brown: The same applies. By "drugs" do you mean addiction?

Mr. Gilbert: Yes.

Dr. Brown: No; we have not had all that many requests for money for that. During the past summer we gave money in support of a symposium at Laval examining the addiction situation and its social aspects.

Mr. Gilbert: Thank you, Doctor.

Mr. Monteith: Mr. Chairman, under Vote 50, Administrative and Foreign Service, exactly what foreign service is involved there, Dr. Brown?

Dr. Brown: If I may I will turn to the Secretary of the Council for the technical jargon, Mr. Chairman.

Dr. J. Roxburgh (Secretary, Medical Research Council): The term "Administrative and Foreign Service" covers a category of employees right across the public service. I think we have one in that category.

Mr. Monteith: One in the administrative end, who is concerned with foreign service?

Dr. Roxburgh: No, this is all-inclusive. This is administrative and foreign service. These are two different entries.

Mr. Monteith: That is implied by the reference to "foreign service"?

Dr. Roxburgh: This is a category used primarily by the Departments of External Affairs and Trade and Commerce, who have people abroad, but it also includes administrative people in Ottawa, who have nothing whatsoever to do with foreign service.

Mr. Monteith: Do you have in this category anyone who has anything to do with foreign service?

Dr. Roxburgh: No, we do not.

Dr. Brown: It is just a Treasury Board term.

Mr. Monteith: That is fine, they have some queer ones.

Still under Vote 50, there is the item, Publication of Scientific Journals and Other Material. Does the Council itself produce journals?

Dr. Brown: No; again this is a category term. We do not publish journals.

Mr. Monteith: Would this include publication of your report, for instance?

Dr. Brown: No; the money for the report came out of Vote 55. The biggest part of our item under that heading is for duplication—ordinary printing. That is, duplication for internal use and for committees, and so on.

• 1710

Mr. Monteith: Then, still under Vote 50, Professional and Special Services: What does that entail?

Dr. Brown: There are various consultants that are retained for various special ad hoc jobs. We make, for instance, considerable use of on site visits. If we are not content with the documenting of an application, either because of its complexity or because we think something is left out, then we may send on site visitors to the place to try to get the information and make the assessment on the spot.

Mr. Monteith: If this happens in Vancouver, for example, you would have somebody from Vancouver make this on site visit.

Dr. Brown: If the problem were in Vancouver?

Mr. Monteith: Yes.

Dr. Brown: The visitors would then be from outside Vancouver.

Mr. Osler: I have just a small point, Mr. Chairman, for Dr. Brown. There are three areas that could be construed as natural to each other and you have said that some things would come under the Department of National Health and Welfare, for instance, and others under yours. The other thing would be military medicine. It is probably too pretty a word for what I have in the back of my mind, but have you anything to do with military medicine or do you co-ordinate in

any way? Do you know what the people at Suffield are doing, for instance? That used to be the place where they did a lot of military medicine and gas warfare and so on. Do you have anything directly to do with them in any projects or, if you do not, do you at least liaise with them in some way? There is an overlap, I think; sometimes military things turn out to be of civilian use.

Dr. Brown: We do liaise. I have visited Suffield. I am a member of the Medical Advisory Committee of the Defence Research Board. There is this sort of tie-in. Then at the working level, in the consideration of individual applications for funds, there is close collaboration between the officials of the Defence Research Board having to do with their grants operation and our officials, so there is this sort of tie-in at the policy-making level and then at the executive level.

Mr. Osler: The other question, then, is in the opposite direction. It is towards welfare. It has been loosely said—probably not so loosely; it is probably statistically correct but I have only read it in loose terms—that present conditions in our cities probably are the cause of certain mental stresses and strains that seem to be more evident than they might otherwise be. Would the people that are trying to look after the housing problems ever ask you to take steps to be able to give medical opinions at how things should be designed or how problems should be attacked? Do you see what I am getting at?

Dr. Brown: I think, as you imply, that this sort of research approach to housing has not yet been accomplished, has it? I see that you feel that it will someday have to be.

Mr. Osler: I feel it is a question mark.

Dr. Brown: The social sciences will have to be involved as much as those sciences having to do with construction.

Mr. Osler: Right.

Dr. Brown: I am sure that is the case, and...

Mr. Osler: It is not very far from there to psychiatry, though. This is the sort of thing I meant, and that is a sort of legitimate medical area, you see.

Dr. Brown: Yes. Psychiatry is within our field, although we do not provide by any means all the money in the field, and there

are other sources again for psychiatry and clinical psychology, and this sort of thing. Medical sociology, if and when it is done within a medical school setting, the Council will support.

Mr. Osler: Yes.

Mrs. MacInnis (Vancouver-Kingsway): May I ask a supplementary, Mr. Chairman? Does your Council make any grants for military research?

Dr. Brown: No; DRB.

• 1715

Mr. Howe: I have one question, Mr. Chairman. I was rather interested; I just opened this report and it said something about summer projects for student research in connection with an investigator. Is this encouraged by your medical research organization?

Dr. Brown: Yes, we do make some money available for the employment of summer students. This really helps to provide them with a research semester between two didactic, two teaching, semesters and it has served many good purposes. It has provided students with an opportunity to find out in a very practical way what research is like and thereby has given them an opportunity to decide whether it is for them or not.

Mr. Howe: Is this carried on by all the medical schools?

Dr. Brown: They all do it to some extent.

Mr. Howe: And you support that?

Dr. Brown: Yes.

Mr. Howe: This is taken into consideration.

Dr. Brown: We support some of it. We give each school an amount of money determined by formula, taking into account the number of students it has.

Mr. Howe: And that is the formula on which you base your grants?

Dr. Brown: That is right.

The Chairman: Shall Item 50 carry?

Item 50 agreed to.

The Chairman: I will now call Item 55.

55. Medical Research Council Scholarships and Grants in aid of Research in accordance with terms and conditions

prescribed by the Governor in Council...\$26,943,000

Mr. Ritchie: I have lots of questions on this one. Going back to page 3 of the review, I see you have committees convened for really big development things; first of all, "linked medical records". As an ad hoc committee you are just studying these, I presume.

Dr. Brown: Yes; these are three illustrations of the sort of thing that has been done and the report of the committee studying the research uses of linked medical records is just out. The other two reports are not ready.

Mr. Ritchie: I see. You cannot discuss to any degree, for instance, "national primate facilities". This is a really big thing, is it not?

Dr. Brown: It could be; it could be. I would be glad to discuss some aspects of this, and it has been taken to a certain stage by the Council. There is a need in Canada for the provision of primates for research purposes. These are needed for studies of drug toxicity because of the greater similarity between the metabolism of these beasts and man than between the metabolism of smaller animals and man. They are needed by dentists, by psychologists, by the reproductive physiologists, by the obstetricians and the pediatricians—by a wide variety of people.

The importation and housing of them is a very big item and the problem is not to be solved along those lines because the sources of the monkey are, to some extent drying up. They cannot meet the increasing market, at any rate. What is required is a facility that can arrange for the importation of healthy monkeys and the breeding of monkeys. With this, there may well be an associated primate research facility—laboratories where research is carried on involving primates as the experimental animal.

Such a centre would have to supply primates and trained personnel, perhaps, for universities in a particular region or perhaps for the whole country, so it is a big item. In size, one thinks of a facility that would house 1,000 to 5,000 monkeys. It is a big item but it is badly needed. But simply because of circumstances, to say to Canadian researchers that by and large they cannot work with monkeys would be like saying to the biochemists that they cannot use spectrometers. It is of that order. The Council has put itself on record as saying, on the basis of the partial report made to it already, that establish-

ment of such a facility should be undertaken, possibly in two places rather than one in close connection with one or a group of universities, and that it should be undertaken as soon as it is feasible.

Mr. Ritchie: Has any figure or approximate cost been discussed?

Dr. Brown: It will take several million dollars to build and it will take one and a half to two million dollars a year to operate.

Mr. Ritchie: What monkey are generally used now?

Dr. Brown: I cannot give you the name of the species.

Mr. Ritchie: How many of these centre do the Americans have?

Dr. Brown: They have approximately half a dozen centres.

Mr. Ritchie: I was also interested in drug research institutes. Must drugs today are developed by international drug companies. How many drug research institutes do you have in mind.

Dr. Brown: One or two. They are institutes or groups that do research into drug toxicity and metabolism.

Mr. Ritchie: You would be largely concerned with the testing.

Dr. Brown: Study of toxicity and methods of testing. There is not any suggestion that there be simply the provision of a service facility—this is a Food and Drug job. Actually, the first suggestion that the MRC look into this came from a member of the staff of Food and Drug, who suggested additional research into methods of studying drug toxicity and drug metabolism—tissue levels, blood levels and that sort of thing.

Mr. Ritchie: Do you envisage this being a large undertaking in the beginning?

Dr. Brown: In the beginning two such Groups are envisaged—not institutes but more flexible things called Groups—in association with universities that were willing and anxious to do it. The Medical Research Council would provide the salaries and direct costs of a research group working in this field of drug toxicology and drug metabolism. But the feeling at the moment is that perhaps a better way to go about this is to use the MRC

Group mechanism. One ordinarily thinks of a Group lasting for five years and then, if it is a success, you go on. It is a good flexible arrangement. Institutes are not all that flexible sometimes and when they have fulfilled their purpose it is a little hard to get rid of them. This is not the case with Groups. That is the way the feeling is going now.

A relatively slow beginning will have to be made because the problem of too few people working in the field still exists, and if there are too few people working in the field you cannot establish a large institute right away. There is a contradiction here; you have to make a slow beginning.

Mr. Ritchie: Would this not be duplicating a great deal of what must be done in the States at the moment.

Dr. Brown: No.

Mr. Ritchie: Are they doing much of this?

Dr. Brown: There is room for both of us to be busy at it.

Mr. Ritchie: You do not have in mind research in the sense of new drugs at this time.

Dr. Brown: Testing of new compounds. No.

Mr. Ritchie: Or originating.

Dr. Brown: No. This is a job for the chemistry laboratories.

Mr. Ritchie: What advantage for Canada would linked medical records give us?

Dr. Brown: There is the possibility of important research being done with records which are now already being accumulated, and this was the problem that was being looked at. I am referring to records of births, deaths, marriages, hospital admissions and so on.

• 1725

Mr. Ritchie: In respect of research assistance you have:

1) the provision of support for post-graduate training in research at both the pre-doctoral and post-doctoral levels...

Do you mean the F.R.S.C.'s or is that one of the doctoral levels?

Dr. Brown: No. Pre-doctoral is pre Ph. D.

Mr. Ritchie: Oh yes.

Dr. Brown: The pre-doctoral student is the student who is the B.A.-Ph.D. stream, not the one who is in the M.D. stream.

Mr. Ritchie: I presume these are usually in the basic sciences.

Dr. Brown: Yes.

Mr. Ritchie: How much money do they get approximately?

Dr. Brown: \$3,600 per year.

Mr. Ritchie: And approximately how many do you give out?

Dr. Brown: We spent about \$600,000 on them this year.

Mr. Ritchie: In what are they mainly involved?

Dr. Brown: The discipline which takes more of these than any others is biochemistry.

Mr. Ritchie: I was a little more interested in his:

1) the provision of Negotiated Development Grants on a short-term basis to enable medical and pharmacy schools to initiate new programs and attract new staff;

How much money approximately do you anticipate in this field this year?

Dr. Brown: \$750,000.

Mr. Ritchie: Can you tell us who it might go to?

Dr. Brown: Yes. It was divided on the basis of half to the four new schools and half for proposals coming from the older schools. The four new schools of course are McMaster, Sherbrooke, Memorial and Calgary. The other half is to be used for proposals coming from the older schools. The grants to the older schools went to Ottawa, London, Winnipeg, Saskatoon, British Columbia, and Toronto.

Mr. Ritchie: You say on page 2,

2) the support of Medical Research Council Groups devoted to intensive research in a few highly productive fields...

Can you tell us in what fields you are making your effort and that you hope will be most successful?

Dr. Brown: Yes. Again, we do not make the effort, it is the researchers who do. The one Group that we have so far—this is a recent program—is a Group in the neurological sciences in the University of Montreal. They have been established as a Medical Research Council Group for a short time. A Group is a means of bringing together and supporting over a guaranteed minimum of time a number of already distinguished investigators, who you hope, because of the intensity of their work in a given field, will produce quite significant results. This group in the neurosciences at the University of Montreal are known the world over for both their anatomy and their physiology.

Mr. Ritchie: Have you any other areas?

Dr. Brown: No, this is the only Group we have at the moment.

Mr. Ritchie: How much do they get approximately?

Dr. Brown: They get about \$225,000 for that contract per annum.

Mr. Ritchie: You have another one here:

5) the provision of a small general research grant to the dean of each school of medicine and of pharmacy for use at his discretion for the development of research in his university:

Approximately how much money does this involve?

Dr. Brown: \$24,000 to each dean of medicine and \$5,000 to each dean of pharmacy.

Mr. Ritchie: And he gives that out as he sees fit.

Dr. Brown: Yes.

Mr. Ritchie: Thank you. I have no more questions.

Mr. McBride: I have a very minor point, Mr. Chairman, by way of supplementary. This production of monkeys is not seen as an economically self-supporting enterprise, is it? I take it the demand is not good enough or the price paid for the end product is not good enough. I am thinking in terms of the agricultural community, for instance, which produces foxes, mink, chinchilla and all kinds of things. It seems to me that if you thought of it in terms of that would be an area into which people would be prepared to move, but I take it that it is a product on which you

would lose money and therefore this must be done by the agencies needing it. Is this so?

Dr. Brown: At the moment, Mr. McBride, we think it is. There is no real reason that it should not be done commercially except that it is very unpleasant work.

Mr. McBride: Unpleasant?

Dr. Brown: Yes; they are difficult creatures to work with.

Mr. McBride: They are too much like humans, are they?

• 1730

Dr. Brown: Well, you can make that extension. But as you say, someone has to pay for them in the end, government or not, and therefore the job is being paid for.

Mr. McBride: The agricultural community today have climate-controlled buildings that house thousands of hogs, so there is no problem there at all. This is all being done by free-enterprise.

Dr. Brown: Oh, the techniques are there. But no where in the world to my knowledge, is it being done. They are being trapped commercially and sold. Count \$100 a monkey, as you think of this, and you have the size of the market.

Mr. McBride: One hundred dollars. At what age?

Dr. Brown: There are imported at about the age of 2 years.

Mr. McBride: It is a minor point, Mr. Chairman. That is all.

Mr. Howe: Mr. Chairman, I was interested in looking over this Medical Research Council Report, No. 2, showing the amount of money that is provided in Canada by United States voluntary agencies and by the United States Government directly. Is this money that comes in from the United States directed by your Council to certain agencies?

Dr. Brown: No, sir.

Mr. Howe: The projects that are being worked on, what is the reason for this money coming directly from the United States Government? Are they point projects that the two governments are working on?

Dr. Brown: No. They, for various reasons, have spent research money outside the United States, in Canada and in other countries.

Mr. Howe: Do they have access to all the information? Does this give them special privileges in connection with our security in this field?

Dr. Brown: No, not at all.

Mr. Howe: Anything that they put money into they have no control over? Is it just that they are big-hearted enough to help us out?

Dr. Brown: The results of the work that they support will be published in the open scientific literature available to the world.

Mr. Howe: It is rather unusual that in this list of agencies who are assisting research in Canada, the United States is the only other country that is assisting in direct grants.

Dr. Brown: Yes. A little voluntary money comes from Germany, also.

Mr. Howe: In your grant system, or in your research organization, do you provide money to any United States projects, or areas, or any other parts of the world?

Dr. Brown: No.

Mr. Howe: Thank you.

Mr. Osler: It is like the brainwashing that Carnegie Institute gave us, I guess, by providing us with libraries. It got us thinking. It got us going. I think it is very sinister. It may even bring us up to standards.

Mr. Monteith: Just one question, Mr. Chairman, before you put the vote. Could Dr. Brown indicate what the smallest grant might be in this past year or any year at all?

Dr. Brown: Eight hundred dollars.

Mr. Monteith: For what type of endeavour?

Dr. Brown: This had to do with the purchase of supplies for a project at the University of Western Ontario.

Mr. Monteith: And the largest?

Dr. Brown: Over \$100,000. Something in that order, Mr. Monteith. I am hesitating a

bit because we are financing some workers at a rate above \$100,000 per annum. But the man may hold more than one grant.

Mr. Monteith: By man, do you mean a group?

Dr. Brown: One man.

Mr. Monteith: One man representing a group, though?

Dr. Brown: In effect he does.

The Chairman: Shall Item 55 carry?

Item 55 agreed to.

The Chairman: This completes our study of the estimates of the Medical Research Council.

Shall I report to the House, recommending adoption of the estimates?

Agreed.

The Chairman: I wish in your name to thank Dr. Brown, who is the Chairman of the Medical Research Council, and also Dr. Roxburgh and Miss Wright. Thank you very much.

• 1735

Gentlemen, the Committee has received from the House, as you know, a number of Private Members' Bills on cigarette smoking. It is my intention to have a meeting of the subcommittee to discuss our procedure in this matter. So probably some time this week, probably Thursday, at 1.30, we will convene.

As there is nothing before us at the moment, the meeting will now adjourn to the call of the Chair.

Mr. Gilbert: Mr. Chairman, before we formally adjourn could you advise us when the estimates of the Central Mortgage and Housing Corporation are going to be referred to the Committee?

The Chairman: We will let you know.

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APPENDIX

A—The items listed in the Revised Main Estimates for 1968-69, relating to Central Mortgage and Housing Corporation, to Consumer and Corporate Affairs, and to Medical Research Council.

HOUSE OF COMMONS

First Session—Twenty-eighth Parliament

1968

STANDING COMMITTEE

ON

HEALTH, WELFARE AND SOCIAL AFFAIRS

Chairman: Mr. GASTON ISABELLE

MINUTES OF PROCEEDINGS AND EVIDENCE

No. 9

THURSDAY, DECEMBER 19, 1968

Respecting the subject-matter of

Bill C-39, An Act to amend the Broadcasting Act (cigarette advertising);

Bill C-45, An Act to restrain the use of Tobacco;

Bill C-53, An Act to amend the Food and Drugs Act;

Bill C-134, An Act to amend the Tobacco Restraint Act;

Bill C-137, An Act to amend the Broadcasting Act (Prohibition of cigarette advertising);

Bill C-147, An Act to control the tar content and nicotine level of cigarettes.

The Hon. John Munro, Minister of National Health and Welfare,
and

From the Department of National Health and Welfare: Dr. E. A. Watkinson, Director General of the Health Services Branch; Dr. H. N. Colburn, Consultant, Smoking and Health.

ROGER DUHAMEL, F.R.S.C.
QUEEN'S PRINTER AND CONTROLLER OF STATIONERY
OTTAWA, 1968

STANDING COMMITTEE
ON
HEALTH, WELFARE AND SOCIAL AFFAIRS

Chairman: Mr. Gaston Isabelle

Vice-Chairman: Mr. Steve Otto

and Messrs.

Forget,	MacInnis (Mrs.) (<i>Vancouver-Kingsway</i>),	Robinson,
Fortin,		Rochon,
Foster,	¹ Mather,	Rynard,
Gendron,	McBride,	Thomas (<i>Maisonneuve</i>),
Godin,	Monteith,	² Yanakis,
Guilbault,	Ritchie,	Yewchuk—20.
Howe,		

(Quorum 11)

Gabrielle Savard,
Clerk of the Committee.

¹Mr. Mather replaced Mr. Gilbert on December 17.

²Mr. Yanakis replaced Mr. Osler on December 18.

ORDERS OF REFERENCE

FRIDAY, November 29, 1968.

Ordered,—That the order for the second reading of Bills C-39, C-45, C-53, C-134 and C-137 be discharged and that the subject-matter of the said bills be referred to the Standing Committee on Health, Welfare and Social Affairs.

TUESDAY, December 17, 1968.

Ordered,—That the name of Mr. Mather be substituted for that of Mr. Gilbert on the Standing Committee on Health, Welfare and Social Affairs.

WEDNESDAY, December 18, 1968.

Ordered,—That the name of Mr. Yanakis be substituted for that of Mr. Osler on the Standing Committee on Health, Welfare and Social Affairs.

Ordered,—That the subject-matter of Bill C-147, An Act to control the tar content and nicotine level of cigarettes be referred to the Standing Committee on Health, Welfare and Social Affairs.

ATTEST:

ALISTAIR FRASER
The Clerk of the House of Commons.

(Text)

MINUTES OF PROCEEDINGS

THURSDAY, December 19, 1968.
(10)

The Standing Committee on Health, Welfare and Social Affairs met this day at 4:10 o'clock p.m. The Chairman, Mr. Gaston Isabelle, presided.

Members present: Mrs. MacInnis, Messrs. Forget, Fortin, Gendron, Isabelle, Mather, McBride, Monteith, Robinson, Rochon, Thomas (*Maisonneuve*), Yanakis, Yewchuk.—(13)

Other Member present: Mr. Knowles (*Norfolk-Halifax*).

In attendance: The Hon. John Munro, Minister of National Health and Welfare; and *from the Department of National Health and Welfare:* Dr. E. A. Watkinson, Director General of Health Services; and Dr. H. N. Colburn, Consultant, Smoking and Health.

The Committee proceeded to the consideration of the subject-matter of Bills C-39, C-45, C-53, C-134, C-137 and C-147.

The Chairman welcomed the Minister and the officials accompanying him.

The Minister read a prepared statement and tabled a document entitled "Cigarette Smoking and Health".

*Agreed,—*That the above document be printed as an appendix to this day's proceedings (*See Appendix B*).

The Minister was questioned. Dr. Watkinson and Dr. Colburn also supplied information to the Members.

The questioning concluded, on behalf of the Committee the Chairman expressed his gratitude to the Minister for his presentation and thanked the officials of his department.

At 5:30 o'clock p.m. the Committee adjourned to the call of the Chair.

Gabrielle Savard,
Clerk of the Committee.

EVIDENCE

(Recorded by Electronic Apparatus)

Thursday, December 19, 1968

• 1609

The Chairman: Lady and Gentlemen, since our last meeting, the subcommittee on Agenda and Procedure met and discussed the procedure to be followed with regard to the Order of Reference of November 29, the subject-matter of some private Members' bills dealing with Tobacco and Cigarettes.

The subcommittee agreed that the Minister of National Health and Welfare be invited to make a presentation before the Christmas adjournment; that the sponsors be also invited to explain the purpose of their bills; and that representatives of the Canadian Broadcasting Corporation and of other media of publicity be called with respect to advertizing. Does the Committee agree on this?

Some Members: Agreed.

The Chairman: It is our intention to invite experts in cancer research, and if you have any other suggestions, they will be considered by the Subcommittee. Anyone wishing to present a brief is invited to let the Chairman or the Clerk of the Committee know of his intention as soon as possible, so that we can draft our schedule; the briefs should be submitted in English and in French.

Needless to say, the public is welcome to our meetings.

The Clerk of the Committee has prepared a file for each Member; this file contains a copy of the bills in question, some information about legislation in the United States and in the United Kingdom, publications from the Smoking and Health Branch of our own Department of National Health and Welfare. A precis of information available from the United States on the subject will be presented to the Members in January. You will also find correspondence from Mr. Duane H. Forsyth of Welling, Alta., and his ideas on smoking problems. I hope that you will have a chance to have a look at this file before our next meeting in January.

Now, it is our pleasure to welcome today the Honourable John Munro, Minister of National Health and Welfare, who will make a statement and answer your questions. Mr. Munro is accompanied by Dr. Watkinson, Director General of Health Services and also Dr. Colburn, Medical Consultant, Department of National Health and Welfare. Also I should point out that the Deputy Minister of the Department of National Health and Welfare, Dr. Crawford, is here with the Minister. Mr. Minister?

• 1610

Mr. Robinson: Mr. Chairman, on a point of procedure, if I may, in view of the urgent national concern and public interest in respect to the use of tobacco, would the Minister consider national TV for the sessions of the Health, Welfare and Social Affairs Committee when this subject is being examined?

The Chairman: The Chair will take this under consideration and we will see about it as soon as possible.

Mr. Robinson: I have a further point, Mr. Chairman, with regard to procedure. Since this matter concerns smoking, and smoking is a health hazard, I am wondering whether all the smokers should not be removed from the Committee and become witnesses only to the Committee. I am not suggesting, of course, that this include the Minister who is before us today.

Mr. Mather: May I ask a supplementary on that? My point, sir, is supplementary to the question just raised about smokers being forbidden to attend the Committee. I would welcome the smokers, but I would like to see all people concerned with selling tobacco products removed from the Committee.

The Chairman: We will have plenty of time to examine all those matters; thank you. Mr. Minister?

The Honourable John Munro (Minister of National Health and Welfare): Mr. Chairman,

Mrs. MacInnis and gentlemen, today I want to say a few things about a rather widespread practice—cigarette smoking. The things I want to say are very simple. Within the Canadian government, I am the Minister responsible for health. Cigarette smoking is harmful to health, individually and collectively. It is a habit that all too often contributes to disability, disease, and even death.

I do not wish to drag out a long series of statistics, nor do I wish to give you a detailed clinical explanation of how smoking causes illness. In the paper I present, and in the supporting documents you will receive later on, the points are made much more effectively and at much greater length than you and I have time for today. I do wish to say, however, that I have been convinced of the hazard—the frequently fatal hazard—of smoking.

As you know, I am so convinced that I am fighting to give up the habit. It is not an easy struggle. Cigarettes are addictive, and there is the real harm. They create a physiological dependence. You cannot just leave off smoking; you must fight to kick the addiction. I used two or three packages a day. Let me assure you that I realize how deeply ingrained the habit can become.

Yet, I am trying to quit. Why? Because I want to live, and live a healthy life; because I have come to appreciate the damage I do to my physical system by smoking and because, as Minister of Health, it is my hope that all Canadians will come to the same realization.

I said that cigarette smoking causes both individual and collective damage. The individual damage can be stated quite clearly. Smoking is the leading cause of lung cancer. Moreover, cigarette smokers are more prone than non-smokers to some other types of cancer as well. I do not wish to frighten people unnecessarily, but I consider this fact proven beyond all reasonable doubt, and I do not have to emphasize that cancer is not a particularly happy disease to possess. It has a very high mortality rate.

• 1615

This is not the only health charge against cigarettes. Affecting the lungs as it does, it causes chronic respiratory disease—bronchitis and emphysema. Those who have suffered from bouts of heavy, painful coughing due to cigarettes know what I am talking about—ask any athletics coach. As a simple personal

proof, I could ask every heavy smoker to try a 200-yard sprint at top speed, or a one-mile run. Let them then come back, gasping and perhaps wheezing extensively, and tell me that their respiratory system has not been affected.

Nor is this all. As the report points out, and I think, Mr. Chairman, most members have the report, and as the Canadian Heart Foundation would confirm, smoking is an important factor in heart disease. It increases the risk enormously. If you look in the report you will note that the male cigarette smokers suffer fatal heart attacks at a rate 70 per cent greater than that of non-smokers. The risk is run especially by young and middle-aged smokers, who are two to three times more susceptible to such attacks than non-smokers in their age brackets, and coronary heart disease is the leading single cause of death in this country.

Overall, there is no doubt that cigarettes lower life expectancy. As a matter of fact, it has been estimated that every cigarette smoked means about eight minutes off your life. This can be expressed in terms of years. Thus, a young man of 32 who smokes a half to a full pack a day is, on the average, giving himself 5 years less life expectancy. For heavier smokers the rate is higher.

Therefore, in the instance of the individual cigarette smoker, we find that the habit is extremely risky. If we found the same contribution to fatal illness being made by, say, a type of toothpaste or a brand of breakfast cereal, public demand would force its complete removal from the market place. After all, a person's good health is one of his most valuable possessions, and a person's life is a priceless asset.

I also said that cigarette smoking results in collective national damage. It is often claimed that the tobacco industry is one of our most economically important Canadian enterprises. To a certain extent, this is true. The number of jobs generated in the growth and manufacture of tobacco products is large. The consumer spending it generates adds to our economy, and I do not need the Minister of Finance to remind me that an important segment of federal and provincial government tax revenue comes from cigarettes.

Yet despite all this, there are costs involved as well. A large number of productive man-days and man-years are lost through illness caused by diseases to which smoking is a

contributing factor. Then there are the hospital and medical expenses incurred. Furthermore, a lot of important and economically productive human talent is lost by death from lung cancer, heart attack, and other diseases involving tobacco use.

● 1620

Over and above these economic questions remains the human factor. We can never lose sight of the fact that the issue is the health and happiness, and indeed the lives, of countless Canadians.

Therefore, I am not coming before you to argue against smoking on any moral or religious grounds. I base my case on human factors. It is not that we at the Health Department are against smoking per se. It is simply that we are concerned with anything that can preserve human lives and national health. Cigarette smoking harms both.

I mentioned that I am trying to quit the habit for health reasons. This is true. But there is another reason, one more important than my own personal safety which, I assure you, I value very highly indeed. The other reason I quit was to provide an example—an example first and foremost that the habit is a bad one, especially an example to our young people.

The best way to quit, of course, in our opinion, is never to start or, to put it another way, the safe cigarette is the one you do not light. I do not expect a majority of those who at present are heavy cigarette smokers to quit overnight, although I would applaud vigorously if this were the case, but I know personally how hard it is. However, it is with our young people who do not smoke now that I hope we can really succeed.

The statistics in regard to youth are not favourable, but they do represent a challenge. The national average of male cigarette smokers in the general population over 15 is approximately 50 per cent; the rate for women is about 33 per cent. Let us now look at some of the figures for youth. In the 15- to 19-year age group 35 per cent of the men and 21 per cent of the women are regular cigarette smokers, and because smoking is often hidden due to school or parental disapproval, this is a conservative figure. The majority of cigarette smokers start in their teens.

If we could cut this figure down substantially, we would be at last making significant progress.

Here, surely, we can all be unanimous in our goal. I suggest that not even the cigarette manufacturers themselves would claim they are opposed to action aimed at aiding young people to avoid the cigarette habit.

In large part, this is the reason I am here today. We have had a program running now for some years aimed at dissuading people from smoking. We have tried to focus particularly on young people. The major action of the program has been educative, convincing people to quit or not to start by pointing out the health danger involved. As the report states, we think we have had some success.

I might add that we have been aided considerably in our efforts by the major national private health organizations, who have worked closely with our officials especially on the education program. The assistance of the news media in distributing the results of our research and health findings has also been invaluable. This has been borne out by the large-scale public response my Department has received in reply to our news releases.

Still we feel that it is time to expand the program. The advertising budgets of the cigarette companies total millions of dollars, whereas our total program is limited to \$200,000 a year. In this battle, David is winning some rounds, but Goliath remains very powerful. We feel that we should shorten the odds. Obviously, we would like to do as much as we can without further straining the public purse and our Canadian taxpayers. This is why we supported the referral of the Private Members Bills before you to this Committee. This is why I, as Minister of Health, presently endorse legislative action in new areas.

Not only would it contribute materially to the reduction of smoking, we hope and trust, but it would also be a sign—a sign to the entire Canadian public, including the tobacco industry, that the parliamentary representatives of the Canadian people are disturbed about the health damage being caused by cigarettes, and want to visibly and concretely demonstrate this concern by recommending legislative action.

I wish to assure you that I am not a prohibitionist. The practice of smoking is so ingrained that, even leaving aside the massive affront to individual freedom, the outright ban of cigarettes would not be effective. Furthermore, in regard to young people, we cannot encourage a "forbidden-fruit" syndrome. As you know, despite the widespread

secondary school ban on cigarette smoking, the figures prove that the practice is widespread at that level. To make the cigarette an illicit pleasure would only enhance the desire of large sections of our youth to try it out.

● 1625

No, as far as I am concerned, cigarettes must remain on a take-them-or-leave-them basis for the Canadian public. We only wish to encourage people to leave them alone, or if they cannot, to smoke with as much protection as is humanly possible.

That is the rationale of our present education program. And that is the rationale behind any legislation I would be prepared to endorse. In that spirit, I would like to make some recommendations to you.

Let us consider the question of advertising. Now it is one thing to have a product publicly available for sale. It is quite another thing, however, to promote its use through every psychological and sociological device known to man, and to campaign on behalf of the practice through every mass media reaching the public.

Let us take an example. I may make dynamite. There are people who wish to use my product and thus I have it available for sale. Yet I know it is very dangerous, especially in the wrong hands, like those of young people. So I do not go on T.V. and radio, and take ads in all newspapers and magazines, to encourage everyone in the viewing and reading public to buy my dynamite, and moreover buy as much of it as they can.

Yet almost every minute of every day, we are urged, coaxed, and cajoled to buy a variety of different brands of a potentially dangerous product—namely cigarettes. We know that the consumption of this product contributes to cancer, heart disease, emphysema and other serious diseases. Yet to the contrary, on the ads we are told that cigarettes increase pleasure, attractiveness, sophistication, and sexual potency.

While I believe that cigarettes should be available, I do not agree that we should deliberately and enthusiastically encourage their use—especially without a counter-voice to present the other side of the picture. Advertising, however, does in fact encourage smoking and makes it appear desirable. For that reason I feel that this Committee should look at all the possible ways that cigarette

advertising can be strongly controlled. The potential for action ranges all the way from an outright ban to a ban on media within federal jurisdiction to a ban within certain specified time periods. The various recommendations that we are putting forward are contained within the report and there are other suggestions in the Private Member's Bills you have before you. I urge you to adopt a strong position on this question.

Television and radio deserve your particular attention as they are within federal jurisdiction. They are also the two most heavily utilized media, especially by young people, and unlike newspapers and magazines, the advertising they carry is almost inescapable. Certainly, I do not feel that we should offer our people a constant barrage of enticement to smoke, in view of the fact that I have yet to see a cigarette commercial which offers a statement of the health effects of their product.

I know that the tobacco industry is well-financed. They spend fortunes on advertising over these two media—amounts of money for time alone that my Department could never hope to match without expanding its current budget ten-fold and more. There are, in my opinion, far more profitable ways that this advertising money can be pumped into the economy. Take research for an example.

In addition to present efforts in the industry entire careers in science could be opened up by researchers delegating the task of producing less hazardous cigarettes. There must be hundreds of different projects that the tobacco industry might commission with their advertising money that might result in a break-through—a safer cigarette. Certainly the money would be far better spent.

To make another point on advertising, our public network does have certain standards of taste in advertising that they vigorously enforce right now. It seems rather foolish to me that ads for such items as laxatives, denture cleaners and corn removers are prohibited lest they offend some people's aesthetic values, while the ads of a product that causes disease and death are welcomed.

I wish that the time available for cigarette commercials was at our disposal. The public would then have a fair chance to hear the full story of what might happen to their lungs and arteries, not just their sex appeal, when they smoke. Then they could make their decision to buy or not to buy cigarettes in com-

plete knowledge of what they are doing to their health.

• 1630

Another vital area is labelling. In the Food and Drug Directorate of my Department, our officials keep a constant watch to see that new products for human consumption are tested and labelled as to their safe use, their proper dosage, the age-group they should serve and that they should not serve, and any side effects that they might have. Yet the cigarette product, consumed in great numbers every day, carries nothing but whatever slogan or quality claim that the producer sees as desirable and useful.

Let us go back to my dynamite example. If I sell dynamite, I am going to make fairly sure that it is sold to responsible people, that the instructions for its use are quite clear and that they are enclosed with the product, and that the potential dangers of its improper use are spelled out in an obvious fashion. Yet no such precautions are taken with cigarettes—a product with no small danger itself.

I think it only fair that everyone who inhales cigarettes smoke should be totally aware of the risks he is taking. That is why I would like to see a health warning on each and every package and carton. By a warning, I do not mean a timid statement. If we are going to get the truth across, we have to tell it like it is. Thus the warning should be strong and crystal clear. Some suggestions are contained in the report. If a person still wants to smoke, fine. That is his privilege. But at least he will know.

Of course, cigarette companies can do everyone a favour by putting on the packages some recommended methods of reducing the danger from smoking. They might also inscribe a circle on the cigarette paper—a line to show beyond which point the level of tar and nicotine shoots up radically. If everyone smoked less of the cigarette they now consume, the impact could be substantially lessened. Or the manufacturers could point out that the product is more safely used if not inhaled, since the smoke in the body is the disease creator.

Before I finish here today, I would like to suggest one further recommendation. I would like to see tar and nicotine maximums developed and enforced for all cigarettes. This means a controlled level on those harmful substances that no cigarette could exceed.

That is why a person who finds it practically impossible to stop smoking can at least smoke with a greater margin of safety than he does at present. Different tolerances could be established for the different types of cigarettes—filter, plain-end—and in that way, no matter what a person's preference, the amount of the toxic elements that he consumes could be reduced.

These levels would be of particular benefit in the case of filter cigarettes. As we all know, filter cigarettes are considered by some smokers automatically to reduce the hazards, but the tar and nicotine study that I released just a little while ago shows that many filter cigarette brands are very high in tar and nicotine levels; some higher even than some plain-end cigarettes. This tends to deceive the public.

I have gone on now for some time and I think it is time to consider the bills along with the report and its supporting evidence. Let me, therefore, sum up my case—cigarette smoking is a proven health hazard which can lead to fatal disease. It works harm to our people both individually and nationally. People who start smoking at a young age run the greatest risks of all. Therefore, as a harmful substance, cigarettes should be better controlled, especially in a legislative manner, and especially in regard to their advertising and their labelling. Everyone is free to smoke if he so chooses, but a person should have full knowledge of the true health nature of the practice.

Gentlemen, I thank you for your attention and I wish you well in your deliberations. We offer to work closely with you and study your recommendations. If you have any questions, I or one of my officials will be more than happy to answer them.

Thank you, Mr. Chairman.

[*Interpretation*]

The Chairman: Thank you, Mr. Minister, and I hope that your statement will be well understood by the entire Canadian population.

[*English*]

It is agreed that the document tabled by the Minister, "Cigarette Smoking and Health", be printed as an appendix to this day's Proceedings?

Some hon. Members: Agreed.

The Chairman: The meeting is open for discussion. Mr. Robinson?

• 1635

Mr. Robinson: Mr. Chairman, through you to the Minister, in view of the last remarks that he made concerning advertising and labelling of cigarettes and the use of cigarettes, and considering that cigarettes are such a health hazard, and also in view of the fact that he suggested there be limitations on the tar and nicotine maximums, I am wondering whether he would consider that it should be an offence to smoke a cigarette that has over the maximum amount of nicotine and tar content in the same way we are proposing, I assume, that if you drink a certain quantity of liquor you would be considered to be impaired?

Mr. Munro: No, I would not favour that type of approach. As I have indicated, I think what you might call "repressive" legislation has very little effect. If a cigarette had over the maximum tar and nicotine content that the law regarded as desirable—should that be a conclusion of your Committee and should the government adopt it—then there could be offences for the breach laid at the doorstep of the manufacturer of the particular cigarette, but to carry that further and lay charges against the individual who smokes them I do not think would be an effective way of dealing with the question.

Mr. Robinson: Is there any suggestion, Mr. Minister, that the tax on tobacco and cigarettes would be increased in order to restrict the purchasing of tobacco?

Mr. Munro: It is not one of my suggestions. Certainly from the revenue producing aspect that is more properly a question for the finance and revenue officials than those of health. I do not know that just by increasing the taxes on cigarettes to discourage their use would accomplish too much now. I would like to study—that a little further, but it seems to me that already the taxes are a very sizable proportion of the over-all cost of the product.

Mr. Robinson: Would there be any suggestion that the government might consider increasing the tax if it were a special tax on tobacco in order to fight the health hazards as a consequence of using tobacco?

Mr. Munro: I and the officials who studied the question in the Department came to the

conclusion that if this would help combat the health hazard it would certainly be worthy of consideration, but as I say I would certainly be far from convinced that that would be a valid conclusion to draw.

Mr. Robinson: You have indicated, Mr. Minister, on page 7, the total program being limited to some \$200,000 a year. In view of your statement now, are you prepared to increase this amount in order to fight this problem effectively?

Mr. Munro: Yes, I think we would have to entertain the possibility of allocating a greater priority here depending on the outcome of the deliberations of this Committee and its recommendations and what action the government takes with respect to them.

There are many variations the Committee can consider with reference to the media. They may suggest that the media give time to encourage people not to smoke and to desist from smoking equal to the time they allocate to those manufacturers who wish to advertise their cigarettes. Of course, that would be of tremendous value that would not be reflected in this \$200,000 figure. If you took into account all that was voluntarily given by various means, by the media, the newspapers, and added it to the money we otherwise spend on promotional material for schools and so on, the dollar value of the whole thing would be fairly substantial. These are matters that the Committee will want to consider.

Mr. Robinson: In view of the fact, Mr. Minister, that the United States television stations seem to be promoting a great deal of advertising indicating the effects of tobacco at the present time, is there any suggestion that the Canadian government might do likewise?

Mr. Munro: We are, to a degree. Either Dr. Watkinson or Dr. Colburn might wish to elaborate on what the Department has done in the past, what films we have and what commercials we have had on TV and what we have done in the schools. We have been involved in this area to some degree already. Do you want to enlarge on that?

• 1640

Dr. H. N. Colburn (Medical Consultant, Department of National Health and Welfare): At the moment, sir, there are five 20-second animated television clips and three other one-minute animated television clips being used

as public service announcements on television and they are being shown by network.

Mr. Robinson: Is there any suggestion, Mr. Minister, that the promoters of the smoking of tobacco be required to provide equal time in pointing out the health hazards as well as their promotional time of how pleasant and effective it is to smoke tobacco?

Mr. Munro: There are suggestions along that line as alternatives for the Committee to consider in the report that the Department has filed.

Mr. Robinson: Those are all the questions I have at the present time, Mr. Chairman.

The Chairman: Mr. Mather?

Mr. Mather: Mr. Chairman, I just have one or two brief questions. I would like to precede them by saying that I congratulate the Minister for encouraging the submission to this Committee of the subject matters of the various private members' bills, all aimed generally at the same thing, that is, regulating cigarette advertising. Second, I wish to commend him on his very thoughtful and practical statements and reports that have been tabled.

My question is, as what we may be considering in this Committee will affect not only public health and the tobacco industry but the advertising industry, would the Minister welcome or support—if the steering committee of this group so recommended—our calling, as well as health witnesses, an expert in cigarette advertising? I have in mind the man who is noted for that activity in the United States, Mr. Emerson Foote, who is Chairman of the National Interagency Council on Smoking and Health and who also is the man who resigned from one of the largest advertising businesses in the world because he was so much against the practices of cigarette advertising.

It is a long-winded question, but I am asking whether the Minister would welcome some experts from the cigarette advertising field, as well as health people, coming before the Committee to testify?

Mr. Munro: As a personal observation, yes, I would, although again I would have to reiterate that this would be a decision for the steering committee and the Committee to make.

Mr. Mather: I have one other question, sir, more or less along the line asked earlier, on cigarette advertising generally—and I have in mind newspaper advertising as well as broadcast advertising.

Do you feel that cigarette companies which induce, by advertising, the purchase of cigarettes should also carry in such advertisements an antidote in the form of a warning of some sort?

Mr. Munro: I tend to favour that type of approach—in other words, a warning in the ad as well as on the packages. It is also suggested, Mr. Mather, as an approach in the Report.

Mr. Mather: I note that that has been referred to as self-defeating advertising by the cigarette companies in the United States. It is a move which I personally am very much in favour of.

Those are all my question, Mr. Chairman.

The Chairman: Thank you, Mr. Mather, Mr. Fortin?

[*Interpretation*]

Mr. Fortin: Thank you, Mr. Chairman. First of all, I would like to congratulate the Minister and thank him for his statement which is a very good synthesis of the problem. At the same time, I would like to congratulate the Clerk of the Committee for the work she has done in furnishing French documents to the members of the Committee.

Now, Mr. Minister, with regard to publicity by cigarette manufacturers through television and radio. Do you favour increased restrictive measures concerning advertising financed by these media, or would you rather favour measures whereby sums invested for this purpose be exempt from income tax? Do I make myself clear?

[*English*]

• 1645

Mr. Munro: Yes, I have suggested, Mr. Fortin in the Report—I fully realize the Committee has not had advance notice of the Report nor an opportunity to study it—that advertising over the media be restricted. Many alternatives are listed, all of which we are asking and hoping that the Committee will consider and then let us have their views after they have heard all the witnesses. Does that answer your question?

[Interpretation]

Mr. Fortin: Yes, it does answer my question. In other words, you would be favourable to the government imposing restrictions with regard to advertising made by companies. Would these restrictions apply to the hours, or the time, or the total number of broadcasts?

[English]

Mr. Munro: There are several proposals that I would hope would be considered. I would not want to be too specific right now. However, I certainly think that the proposal that the media prohibit any cigarette advertising before, say, ten o'clock at night deserves much consideration—certainly in terms of minimizing the influence on our young people. Maybe the antidote type of approach suggested by Mr. Mather, that tobacco advertisers buy an ad in the media, should be considered. Another approach is requiring the media in one way or another to give equal time for the promotion of advertising designed to discourage smoking. I think they are all worthy of merit. We will have to decide which proposals to accept. It may be one or two, or perhaps all of them.

[Interpretation]

Mr. Fortin: Thank you.

The Chairman: Thank you, Mr. Fortin. Mr. Knowles.

[English]

Mr. Knowles (Norfolk-Halifax): Thank you, Mr. Chairman.

As you know, I am not a member of the Committee. I am here as an interested observer because the part of the country I come from is a major producer of tobacco. Also, as a farmer and producer of tobacco myself, I have some interest.

I suppose you might say that we are on the horns of a dilemma: while we produce it, we do realize the dangers which you have outlined. However, we must not go overboard and make tobacco the whipping boy for lung cancer and the other illnesses that we do not deny are caused to some extent by tobacco. We think that perhaps a great many of the arguments which are used against tobacco would apply equally as well to such things as air pollution, alcohol and even the motor car—the safe motor car is the one you do not drive or ride in.

Mr. Chairman and Mr. Minister, we are a bit concerned about all this because in our area the production of tobacco yields the highest return by far of any agricultural product grown here in Canada. Now that is certainly an anomaly. The things that we grow for food products that nourish the body sell for less than tobacco, which I do not deny has some adverse effects on health.

I have one or two questions, Mr. Chairman. I was wondering if the tobacco manufacturing companies will be invited to present their views on this whole problem. As we all know, they have made some attempts—through research, through filters and so on, to deal with this problem. I am sure these companies would be willing to co-operate as reasonably as possible with this whole problem. Would that be possible, Mr. Chairman, and if so, how would it be arranged?

The Chairman: Yes, they definitely will be called.

Mr. Knowles (Norfolk-Halifax): Is the onus on them to make the appointment or will they be invited to appear, Mr. Chairman?

The Chairman: The Subcommittee will arrange it.

Mr. Knowles (Norfolk-Halifax): Then too, there is the Ontario Flue-Cured Tobacco Grower's Marketing Board, a very sophisticated farm organization interested in the production and the marketing of tobacco. I trust that they, likewise, would be welcome here to present their views and to enlarge perhaps on what I have just briefly sketched.

There is just one other point, Mr. Chairman, and then I will be finished. As you are no doubt aware, the Department of Agriculture operates a tobacco culture research station at Delhi, and I was wondering whether or not discussions have been held with them with a view to their doing research toward developing a tobacco with a lower tar and nicotine content. I am sure varieties might be developed which might help to lessen the injurious effects.

Mr. Munro: I am advised that that is the case. I think Dr. Watkinson and Dr. Colburn might enlarge on that.

Dr. Colburn: Yes, the Department of Agriculture has been doing some research in these areas.

Mr. Knowles (Norfolk-Halifax): I know that Mr. L. Vickery at Delhi would be most happy to co-operate in this regard. I think perhaps that might be a field where we might well channel some of the activities of this Committee in connection with this particular problem.

Thank you, Mr. Chairman.

Mr. Munro: Might I just comment on one of the statements you made. I do not think the suggestion here is to make the tobacco industry the whipping boy. They are making a product which we feel is dangerous for the reasons we have stated, that is the subject we have under consideration right now, and we think something should be done about it. But that is not to say that we just isolate it as the cause of disease. Your observations about air pollution and motor vehicles is quite valid. Incidentally, we are stepping up our program on air pollution, and I do believe the auto safety aspect is receiving more attention. So I would not want you to think that government is just zeroing in on this particular problem.

• 1650

Mr. Knowles (Norfolk-Halifax): Mr. Chairman, that is not my own view. Sometimes our growers back home get this opinion, you see.

The Chairman: Thank you, Mr. Knowles.

Mr. Mather: Mr. Chairman, could I have a supplementary?

The Chairman: A supplementary, Mr. Mather?

Mr. Mather: I want to ask the Minister if he or his Department is aware that United States tests as to whether air pollution, for example, is the villain, has matter indicated that non-smokers who may dwell in very air-polluted areas such as Los Angeles have much less lung and heart troubles than cigarette-smokers who live in the same area.

Mr. Munro: I believe that is a valid observation, Mr. Mather.

Mr. Mather: I do not mean that I am not concerned with air-pollution; but I doubt that his point...

Mr. Munro: I understand.

The Chairman: A supplementary, Mr. Robinson?

Mr. Robinson: To follow up what Mr. Mather has said, I have the same concern about pollution but from a rather different point of view. To what extent do I, as a non-smoker, have any rights relative to smokers who pollute the air I have to inhale with cigarette and cigar smoke? To what extent am I getting a share of nicotine, tars, smoke and other impurities because of this? Is the Government proposing to consider this in any of its deliberations?

Mr. Munro: I rather doubt it. Your freedom is protected to the extent that you can get up and go to another room where nobody is smoking. That is about all.

Do you mean the possibility of the government prohibiting people from smoking in certain places?

Mr. Robinson: I make my suggestion from the point of view of pollution. I have read a certain amount of material on this. It seems to me that today there is more harmful pollution coming from cigarette smokers than probably from any other existing form of pollution.

We are in the position that we cannot get away from it. We must associate and socialize with people who smoke, as are some of the Members in this room at this very moment.

Mr. Munro: I agree that some people may find it very offensive to have to associate with those whom they consider to have offensive habits, but I really would not like to see the Government inject itself into this area.

• 1655

Mr. McBride: Mr. Chairman, perhaps on a more serious note, has any research been done on this? I understood that was Mr. Robinson's point.

Dr. Watkinson: Mr. Chairman, on the subject of air-pollution and its possible contribution to the diseases associated with cigarette smoking, when you look at our report, particularly if you have the opportunity during the recess of looking at the substantial scientific documentation that accompagnies the report, you will find that air-pollution is not considered a major contribution.

We have held the view from the beginning, and I think it is widely held by all public health officials, that air pollution, generally, as Mr. Mather has pointed out, does not make

a serious contribution to the effects of cigarette smoking.

If you are talking about the personal air-pollution effect, here, too, the evidence available to us today shows that in the case of the cigarette smoker it is the personal pollution element that is the important feature.

There are those who, in fact, are disturbed by the presence of cigarette smoke. They are not smokers themselves and they may already suffer from a respiratory disease and find exposure to those levels of room pollution, if you like, from cigarette smoking, or even other smoke, harmful to them and they sometimes have to leave. But I think we are getting into the area of social acceptability.

Mr. McBride: If I may interject, Mr. Chairman, I am trying to get out of that area and ask a very specific question. Am I to understand from what you say, that the tar and nicotine in smoke is not in the air in a room where many people are smoking? It is only taken into the person who is actually doing the smoking? Is that the technical point you are making?

Mr. Munro: It is second hand inhalation, really.

Dr. Watkinson: Yes; I do not think there is any doubt. . .

Mr. McBride: There is no tar and no nicotine in the air that I would breathe if Ken were smoking?

Dr. Watkinson: I am not prepared to say that. Perhaps Dr. Colburn can. . .

Dr. Colburn: There is bound to be some in the air, sir, but from any studies that I am aware of there has been nothing to show that it is harmful. . .

Mr. McBride: It is just that it is more diluted. It is like taking a weaker solution of it. It is a weaker form of poison.

The Chairman: Mr. Yewchuk.

Mr. Yewchuk: Mr. Chairman, I know there has been some work done, but do you have any comparative figures for pipe and cigar smoking as compared with cigarette smoking on nicotine and tar quantities per cigar or per pipeful? And also with regard to these various diseases that are produced by smoking?

Mr. Munro: I do not believe we have. Dr. Colburn, do you want to answer that question?

Dr. Colburn: There have been no studies carried out in Canada along the lines of the recent survey of cigarettes sold in Canada.

Mr. Yewchuk: Is there any particular reason why not?

Dr. Colburn: Well, one is technical difficulty. Secondly is the question that pipe smokers in general do not appear to have any increased over-all death rate. The cigar smokers who smoke more than five cigars per day have a slightly increased over-all death rate. But by and large the pipe and cigar smokers seem to be without any significant increased hazard.

Mr. Yewchuk: Do you mean that pipe and cigar smokers do not have an increased over-all death rate over cigarette smokers or over non-smokers?

Dr. Colburn: Over non-smokers, excuse me.

Mr. Yewchuk: I see. What about chew tobacco and snuff? Are there any figures on increase—this is no joke, I am being serious—with regard to cancer of the stomach and that sort of thing? A lot of these juices are swallowed, I presume.

Dr. Colburn: I am not aware of it from the view-point of cancer of the stomach but in people who use snuff and practise what is called "snuff dipping" there is some evidence of cancer of the mouth being formed at the site where the snuff is held in the mouth.

Mr. Yewchuk: What about these two products, chew tobacco and snuff, raising nicotine levels in blood and their effects on coronary arteries and so on?

Dr. Colburn: I am not aware of any.

Mr. Yewchuk: Are you satisfied then that there has been sufficient research in the field of pipe smoking, cigar smoking, chew tobacco and snuff, or do you think that more work should be done in this field?

• 1700

Dr. Colburn: No, of course, there would not be. We are always interested in these kinds of questions but certainly there is no evidence that we are aware of any increased risk of coronary disease among pipe and cigar smokers.

Mr. Yewchuk: Mr. Minister, this brings up an interesting point. Every week-end when I

go home and fly Air Canada there is a sign which is all lit up saying "cigarettes only". I think this is most unfair to those who smoke pipes and cigars.

An hon. Member: Hear, hear.

Mr. Yewchuk: Also, the only one allowed to smoke is the one who is the greatest health hazard. Would you take it upon yourself to recommend to Air Canada that they replace this sign by "cigars and pipes only"?

Mr. Munro: I will think about that.

Mr. Yewchuk: This is a serious problem to many people who travel.

Mr. Munro: I understand, whether it is valid or not, that one of the reasons is that the smoke from pipes and cigars, especially cigars, is so much more substantial in terms of the odor that carries through the whole plane. That is one of the reasons why it is excluded. The volume of smoke that comes from a pipe is supposed to be much more extensive too, I believe, than that from a cigarette. It pervades the whole plane and that is the reason. It is not that there is any prejudice against these two particular products as compared to cigarettes.

Mr. Yewchuk: I would think this is a debatable point...

Mr. Munro: I agree.

Mr. Yewchuk: ...because I am a non-smoker and I enjoy the smell of cigar and pipe smoke far beyond cigarette smoke. They seem to be less irritating in some ways. Have you any specific suggestions, or are we just in the very preliminary stages of ways and means of controlling advertising on TV and so on?

Mr. Munro: Yes. I could direct you just for a moment to page 16 mainly.

Mr. Yewchuk: Page 16?

Mr. Munro: Yes, and page 10.

FURTHER POSSIBILITIES FOR ACTION.

Page 11, where we discuss legislation relative to the media, we talk in terms of Alternative I, and you will see the headings there. On page 12 we get into Alternative II, and here are certain considerations there. At the

bottom of page 12 we talk about federal jurisdiction. We point up three areas and speak about banning advertising and promotion in the broadcast media. I have already expressed my views, for what they are worth, on banning of advertising entirely. We then discuss banning advertising before 10 p.m. in the broadcast media, and we talk about co-operation with the provinces to cover other types of advertising and promotion. In other words, in the area of newspapers, and so on, where we do not have federal jurisdiction.

Mr. Yewchuk: Would you consider censoring cigarette advertisements in order to make them remove those parts, for example, which suggest there is increased sexual potency, and that sort of thing?

Mr. Munro: No, I have not gone that far. I think if I were going to worry about who was going to be the censor it would involve a lot of subjective considerations. If we were to give careful consideration to proposals such as giving equal time to encouraging people not to smoke, to desist from smoking, and limit the time, and also get into this question of warnings that Mr. Mather referred to earlier in the Committee, I think this would probably be sufficient. In the report we go into this whole question of censorship and ban. If you are asking for my personal opinion this would be it. I do not think that it would be very effective.

• 1705

Mr. Yewchuk: Thank you.

The Chairman: Mrs. MacInnis.

Mrs. MacInnis (Vancouver-Kingsway): I would like to ask the Minister, from the standpoint of prevention of cigarette smoking at the very beginning, if studies have been made to determine the relative amount of smoking done by young people who come from homes where there is no smoking versus those homes where cigarette smoking goes on. Is there any information available in your material on this?

Mr. Munro: I will have to ask Dr. Colburn. If you will look at Appendix 3 of our Report you will see that we have a sort of bibliography there of research projects that have been carried out and we list them. Anyone who would like to know that can refer to them.

Dr. Watkinson: Mr. Chairman, studies have been made in addition to those studies which were supported by the Department. Very

briefly, what has been shown by these studies is that in those families where the parents or one parent smokes invariably the children smoke, as compared with those children whose parents do not smoke. That is where you get experimentation and a greater proportion of them smoke. We feel that the example the parents set plays a very important role in whether this habit is adopted by the children. We believe this to be true.

Mrs. MacInnis (Vancouver-Kingsway): I am very interested to hear this because the Minister said at the beginning that one of his reasons for refraining from smoking was that he wanted to set an example. I have been wondering about two things in this connection. First of all, if we are going to make a thorough study, would it not be a good idea to have before this Committee not only the manufacturers and advertisers and other people directly concerned with the tobacco industry, but representatives of parents organizations, teachers, social workers and public health people who would be able to give us some information on what they have found out about families that do not smoke versus those families that do. These are the people who have to deal with the casualties and they would know something about the matter of smoking among young people. I noticed some very provocative figures in your brief. It certainly seems that the rate that young girls now smoke as compared to young boys is increasing when you consider the rate of adult women smokers to adult men smokers. If possible, Mr. Chairman, I would like to have before this Committee some of the citizens organizations that have to deal with young people so that we can question them as to the background and results with a view to preventing cigarette smoking. Is there a possibility we could do this?

Mr. Munro: Mr. Chairman, I think Dr. Watkinson could answer that.

Dr. Watkinson: I think it would be of interest to the members of the Committee if I were to mention that from the very beginning five years ago when the program started to get underway almost initially our advisory committee to the Minister in the Department provided for representation by the educational groups through the Canadian Education Association, the voluntary agencies and the parent-teachers groups, and I can certainly say that at all stages they have given the strongest support to the program, and partly

because of the views that they could express in the way that you, madam, are suggesting they can be of assistance. This is exactly the kind of assistance they have given the Department. We have tried to be guided in our educational activities by the studies of psychologists in the universities and teachers in the high schools and public schools.

Mrs. MacInnis (Vancouver-Kingsway): May I ask either the Minister or the Chairman if this might not be a useful selection of people to have before our Committee?

The Chairman: I agree.

Mrs. MacInnis (Vancouver-Kingsway): I have another question. The Minister has proposed various measures to deal with cigarette smoking. I am anxious to find out if the Minister or any of the doctors with him either has any information themselves or could make available to us information about any countries that have tried these methods? We have heard about the United States. Are there other Western European countries such as Great Britain, for example, that have tried any of these methods, and if so with what results?

• 1710

Mr. Munro: I believe, Mrs. MacInnis, that we do have some considerable material on the experience in other countries and what proposals they have adopted. Perhaps you could particularize on that, Dr. Colburn, in terms of its availability to the Committee.

Dr. Colburn: We hope to have a report available on this for the Committee in the new year, sir, if this is in order.

Mrs. MacInnis (Vancouver-Kingsway): In the near future?

Dr. Colburn: Yes.

Mrs. MacInnis (Vancouver-Kingsway): Good. I just have one other question. I know all countries are suffering from this phenomenon of increased smoking and its dangers, but is there a record of any country which you know about where cigarette smoking has been cut down at all?

Dr. Colburn: Yes. In Canada in the past few years we have had a drop among men with an almost corresponding increase among women which balances population ratio. I have recent information from Italy—and in Italy cigarette advertising was eliminated in 1962—in a letter from External Affairs that

cigarette smoking there has dropped about 30 per cent. I do not have any more details than that.

Mrs. MacInnis (Vancouver-Kingsway): This would be good. You say, cigarette advertising eliminated. Would that be television, radio, newspapers or a combination of what?

Dr. Colburn: This was everything in Italy. There is no cigarette advertising allowed, indeed in the press or on television or radio.

Mrs. MacInnis (Vancouver-Kingsway): I certainly wish we could get more information on that because the elimination of cigarette advertising, with all respect to Mr. Knowles over here, might be worthwhile considering as a health measure. I want to ask one more thing. Again thinking of Mr. Knowles' problem, has any research ever been made into any alternative possible use for tobacco besides smoking, or would it involve real damage to the crop?

Mr. Munro: I am not aware of any research into what other use tobacco could be put, Mrs. MacInnis. The cigarette companies might have some idea or the Department of Agriculture, but I am not aware of any and I do not think my officials are, either.

Mrs. MacInnis (Vancouver-Kingsway): Thank you.

Mr. Knowles (Norfolk-Halifax): A factory of nicotine—poisons and insecticides, I guess. There is a very minute use for it.

Mr. Mather: I have a supplementary on this point, Mr. Chairman. In connection with other uses of tobacco I do not know of any, but I do know that tobacco companies are diversifying their investments and taking some out of the manufacture of cigarettes, for example, and putting their money more into such things as distilleries. This is along the same line of thought and I think it illustrates, perhaps, a trend of thinking on the part of the industry.

The Chairman: I have some other names on my list of questioners. Would you like to ask another question?

Mr. Knowles (Norfolk-Halifax): No. I just wanted to make this comment so that I will not be branded, and all the other tobacco growers in our part of the country, as the bad guys in this drama. If we did not produce one

more pound of tobacco the number of cigarettes consumed would not be affected one iota. We would simply import it from another country and I think we deserve some credit for having enough initiative to develop a product that adds to the economy of this country as farmers. That is all, thank you, Mr. Chairman.

[Interpretation]

The Chairman: Mr. Yanakis.

• 1715

Mr. Yanakis: Thank you, Mr. Chairman. I should like to congratulate the Minister for having had the courage to consider the various bills we have introduced over the past three sessions. I am very interested in this, and that is why I asked the Chairman to include me in this Committee. In my own family, one person has already died from lung cancer and that person was a very heavy smoker.

About a month ago, a woman in my riding who smoked two packs a day died and this was due also to lung cancer and to the fact that she smoked two packs a day. She was mother of several children.

Now, Mr. Chairman, could we use the results of studies already made in Great Britain, United States and Canada and from what has been proved in these studies, could we not take immediate measures in order to catch up with other countries who have already embarked on measures to curtail cigarette advertising and to advise young people as to the dangers of smoking?

[English]

Mr. Munro: When you say: "Can we take immediate action," I do not know just how to be most helpful there, Mr. Chairman. Let us put it this way: We already—meaning in this session, of course—have a considerable backlog of legislation to be passed, some of which is ranked as high priority. My only feeling, Mr. Chairman, is that the Committee might consider the subject matter of the bill before it over this recess and operate fairly quickly.

It is not within my jurisdiction to talk about committee procedure, but I am informed that during this recess all the various interested organizations are going to be told about the Committee and asked whether they want to submit briefs and appear, and so on, and that when we come back in Janu-

ary the Committee will be in a position to get into the subject matter. If they had their report out by, say, within two or three months of that, then in the next session of this Parliament the government could act on that and bring forward legislation after taking into account the Committee's recommendations. That is more or less the timetable I see ahead of us.

Your question is: Could it be done sooner? I doubt that it could be done sooner, whether this Committee was deliberating on the subject matter or not, in terms of the legislative backlog we already have to deal with in this particular session. I would hope that some legislative action could be taken next year—I am talking about the year 1969.

[Interpretation]

Mr. Yanakis: Mr. Chairman, recent statistics from the National Health and Welfare department indicate that the young people, the young children between 12 and 15, a great number of these children start smoking every day. Could we not step up advertising in schools in order to advise these young children of the very serious dangers and try to prevent these young people from forming the habit?

[English]

Mr. Munro: As I have indicated already, a good portion of our budget, limited as it is, is oriented towards the young people and dealing with the educators. Within the money allotted the Department is really doing the best it can. The only way the program could be stepped up is if greater resources were allocated to the job. Do you have anything further to add to that?

Dr. E. A. Watkinson (Director General of Health Services, Department of National Health and Welfare): The additional factor of course, Mr. Chairman, is that in schools it is basics we must, of course, work with the departments of education. We find too, working closely with the provincial health authorities, that the availability of resources to produce the appropriate material is a problem and, of course, this requires appropriate studies so that it will assist us in knowing how best to develop the proper health education program directed to children of various age groups.

We should always remember that the educational people must have a large input into this, and we take for granted that they must be fully a partner in this operation. So the Department is dependent upon both their ability to make use of the material and their willingness to work it into the curriculum, because it does take additional time.

[Interpretation]

Mr. Yanakis: I could perhaps suggest to the honourable minister to ask his colleague in charge of rural development, to give him some of the funds which are available for development of some industries because recently, important grants were made to a tobacco processor in my riding to expand his business. These amounted to some hundreds of thousands of dollars.

The Chairman: Thank you Mr. Yanakis, Mr. Robinson.

[English]

Mr. Robinson: Mr. Chairman...

Mr. Chairman: Is it a short or long question?

Mr. Robinson: I was wondering whether the Minister will be back on a subsequent occasion to be asked further questions.

The Chairman: I beg your pardon?

• 1720

Mr. Robinson: Will the Minister be back on future occasions to answer questions.

Mr. Munro: I am at the disposal of the Chairman and the Committee.

Mr. Robinson: I had assumed that we would be asking the Minister questions today and then on another occasion we would be able to ask questions of many of the gentlemen who are here today. I have many questions that I have not asked yet but I may have an opportunity to do so at a later date.

However, there is one area about which I am concerned. This has to do with an item that appeared in the *Toronto Telegram* of Friday, November 8, 1968. It is entitled *Smoking Withdrawal Centre Looking for a Helping Hand*, and it starts off:

Toronto's Smoking Withdrawal Study Centre with the dual purpose of getting smokers to quit and gathering more grim statistics about cigarettes and health, is seeking more volunteers.

The study centre was set up two years ago as the pilot project of the Toronto Department of Public Health and the University of Toronto's Faculty of Medicine.

Quite a number of people have already proceeded through this centre. I do not know whether the Minister is a member or not. Perhaps he should consider this, unless he has found that his withdrawal symptoms have now abated.

I understand in the first year that about 175 volunteers were involved and about one-third of them have been able to kick the habit. Apparently, even if you were not able to lose the habit of smoking a pack or two a day, it indicated that the study had benefits. If you cannot cut back, at least you receive information on cardiovascular, respiratory and cellular matters and tests of this nature, and that hopefully this can be passed on to others. I wonder if the federal government is considering assisting in this kind of program in the City of Toronto or elsewhere where this kind of withdrawal centre is to be provided?

Mr. Munro: I am advised that we are already participating in the particular project you are talking about. Yes, I think it is worthy of consideration. Dr. Watkinson or Dr. Colburn, do you wish to add anything to this?

Dr. Watkinson: Only to add that from the beginning the Department has been a full partner in this and financially we have contributed substantially. In fact, we are now awaiting the report. We are following it very closely with the members of the Toronto study group.

Mr. Robinson: Will we also get a report to the effect that the personality tests which were taken by the various people who were involved in this program were such that it will indicate the people who will be able to lose the habit and those who will not?

Dr. Colburn: There has been some indication that this can be predicted, sir, I believe we can get an interim report for the Committee early in the new year, if this would be of value. We were using this as a pilot project to

find out how to operate such things and whether it was worthwhile doing so.

Mr. Robinson: Mr. Chairman, I wonder if it would be in order to ask the people who are running this withdrawal clinic if they could appear as witnesses at some time before this Committee?

The Chairman: We could pass the suggestion on to the steering committee. You are one of the members of the steering committee, are you not?

Mr. Robinson: Yes, indeed. Thank you very much, Mr. Chairman.

Mrs. MacInnis (Vancouver-Kingsway): Mr. Chairman, may I ask a supplementary? I am interested in the idea of trying to prevent the thing before it gets started, or in the very early stages. I know that children in schools are susceptible—as are grownups—to the matter of awards and rewards. We have just celebrated Canada's centennial year and medals of merit have been awarded for all kinds of things. Mr. Minister, in the case of young people or, if you like, even those people who go through this clinic and successfully get rid of the smoking habit, would you consider establishing a system of awards, or something of this kind? It would give people some incentive by way of public notice that after a decent interval of time has been allotted they have been able to get rid of this habit. If it is worthwhile getting rid of for young people it is worthwhile recognizing. I wonder if this is not something which would give an incentive to young people?

● 1725

Mr. Munro: I have not considered that idea before. Will you leave it with us and let us think about it?

Mrs. MacInnis (Vancouver-Kingsway): Yes. I just thought it was something to think about.

Mr. Yewchuk: May I ask a supplementary? I wonder if this might encourage young people to start so when they stop they can get a medal?

Mr. Knowles (Norfolk-Halifax): Mr. Chairman, reports were recently released showing the different nicotine and tar levels in various brands of cigarettes. Will these reports be issued again, and with what frequency?

Mr. Munro: I indicated, Mr. Chairman, when I released the last report that we were anticipating doing it every six months. However, I would like to study the feasibility of doing it more frequently. At the moment our commitment is roughly every six months.

Mr. Knowles (Norfolk-Haldimand): Thank you.

[*Interpretation*]

The Chairman: Mr. Minister, it has been a great pleasure to have you here with us today. Thank you very much. We hope you will be able to come again...I also thank all the officials of your Department who have

answered questions, and I am sure that they will have an opportunity to come back.

[*English*]

On behalf of all the members of the Committee I wish you, Mr. Minister, and all the officials of your Department a Merry Christmas and a Happy New Year.

I also wish a Merry Christmas and a Happy New Year to all the members of the Committee and the Clerk of the Committee.

Have a good rest and do not smoke too much during the holidays!

The meeting is adjourned to the call of the Chair.

APPENDIX B

Department of National Health and Welfare

19 December 1968

CIGARETTE SMOKING AND HEALTH

Prepared for The Health, Welfare and Social Affairs Committee House of Commons

I CIGARETTE SMOKING AS A
HEALTH PROBLEM*Consequences of Exposure to Cigarette
Smoke*

Exposure to cigarette smoke through regular use of this product causes an increased risk of premature* death which is brought about mainly by three conditions:

(1) Diseases of the heart and circulation, especially *coronary heart disease* which is the leading cause of death in Canada. Various factors increase the risk of a heart attack. Cigarette smoking adds to other risks as well as having an independent effect especially in young and middle-aged persons. A portion of the many deaths from heart attack are attributable to cigarette smoking;

(2) *Lung cancer* which is the leading cause of death from cancer in Canada for men and for both sexes combined. Most lung cancer deaths are attributable to cigarette smoking;

(3) *The lung diseases, chronic bronchitis and emphysema*, which are also major causes of long-term disability and suffering. A large portion of the deaths from these related diseases is attributable to cigarette smoking.

The risk of premature death increases in proportion to the daily cigarette consumption, the number of years of smoking, and degree of inhalation of the smoke. It is relatively greater among the young and middle-aged although it increases in absolute terms with increasing age. The risk is also greater for those who start smoking in childhood than for those who start smoking in later life. The risk decreases when cigarette smoking is discontinued.

* The death rates for cigarette smokers are higher than for non-smokers. This means that cigarette smokers tend to die at earlier ages than comparable non-smokers.

The Risks

The danger of fatal heart attack among middle-aged men and women who are cigarette smokers is two to three times that of non-smoking men and women of the same age.

Average male cigarette smokers have a risk for lung cancer ten times that of non-smokers. This increases to at least twenty times for heavy smokers.

Male cigarette smokers have a death rate for chronic bronchitis and emphysema which is six times that of non-smokers.

Most deaths attributable to cigarette smoking occur among men. Fewer women smoke, they smoke less and have been smoking for fewer years than men. However, smoking diseases are increasing among women. In addition to the hazards assumed by men, women who smoke during pregnancy are more likely to have premature babies.

Twenty-four per cent of male cancer deaths and five per cent of female cancer deaths were due to lung cancer in 1967. Lung cancer caused the deaths of 3,700 men and 618 women in 1967, a total of 4,318. The lung cancer death rate per 100,000 persons increased $2\frac{1}{2}$ times for men and doubled for women between 1950 and 1967.

Emphysema with and without chronic bronchitis caused the deaths of 1,484 men and 209 women in 1967, a total of 1,693. The death rate per 100,000 persons for emphysema with and without chronic bronchitis increased seven times for men and five times for women between 1950 and 1967.

Detailed tables for the above diseases are given in APPENDIX ONE.

Effects on the Quality of Life

Cigarette smokers have higher rates of disability than non-smokers. Decreased breathing efficiency, increased cough and phlegm production and an increased rate of

illness and absenteeism are found even among young smokers. Shortness of breath due to progressive lung damage eventually makes respiratory cripples of many persons.

Air Pollution

Cigarette smoking is much more important than air pollution in the causation of lung cancer and chronic respiratory disease. In addition, it is the cigarette smoker who appears to be especially susceptible to any additional risks for lung cancer or chronic respiratory disease arising from exposure to air pollution.

Pipe and Cigar Smoking

Pipe smokers have an increased risk of lip cancer and men who smoke five or more cigars daily have a slightly increased total death rate. However, total death rates for those who smoke only pipes or for those who smoke only cigars and smoke less than five cigars daily are about the same as that of non-smokers. The small risks of pipe smoking appear to be mainly due to the fact that pipe smokers are less likely than cigarette smokers to inhale the smoke into their lungs. Differences in the smoke may also be a factor.

Cigarette Smoke

Cigarette smoke is a complex mixture of chemicals including nicotine; carbon monoxide and other gases; irritants; and several substances that can cause cancer or contribute to cancer production. Several hundred compounds have been identified in cigarette smoke. Some of the constituents of cigarette smoke remain in the body after inhalation. Some like nicotine and carbon monoxide, pass from the lungs into the bloodstream. Smoke has two fractions—tar and gases—but they are not clearly separated. The cancer-causing and cancer-promoting chemicals along with some of the irritants and the nicotine are found in the tar fraction which consists of all the particulate matter in the smoke. Other irritants and toxic substances like carbon monoxide are found in the gas fraction of the smoke.

Mechanisms of Disease Production

Most cigarette smokers report that they inhale the smoke into their lungs. In such inhalation the normal air cleansing action of the nose is bypassed. Cigarette smoke can damage the cleaning system in the bronchial tubes so that it cannot as readily get rid of

the particles in the smoke. On the average cigarette smokers have decreased lung function and an increased rate of cough and phlegm production. Changes in the lining cells of the lungs are much more common among cigarette smokers than others. Some of these changes are considered to be precancerous. When smoking is discontinued the body begins to repair itself.

Nicotine makes the heart work harder and decreases the blood flow in small arteries. The latter effect is particularly important when circulation in the legs is already poor. The mechanisms whereby cigarette smoking increases the risk of heart attack are not fully clarified. However, evidence is accumulating that the risk arises from the adverse effects of cigarette smoking on the balance between the heart's demand for, and supply of, oxygen and other nutrients.

Cigarette Dependence

Many cigarette smokers develop a continuing need for smoking and for this reason are considered to be dependent. The strength of cigarette dependence is demonstrated by its persistence in the face of knowledge and even experience of the harmful effects of smoking. The dependence can be classified in two categories. In one category, psycho-social factors appear to predominate, stopping smoking is relatively easy and withdrawal symptoms are slight or absent. In the other category, the dependence is harder to break and symptoms may be severe. In the latter group the dependence may have a pharmacological element. Nicotine is generally accepted as the major factor in this type of dependence.

Health authorities now recognize that cigarette smoking is one of the leading, if not the leading, cause of preventable disease in countries like Canada, today. Because of its many ramifications, it is also one of the most complex health problems we face.

II THE CANADIAN SMOKING AND HEALTH PROGRAM

Introduction—Origin and Purpose

The Department of National Health and Welfare, in cooperation with the Department of Veterans Affairs and the Canadian Pension Commission carried out the Canadian Study of Smoking and Health among pensioners between 1956 and 1962. This is one of the major world studies of this kind and was one

of the seven studies for which data were pooled for the United States Surgeon-General's report which was released in 1964.

In 1963 the Government of Canada acknowledged the hazards of smoking and in November of that year the Department of National Health and Welfare sponsored a National Conference to explore the matter. The meeting was attended by representatives of federal and provincial governments, voluntary and professional health associations and the tobacco industry and growers. This first Canadian Conference on Smoking and Health resulted in the development of a nation-wide program to include:

- (a) A program of health education;
- (b) A program of epidemiological and motivational research to assist the educational program.

The leadership role of the Department of National Health and Welfare was seen as:

- (a) Assisting in the coordination of activities of the various governmental and non-governmental agencies.
- (b) Producing basic educational materials for use across the country.
- (c) Promoting research into the extent and nature of the smoking habit in Canada and the motivational aspects of smoking.

The basic objective of the Canadian Smoking and Health Program was and continues to be:

"To reduce the incidence of lung cancer and other diseases attributable to cigarette smoking, by the reduction or elimination of this health hazard."

Health Education was expected to be a major means of achieving this aim. The specific objectives of the health education programs are:

- (1) To inform the public about the risks to health connected with cigarette smoking.
- (2) To encourage smokers to discontinue the habit.
- (3) To dissuade non-smokers from acquiring the habit.

At the outset of the program, it was decided that the audiences to whom health education programs were to be directed, in order of priority, were:

- (1) Health workers, including physicians, nurses and others.

- (2) Teachers and personnel in teacher training institutions.

- (3) Pre-teen and teen-age school children

- (4) Parent organizations, voluntary, professional and civic groups.

- (5) General public (young adults—smokers and non-smokers).

Examples of health education project completed or underway are given in APPENDIX TWO.

Research

One of the Department's roles in the nationwide smoking and health program is the promotion of research into the extent and nature of the smoking habit in Canada, into the motivational aspects of smoking and into health education. It was hoped that such research might contribute to more effective health education efforts. Lists of research projects completed and underway are given in APPENDIX THREE.

Cooperation with Provincial and Other Agencies

In addition to educational and research programs supported by the Department of National Health and Welfare, a variety of activities are sponsored by other Canadian organizations such as provincial departments of health and education, voluntary health agencies, youth and adult organizations, professional associations, churches and private individuals. These activities include the production and distribution of health education materials, and the financial support or conduct of research into the health hazards of cigarette smoking and various other aspects of the habit. Coordination and cooperation have been achieved through direct liaison and by Advisory Committees on Health Education and on Research which have included in addition to representatives of provincial departments of health experts in various relevant discipline—preventive medicine, epidemiology, chest surgery, sociology, psychology, and education and representatives of organizations such as the Canadian Cancer Society, Canadian Heart Foundation, Canadian Tuberculosis and Respiratory Disease Association and the Canadian Medical Association. A Coordinating Committee of key organizations was formed in 1968 to carry out cooperative programs where appropriate. This Committee is composed of the Canadian Cancer Society, the Canadian Heart Founda-

tion, the Canadian Tuberculosis and Respiratory Disease Association, the Canadian Medical Association and the Department of National Health and Welfare.

The news media have played a major role by preparing stories and reporting news releases from Canada and other countries. They have been the most consistent source of information for most Canadians about the dangers of smoking.

Evaluation of the Effects of the Program

The total smoking and health program, domestic and international, should ultimately result in reduced death, sickness and disability rates but these can only be expected after a long period. More immediate criteria would be an increased public awareness of the dangers of smoking and a decrease in the proportion of persons smoking or starting smoking. There are indications of success although we would hesitate to attribute them only to the smoking and health activities of this Department.

Our first objective was to inform Canadians convincingly about the health hazards of cigarette smoking.

A Department survey in December, 1964, showed that 90 per cent of Canadians 15 and over had heard or read of the health hazards of cigarette smoking and 60 per cent of Canadians believed that cigarette smoking is a health hazard.

A Department survey in December, 1965, revealed that large numbers of persons 15 years of age and over had been able to stop smoking and large numbers wanted to stop. Among present non-smokers of cigarettes, 32 per cent of the men and 9 per cent of the women at one time were regular users. Forty-five per cent of regular cigarette smokers had seriously tried to stop smoking.

A study by the Canadian Cancer Society in 1967 showed that the proportion of cigarette smokers among Canadian men had decreased about 6% since 1961. Surveys conducted for the Department of National Health and Welfare by the Dominion Bureau of Statistics have confirmed the downward trend among men. The proportion of regular cigarette smokers among men 15 and over decreased from 55% in September, 1965, to 52% in October, 1968. However, the proportion of cigarette smokers among boys 15 to 19 has remained steady suggesting that the decrease

in male smokers has been due to the discontinuance of smoking among adults.

Unfortunately, this downward trend among men has coincided with an increasing proportion of smokers among women. Regular smokers among women 15 and over increased from 31% in September, 1965, to 33% in October, 1968. Smoking among girls 15 to 19 has increased at the same time.

These findings are supported by preliminary data from a recent survey in a large Canadian city which indicate that smoking is increasing among girls while remaining relatively unchanged among boys.

Per capita cigarette sales decreased slightly in 1967 compared to 1966. Total sales as well as per capita sales were down in the first ten months of 1968 compared to the same period in 1967. Sales of cigarettes reflect two factors—numbers of smokers and average amounts smoked by each. Cigarette sales are not a complete measure of cigarette use since they do not include roll-your-own tobaccos. Increased costs of cigarettes could cause switches to roll-your-own cigarettes which are not easily measured. Therefore, actual studies of population smoking habits are the most important criteria of changed smoking practices.

One of the best practical indicators of the widespread concern about the problem, although it is not a numerical criterion, is the response to Departmental news releases. For example, the recent report of tar and nicotine levels of the smoke of cigarettes sold in Canada received wide approval by the press and public.

Changes in smoking practices may not be reflected in general mortality statistics for some years. For one thing, the heavier smokers, who are at greatest risk from smoking diseases, have more difficulty stopping and are liable to remain in the smoking population despite widespread cessation.

For many smokers, their dependence removes the element of choice regarding whether they smoke and how much they smoke. Therefore, it is the Department's objective to discourage cigarette smoking entirely, particularly among those who still have a choice—young people who have not yet become dependent and committed to cigarettes as a part of their lives. An additional objective is to reduce the inhalation into the lungs of cigarette smoke constituents by smokers who cannot or do not stop smoking

It is particularly urgent to reduce the hazards for those who already have a smoking disease, for whom stopping smoking is imperative but who cannot do so. Less hazardous ways to smoke and substitutes for smoking are especially important to these persons.

III FURTHER POSSIBILITIES FOR ACTION

It is clear that to accelerate progress towards the elimination of the health hazards of cigarette smoking and to ensure success in achieving this goal both intensification of present efforts and use of additional methods will be required.

The Canadian Smoking and Health program has been based so far on cooperation and voluntary action in part because experience in public health has demonstrated the general desirability of such approaches over compulsory restrictive measures involving legislation and regulation. However, it appears that certain actions now considered desirable can only be achieved by legislation.

The evidence of the dangers of cigarette smoking is now overwhelming and the magnitude of the health problem very large and increasing. Every effort to reduce the prevalence, amount and dangers of cigarette smoking could, therefore, now be justified.

Experience with the prohibition of alcohol suggests that banning the sale of cigarettes would be unwise. Illegal trafficking could be anticipated and all hope of making cigarettes less hazardous would be lost. The use of the cigarette has become widely accepted in our culture and public opinion could not be expected to tolerate a ban. Also, law-respecting smokers who cannot stop smoking would be placed in a difficult position about the source of their cigarettes.

If society's objective becomes that of doing everything possible,—short of an outright ban on the sale and use of cigarettes—to reduce the prevalence, amount and dangers of cigarette smoking, two consequences become unavoidable:

(1) *Any effort to promote the use of cigarettes would be inconsistent with this objective.*

(2) *Continued sale of the product could only be consistent with this objective if accompanied by an adequate warning of the risks for potential users; a list of contents; and instructions regarding less hazardous use.*

All other actions to control the hazards of cigarette smoking could then be based on the two steps listed above. These steps would confirm the serious nature of the problem and provide the incentive and basis for logical and consistent programs to deal with the problem by all segments of society.

The Department of National Health and Welfare therefore recommends that the Committee explore the feasibility of further action in the following categories:

- (1) Legislation;
- (2) Voluntary action by cigarette manufacturers;
- (3) Increased social action apart from legislation.

1. LEGISLATION

A. Cigarette Advertising and Promotional Activities

Alternative I

I A Complete Ban on All Cigarette Advertising and Promotional Efforts

All advertising, free distribution of cigarettes, coupon and premium schemes and other activities that might be construed to be advertising or promotion would be eliminated. The only type of display permitted would be the demonstration of actual cigarette packages or cartons at the point of sale.

and

II A Ban on Cigarette Smoking in Advertising for All Products Other Than Cigarettes

This would prevent the act of smoking being demonstrated to children and promoted as a desirable practice for itself or because of its association with the good life, pleasure, youth, sex appeal, etc. With such a restriction advertising for other products could not contribute to building up the market of new smokers, or encourage current smokers to continue smoking or ex-smokers to resume smoking.

Alternative II

If a complete ban on cigarette advertising or promotion is not feasible the following combination is suggested:

I The Elimination of The Act of Cigarette Smoking From All Cigarette Advertisements and Advertisements for Other Products

and

II The Elimination of All Advertisements That Could Be Construed As Suggesting That People Smoke More or Take More Puffs On A Cigarette

It is inherent in such advertisements that they encourage smokers to increase their exposure to cigarette smoke.

and

III The Elimination of All Coupon and Premium Schemes and the Free Distribution of Cigarettes

It is inherent in such promotional efforts that they encourage smokers to increase their exposure to cigarette smoke.

Questions of federal and provincial jurisdictions enter into the matter of controls of cigarette advertising. Therefore, if the proposals above are not feasible in Federal law, the Committee might consider the feasibility of:

Banning advertising and promotion in the broadcast media which come under Federal jurisdiction;

Banning advertising before 10 p.m. in broadcast media;

Cooperation with provinces to cover other types of advertising and promotion which come under their jurisdiction.

Partial bans are not recommended because of the likelihood that permissible promotional activities would be enhanced. In Britain, the elimination of cigarette advertising on television was followed by increases in overall promotional budgets and in coupon gift schemes.

B. Cigarettes and Cigarette Packages and Cartons

i A Statement on All Cigarette Packages and Cartons That Would Warn Potential and Current Smokers of the Dangers and Indicate to Smokers A less Hazardous Way to Use the Product

A suggested statement is:

"Warning: The smoke of these cigarettes contains cancer-producing chemicals, irritants, nicotine, carbon monoxide, and other toxic substances and should not be inhaled into the lungs."

If a particular cigarette did not contain one of the substances listed in the statement this substance could be deleted from the warning.

The above warning would provide information respecting smoke constituents and about a less hazardous way to use the product. It could be verified in relation to the particular product. It clearly conveys the message that cigarette smoking is dangerous and brings a sense of immediate exposure to the hazard which other general health warnings do not do. It is considered to be more educational than other messages for potential as well as current smokers. Other health warnings that have been suggested generally deal with remote health hazards and it is believed that they are more likely to be ignored than the common-sense statement above.

Consideration might also be given to requiring the warning in all cigarette advertising that might remain after legislative action.

Samples of other cautionary statements that have been suggested are:

Danger: Cigarette Smoking Can Cause Disease and Death.

Danger: Cigarette Smoking Can Cause Dependency, Damage Health and Shorten Life.

Warning: Cigarette Smoking is Dangerous to Health and May Cause Death Especially from Coronary Heart Disease, Cancer and Chronic Bronchitis.

Warning: The Use of Tobacco May Be Hazardous to Your Health.

The United States Federal Cigarette Labeling and Advertising Act, which became effective on January 1, 1966, requires that each package of cigarettes manufactured, imported or packaged for sale or distribution within the United States bear the following statement:

"Caution: Cigarette Smoking May Be Hazardous to Your Health".

The Federal Trade Commission as a result of public surveys and a review of the situation has concluded that a more strongly worded statement is required and recommended that the present warning be changed to read:

"Warning: Cigarette Smoking is Dangerous to Health and May Cause Death From Cancer and Other Diseases".

The Commission also recommended that the warning statement should be required to appear in all advertisements as well as on all cigarette packages.

and

ii a) *Maximum Levels of Tar and Nicotine Contents Be Established For All Cigarettes, Plain-end and Filter*

It is desirable to reduce exposure to cigarette smoke constituents as much as possible.

Tar and nicotine levels of cigarettes can be varied by such things as type of tobacco, curing, processing and the addition of filters.

The recent study of tar and nicotine levels of cigarettes sold in Canada showed wide variations between brands.

Lowering tar and nicotine levels of cigarettes smoked by Canadians would help to reduce exposure to cigarette smoke constituents. Tar and nicotine includes all the particulate matter in the smoke.

It is therefore suggested that the Committee explore whether it would be acceptable to establish maximum standards for tar and nicotine levels of cigarettes sold in Canada. Such a step might be especially acceptable to younger smokers. Moderate initial maximums and progressive decreases thereafter as growers and manufacturers adapted to the change could result in substantial reductions in exposure over the long term.

Maximums of about 22 milligrams of tar and 1.5 milligrams of nicotine for plain-end cigarettes and about 16 milligrams of tar and 1 milligram of nicotine for filter cigarettes might be acceptable for a start. It is thought desirable to provide special limits for filter cigarettes as described in b). It is obvious that tar and nicotine levels of filter cigarettes can be reduced to lower levels than those of plain-end cigarettes. These maximums would eliminate present high levels exceeding 30 milligrams of tar or 2.0 milligrams of nicotine for some brands.

or

b) *Maximum Levels of Tar and Nicotine Contents Be Established For All Filter Cigarettes*

Filter cigarettes now constitute about three-fourths of cigarettes sold in Canada. Smokers have no guarantee that filter cigarettes are lower in tar and nicotine levels than non-filter cigarettes. Some filter cigarettes have tar and nicotine levels substantially higher than some plain cigarettes. In some cases, increased length accounts for higher levels of tar and nicotine in filter cigarettes. The result is the same, however. Smoking the cigarette

to the usual butt length exposes the smoker to more tar and nicotine.

Because some persons assume that tar and nicotine levels are lower with filter cigarettes it is felt that smokers should have the automatic protection of knowing that, if they smoke any filter cigarette, they will not be exposing themselves to tar and nicotine levels above certain maximums. Suggested maximums are given in a).

Maximum levels of tar and nicotine for filter cigarettes would assist smokers of over 70% of cigarettes sold in Canada. If present trends continue this proportion would increase. The objective is to help smokers to reduce total exposure to tar, nicotine and other cigarette smoke constituents—per cigarette, per day, per year, and per lifetime.

and

iii *A Requirement That All Cigarette Sales Outlets Adequately Display A Current List of Tar and Nicotine Levels of the Smoke of Cigarettes Sold in Canada Along With Information About Ways That Smokers Can Reduce Their Exposures To Tar, Nicotine and Other Cigarette Smoke Constituents*

This action would consistently provide consumers with information at the point of sale. The periodic issuance of reports by the Department of National Health and Welfare would be of limited value unless smokers were able to readily compare brands at the point of sale. The posting of this information could be expected to gradually reduce total exposure to cigarette smoke constituents by stimulating the choice of low tar, low nicotine cigarettes and the adoption of less hazardous ways to smoke. Any legislation for this purpose should be broad enough to permit the listing of other constituents if this becomes desirable and feasible.

2. VOLUNTARY ACTION BY CIGARETTE MANUFACTURERS

A. Research

It is suggested that the Committee explore with cigarette manufacturers the possibility of carrying out various kinds of research designed to protect consumers. Special consideration is required for those persons who have diseases attributable to or aggravated by cigarette smoking and who cannot stop smoking. These persons might be helped by substitutes for smoking and ways to smoke that

reduce exposure to smoke constituents. Other possibilities for research are:

Ways that cigarette smokers might avoid inhalation, for example smoke that is less easy to inhale deeply into the lungs. This could provide an alternative for women who, in our society, cannot readily switch to relatively non-inhalable pipes or cigars to reduce the hazards of smoking;

Ways that cigarette smoke might be made less toxic, irritating or cancer-producing.

B. Information for Consumers

Manufacturers might consider:

Placing a coloured line on all cigarettes to indicate the point at which consumers had been exposed to 10 milligrams of tar. This would preserve the choice for smokers who may wish a more strongly flavoured cigarette but do not wish to expose themselves to more total tar and nicotine than the smoker using mild cigarettes. Some smokers may be satisfied with fewer puffs of a stronger smoke and discard their cigarette when it had burned to the line.

Tobacco itself serves as a filter collecting tar and nicotine from the smoke drawn through it. As a result the last third of a cigarette yields about half of the total tar and nicotine. Thus the smoker using the tobacco for a filter in this way would not have to throw away a large portion of his cigarette.

Listing tar and nicotine levels on cigarette packages and cartons. To permit comparison with other brands such statements could be copied from the reports prepared by the Department of National Health and Welfare.

3. INCREASED SOCIAL ACTION OTHER THAN LEGISLATION

By its very nature cigarette smoking is a social problem as well as a personal health problem. Increased participation by all sectors of the community could help to reduce its spread among young persons, its hold on continuing smokers and its continuing appeal to former smokers. We are thinking especially of the following:

(a) Increased production of health education materials by the Department of National Health and Welfare and others and an increased use of the media especially television and radio.

The latter could be accomplished by:

i *Cooperation of the media stimulated by the Radio-Television Commission for the broadcasters and the provinces in the case of other media;*

or

ii *A legal requirement of free time or space as in the case of the United States Federal Communications Commission ruling regarding the obligation of radio and television stations to provide free time for smoking and health messages.*

(b) The increased participation of organizations and individuals in the nationwide smoking and health program.

We are thinking, for example, that industrial and business concerns might conduct programs among their own employees for the sake of the latter as well as increased efficiency and reduced costs due to lost time from work; businesses who deal with the public such as banks, railroads and stores could also contribute to public education by displaying posters and publications; hospitals and other health service facilities could also participate in this way and insurance companies might reduce premiums for non-smokers.

(c) The gradual elimination of smoking and the sale of cigarettes in a variety of places to reduce the impression that cigarette smoking is socially acceptable and that it is courteous to smoke anywhere.

For example:

i No smoking on television programs;

ii A progressive increase in non-smoking areas.

(d) Increased research into the behavioural and pharmacological aspects of cigarette dependence.

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9. National Interagency Council on Smoking and Health. *World Conference on Smoking and Health, September 1967, A Summary of The Proceedings, 1968*, American Cancer Society, New York.

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APPENDIX 1

TABLE 1—DEATHS AND DEATH RATES, LUNG CANCER, CANADA, 1950-1967 (I.C.D. 162, 163)

Year	Number of Deaths		Death Rates per 100,000 Population ⁽¹⁾	
	Males	Females	Males	Females
1950.....	1,034	202	13.8	3.0
1951.....	1,097	236	14.4	3.5
1952.....	1,252	264	16.1	3.7
1953.....	1,384	253	17.5	3.5
1954.....	1,499	267	18.6	3.6
1955.....	1,623	336	19.7	4.4
1956.....	1,775	294	21.2	3.7
1957.....	1,849	289	21.6	3.6
1958.....	1,972	291	22.8	3.5
1959.....	2,074	325	23.4	3.8

1960.....	2,223	321	24.6	3.7
1961.....	2,411	363	26.2	4.0
1962.....	2,602	432	27.8	4.7
1963.....	2,829	417	29.7	4.4
1964.....	2,924	463	30.3	4.7
1965.....	3,077	515	31.4	5.2
1966.....	3,296	548	32.9	5.3
1967.....	3,700	618	36.3	5.8

⁽¹⁾Standardized to the 1961 Canada Census Population.
SOURCE: The number of deaths was obtained directly from the Vital Statistics Section, Health and Welfare Division, Dominion Bureau of Statistics.

Table prepared by the
Research and Statistics Directorate,
Department of National Health and Welfare.

TABLE 2—DEATHS AND DEATH RATES EMPHYSEMA WITH AND WITHOUT CHRONIC BRONCHITIS, CANADA, 1950-1967 (I.C.D. 502.0 + 527.1)

Year	Number of Deaths		Death Rates per 100,000 Population ⁽¹⁾	
	Males	Females	Males	Females
1950.....	145	23	2.0	0.4
1951.....	180	25	2.4	0.4
1952.....	240	29	3.1	0.4
1953.....	251	33	3.2	0.4
1954.....	253	42	3.1	0.5
1955.....	294	38	3.6	0.5
1956.....	386	46	4.7	0.6
1957.....	507	47	5.9	0.6
1958.....	553	59	6.4	0.7
1959.....	645	77	7.3	0.8
1960.....	650	83	7.2	0.9
1961.....	697	85	7.5	0.9
1962.....	863	107	9.2	1.2
1963.....	1,069	141	11.1	1.5
1964.....	1,082	120	11.2	1.4
1965.....	1,247	189	12.7	1.9
1966.....	1,392	207	13.9	2.0
1967.....	1,484	209	14.6	1.9

⁽¹⁾Standardized to the 1961 Canada Census Population.

SOURCE: The number of deaths was obtained directly from the Vital Statistics Section, Health and Welfare Division, Dominion Bureau of Statistics.

Table prepared by the
Research and Statistics Directorate,
Department of National Health and Welfare.

TABLE 3—DEATHS, AND AGE-STANDARDIZED DEATH RATES PER 100,000 POPULATION, FOR ARTERIOSCLEROTIC HEART DISEASE INCLUDING CORONARY (I.C.D. 420.0 PLUS 420.1), BY SEX, CANADA, 1950-1967

Year	Number of Deaths		Age-Standardized ⁽¹⁾ Death Rates	
	Males	Females	Males	Females
1950.....	13,867	6,599	191.9	103.0
1951.....	14,441	6,982	197.3	106.2
1952.....	15,819	7,634	210.5	112.6
1953.....	16,572	8,258	215.2	118.0
1954.....	17,375	8,549	220.1	118.4
1955.....	18,568	9,010	230.2	121.5
1956.....	19,383	9,938	235.3	130.3
1957.....	20,715	10,478	246.3	133.2
1958.....	21,564	10,885	251.9	134.0
1959.....	22,889	11,873	260.3	141.2
1960.....	24,136	12,530	268.4	144.3
1961.....	24,662	12,987	267.5	144.0
1962.....	25,426	13,618	270.4	146.1
1963.....	26,123	14,346	272.2	148.5
1964.....	26,936	14,715	275.5	147.1
1965.....	28,164	15,462	283.1	149.5
1966.....	27,966	15,776	276.4	147.5
1967.....	28,453	15,843	276.1	143.4

⁽¹⁾Standardized to the 1961 Canada Census Population.

SOURCE: The number of deaths was obtained directly from the Vital Statistics Section, Health and Welfare Division, Dominion Bureau of Statistics.

Table prepared by the
Research and Statistics Directorate,
Department of National Health and Welfare.

APPENDIX 2

HEALTH EDUCATION PROJECTS COMPLETED OR UNDERWAY

1. The Reference Book on Smoking and Health was produced by the Department in both English and French and mailed to physicians across Canada, to newspapers and to radio and television stations. Supplies have also been distributed to provincial departments of health and others.

2. An English language Information Kit consisting of posters, pamphlets, reprints and reference lists, as well as a French adaptation of one of the pamphlets from the Kit were distributed to the provinces.

3. Several exhibits have been produced for use at meetings of health workers and others—

Smoke Signals

Where There's Smoke There's Tar
containing a smoking machine to demonstrate the tar content of cigarette smoke

For Better Health

The Dark Brown Taste That Lasts
with a machine that demonstrates how much tar is left behind in the lungs after the inhalation of cigarette smoke.
The Canadian Smoking and Health Program.

4. A Resource Guide on Smoking and Health for Canadian Teachers, Grades 5-13, produced by the Department, is in use in all Canadian provinces. This has been very well received and an updated version is being prepared.

5. Several radio programs have been produced as part of the Department's series—"Your Health, Your Welfare"—which is broadcast in time kindly donated by some 100 stations across the country.

6. A series of display advertisements, designed for high school students, has appeared regularly since 1964 in a national publication directed to high school students, Canadian High News.

7. A series of display advertisements has appeared regularly in the past two years on the back cover of Quest, the official publication of the Canadian Home and School and Parent-Teacher Federation. Some of these advertisements have been the same as those appearing in Canadian High News.

8. Several coloured and many black and white posters have been produced. Most of these appeared in Canadian High News or Quest before wider distribution as posters, thus obtaining reinforcement of particular themes. In general, a humorous approach has been adopted. Some of these posters have been reproduced by others, for example in school text books, magazines and even as postal cancellation marks. The Canadian Post Office has kindly assisted by arranging for periodic display of posters in every post office, large and small.

9. The Canadian Post Office has also assisted by periodic use of a cancellation dit—"The Safe Cigarette Is the One You Don't Light".

10. The Canadian Youth Conference on Smoking and Health was held in Ottawa on May 12, 13 and 14, 1965. The 74 Conference delegates, selected provincially, were teen-age girls and boys, smokers and non-smokers, representing the ten provinces, the Yukon and the Northwest Territories. Many ideas expressed by the Conference delegates have influenced the subsequent course of the Department's smoking and health program.

The report of the Conference has been distributed widely. In addition, a documentary film of the Conference was prepared to stimulate interest in such conferences across the country as well as to provide health education about the hazards. Two pamphlets based on conclusions reached at the Conference were prepared, one by a French-speaking teen-age delegate, the other by an English-speaking teen-age delegate. As well, a teacher who was an observer at the Conference prepared a pamphlet for the use of teachers.

11. A variety of pamphlets has been produced including one, "So I'm Living Dangerously! What Else is New?", prepared jointly by the Department and the Canadian Medical Association for distribution through doctors' offices. This pamphlet was reproduced by the Canadian Cancer Society and portions have been reprinted in the United States. The leaflet, "Am I An Exemplar" was originally distributed to Canadian parents as an insert in *Quest* and has been reprinted in Canada and reproduced by the American Cancer Society for use in the United States.

12. Reprints of scientific and educational articles have been periodically distributed to interested organizations and individuals.

13. Four films have been produced for various age groups—Let's Discuss Smoking; The Drag; The Canadian Youth Conference on Smoking and Health; and King Size. The Drag and King Size, coloured animated films produced by the National Film Board for the Department, were selected by Columbia Pictures for showing in theatres across the country. The Drag was nominated for an Oscar and was runner-up in the finals. It has been translated into several languages for use in various parts of the world. King Size, produced for young children, has just been completed. Another coloured animated film, "Smoking and Heart Disease", is in production.

14. A series of five 20-second, and four 60-second, coloured animated films have been produced for the Department by the National Film Board as television spot announcements. These are being shown by networks and stations as public service announcements. A series of five 60-second live action films is now being produced for the same purpose. The television networks and stations have kindly contributed time equivalent to a value of many thousands of dollars.

15. A filmstrip, "The Smoking Epidemic", and a slide set showing the development of lung cancer have also been produced for the Department by the National Film Board. A second filmstrip, "What Is Smoke?", is in production. When the latter is completed it is expected that these three items will be included along with pamphlets and posters in a smoking and health teaching kit which the Film Board will sell to school boards.

16. The Department has provided financial support for two educational television programs on smoking and health produced by the Metropolitan Educational Television Association of Toronto. The first of these, "Smoking—It's Up To You", for junior high school students was widely shown across the country and in some areas like Ottawa and Toronto more than once. It is still in use and expected to have further showing in coming months and years.

The second, "Smoking—Who Cares?" for elementary school children has just been completed and shown in Toronto only. Wider distribution is expected.

Another educational television program is being produced in Winnipeg cooperatively by the Department of National Health and Welfare, the Manitoba Departments of Health and Education and the Canadian Broadcasting Corporation. Arrangements have already been made to use this program in the western provinces.

Scripting is underway for an adult educational television program. Its main purpose is to give cigarette smokers guidance in stopping smoking.

17. A desk card for use in the offices of health workers—"Cigarette Smoking is a Serious Health Hazard, We Recommend That You Do Not Smoke" has been in use for some time.

18. A bedside card for hospital patients has been produced by the Department in cooperation with the Canadian Hospital Association.

19. A table or desk card stating "Please—This is a Non-Smoking Area" is available on request.

20. A series of mailing lists of persons interested in six different categories of smoking and health material has been developed.

21. A booklet—"Case History of the Canadian Smoking and Health Program"—has been used as a study document by the Canadian

Public Relations Society and widely distributed as a description of the philosophy and organization of the program.

22. News Releases have been prepared periodically as new information warranting wide distribution has become available. The cooperation of the news media in making this information available to the public has been excellent.

23. In addition to Department publications the smoking and health program distributes materials produced by other organizations such as the Canadian Cancer Society.

APPENDIX 3

SMOKING AND HEALTH RESEARCH PROJECTS SUPPORTED OR CARRIED OUT BY THE DEPARTMENT OF NATIONAL HEALTH AND WELFARE

A—Research Projects Completed

1. *Surveys of Canadian Smoking Habits* carried out for the Department of National Health and Welfare by the Dominion Bureau of Statistics, 1964, 1965, 1966, 1967, 1968.
2. *Teaching About Tobacco in Canadian Schools* by Dr. M. V. Marshall, Dean of Education, Acadia University, Wolfville, Nova Scotia.
3. *Teachers' Habits and Attitudes Toward Smoking* by Miss Vera M. Pezer, Research Psychologist, Psychological Research Centre, Saskatoon, Saskatchewan.
4. *A Comparison of Attitudes Toward the Effects of Smoking and Personality Variables of Smokers and Non-Smokers in a Population of University Students* by Dr. Paul H. D. Tacon, Assistant Professor of Psychology, University of New Brunswick, Fredericton, New Brunswick.
5. *Modification of an Overlearned Maladaptive Response Through A Relearning Program* by Dr. Neil McK. Agnew, Chief Research Psychologist, Psychological Research Centre, Saskatoon, Sask.
6. *A Survey of Changes in Smoking Habits combined with a Survey of Canadian Attitudes Regarding the Relationship between Cigarette Smoking and Disease* by Canadian Facts, a private research organization, between November, 1964 and January, 1965.
7. *A Catalogue and Evaluations of Existing Educational Films and Filmstrip Aids Relating to Smoking and Health Hazards* by the Metropolitan Educational Television Association of Toronto.
8. *A Survey of Cigarette Advertising* by the Manitoba Educational Research Council, University of Manitoba, Winnipeg, Manitoba.
9. *A Survey of Changes in Smoking Habits* by Canadian Facts, a private research organization, between November, 1965 and January, 1966.
10. *Some Determinants of Smoking Attitudes and Behaviour Among High School Students* by Dr. Marjorie N. Donald, Department of Psychology, Carleton University, Ottawa, Ontario.
11. *Longitudinal Study of Smoking Behaviour, Reaction to Frustration and Methods of Altering Smoking Involvement* by Dr. Paul H. D. Tacon, Assistant Professor of Psychology, University of New Brunswick, Fredericton, New Brunswick.
12. *Effects of Voluntary Control of the Autonomic Nervous System on the Smoking Habit* by Dr. R. V. Thysell, Assistant Professor, Department of Psychology, Waterloo, Ontario.
13. *An Evaluation of Educational Television Techniques in Teaching Smoking and Health in a Metropolitan Area* by the Metropolitan Educational Television Association of Toronto, Ontario.
14. *A Nationwide Evaluation of Educational Television Techniques in Teaching Smoking and Health* by the Metropolitan Educational Television Association of Toronto, Ontario.
15. *Personality Correlates of Cigarette Smoking* by Dr. H. M. Lefcourt, Department of Psychology, University of Waterloo, Waterloo, Ontario.
16. *A Review of Psycho-Social Factors in Cigarette Smoking*, [1965] by Dr. F. R. Wake, Department of Psychology, Carleton University, Ottawa, Ontario.
17. *A Review of Psycho-Social Factors in Cigarette Smoking*, [1964] by Dr. F. R. Wake, Department of Psychology, Carleton University, Ottawa, Ontario.
18. *Methods Involved in Successful and Unsuccessful Attempts to Stop Smoking* by Dr. F. R. Wake, Department of Psychology, Carleton University, Ottawa, Ontario.

19. *Follow-up Survey of Smoking Habits of Winnipeg School Children, 1968*, by Dr. P. Constantinidis, Deputy Medical Health Officer, City of Winnipeg Health Department, Winnipeg, Manitoba.

20. *A Follow-up Survey of Smoking Habits of School Children in the Northwestern Ontario Health Unit Area, 1968* by Dr. P. Playfair, Director, Northwestern Health Unit, Kenora, Ontario.

B—Research Projects Underway

21. *A Smoking Withdrawal Study Centre* by Dr. G. W. O. Moss, Deputy Medical Officer of Health, City of Toronto Health Department, Toronto, Ontario.

22. *A Survey to Determine the Extent of Exposure of Canadian Cigarette Smokers to Cigarette Tar and Nicotine* by the Department of National Health and Welfare.

23. *An Aversive Treatment for Addicted Cigarette Smokers* by Dr. P. E. Gendreau, Department of Psychology, Queen's University, Kingston, Ontario.

24. *Effects of Health Education on Development of Smoking Habits in Ottawa School Students: A Longitudinal Study* by Dr. F. R. Wake, Department of Psychology, Carleton University, Ottawa, Ontario.

25. *An Experimental Smoking and Health Education Program Among Canadian Parents* by Canadian Home and School and Parent-Teacher Federation.

26. *Effects of Health Education on the Smoking Habits of Children and Student Nurses in Saskatoon* by Dr. V. L. Matthews, Professor of Social and Preventive Medicine, University of Saskatchewan, Saskatoon, Sask.

27. *A Study to: (a) Investigate the Possibility of Removing Specific Harmful Substances From Cigarette Tobacco or Smoke; and (b) Develop Techniques and Standards Appropriate to Canadian Needs for Use in a Program of Surveillance of Levels of Total Tar and Nicotine and Possibly Other Indicators of the Harmful Constituents of Cigarette Smoke*, by Dr. W. F. Forbes, Professor of Chemistry and Statistics, University of Waterloo, Waterloo, Ontario.

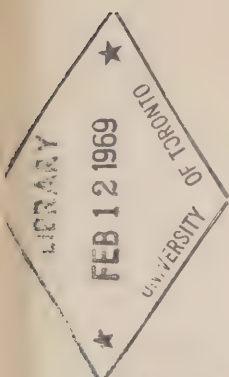
OFFICIAL REPORT OF MINUTES
OF
PROCEEDINGS AND EVIDENCE

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ALISTAIR FRASER,
The Clerk of the House.



HOUSE OF COMMONS

First Session—Twenty-eighth Parliament

1968-69

STANDING COMMITTEE
ON

HEALTH, WELFARE AND SOCIAL AFFAIRS

Chairman: Mr. GASTON ISABELLE

MINUTES OF PROCEEDINGS AND EVIDENCE

No. 10

THURSDAY, JANUARY 16, 1969

Respecting the subject-matter of

Bill C-39, An Act to amend the Broadcasting Act (cigarette advertising);

Bill C-45, An Act to restrain the use of Tobacco;

Bill C-53, An Act to amend the Food and Drugs Act;

Bill C-134, An Act to amend the Tobacco Restraint Act;

Bill C-137, An Act to amend the Broadcasting Act (Prohibition of cigarette advertising);

Bill C-147, An Act to control the tar content and nicotine level of cigarettes.

APPEARING:

Mr. Barry Mather, M.P., Sponsor of Bills C-39, C-45 and C-53; Mr. Antonio Yanakis, M.P., Sponsor of Bills C-134 and C-137; and Mr. Marvin Howe, M.P., Sponsor of Bill C-147.

The Queen's Printer. Ottawa, 1969

STANDING COMMITTEE
ON
HEALTH, WELFARE AND SOCIAL AFFAIRS

Chairman: Mr. Gaston Isabelle

Vice-Chairman: Mr. Steve Otto

and Messrs.

Forget,	Knowles (Norfolk-	Rynard,
Fortin,	Haldimand),	Thomas
Foster,	MacInnis (Mrs.),	(Maisonneuve),
Gendron,	Mather,	Yanakias—20.
Godin,	McBride,	
Guilbault,	Monteith,	
Haidasz,	Ritchie,	
Howe,	Robinson,	

(Quorum 11)

Gabrielle Savard,
Clerk of the Committee.

NOTE: Pursuant to Standing Order 65(4)(b), membership of the Committee was amended as follows on January 16:
Messrs. Knowles (Norfolk-Haldimand) and Haidasz replaced Messrs. Yewchuk and Rochon.

(Text)

MINUTES OF PROCEEDINGS

THURSDAY, January 16, 1969.
(11)

The Standing Committee on Health, Welfare and Social Affairs met this day at 3:40 o'clock p.m. The Chairman, Mr. Gaston Isabelle, presided.

Members present: Mrs. MacInnis, Messrs. Forget, Fortin, Guilbault, Howe, Isabelle, Knowles (*Norfolk-Halifax*), Mather, McBride, Otto, Ritchie, Robinson, Rochon, Thomas (*Maisonneuve*), Yanakis. (15)

Other Members present: Messrs. Osler, Scott and Trudel.

In attendance: Messrs. Mather, Sponsor of Bills C-39, C-45 and C-53; Yanakis, Sponsor of Bills C-134 and C-137; Mr. Howe, Sponsor of Bill C-147, all Members of this Committee.

The Committee resumed consideration of the subject-matter of the above-mentioned Bills.

On motion of Mr. Robinson, seconded by Mr. Guilbault,

Resolved,—That the Chairman be authorized to hold meetings to receive and authorize the printing of evidence when a quorum is not present.

Agreed,—That the letter of January 8, 1969 received from the Executive Assistant to the Hon. Minister of National Revenue, relating to the sales and excise tax and excise duties on cigarettes and tobacco, be printed as an appendix to this day's proceedings. (*See Appendix C*)

Mr. Mather read a statement and was questioned thereon.

Mr. Yanakis read a statement; he and Mr. Mather answered questions of Members.

Mr. Howe explained the purpose of Bill C-147 and was questioned on his statement.

At 5:35 p.m. the Committee adjourned to the call of the Chair.

Gabrielle Savard,
Clerk of the Committee.

EVIDENCE

(Recorded by Electronic Apparatus)

• 1543

Thursday, January 16, 1969

The Chairman: Lady and gentlemen, I now see a quorum. May I say at the beginning of this meeting that I wish everyone a Happy New Year, especially the non-smokers.

As the committees are now functioning under the new rules pursuant to Standing Order 65(7), the presence of a quorum shall be required whenever a vote, resolution or other decision is taken by a standing or special committee, provided that such committee, by resolution, may authorize the chairman to hold meetings to receive and authorize the printing of evidence when a quorum is not present.

Accordingly, I will need a motion. The motion would read: That the Chairman be authorized to hold meetings to receive and authorize the printing of evidence when a quorum is not present.

• 1545

Mr. Robinson: I so move.

Motion agreed to.

The Chairman: We are now resuming consideration of the subject matter of the six private bills relating to tobacco and cigarette smoking. Mr. Mather, sponsor of Bills C-39, C-45 and C-53, will outline for us the purposes of his bills. Mr. Yanakis will explain the purposes of Bills C-134 and C-137. Mr. Howe, sponsor of Bill C-147, will also be heard this afternoon.

Mr. Robinson: Mr. Chairman, on a question of procedure, do I understand correctly that each of the three witnesses will be giving a short statement on each his respective bills, so that in the case of Mr. Mather he will be giving, in effect, three statements, one on each of the three bills? Will we at the same time have an opportunity of questioning and examining each bill and each statement?

The Chairman: I must point out that we are not studying the bills; we are studying the the subject matter of the bills. I imagine the

subject matter will be practically the same. It will be up to the Committee to decide. Have you anything to say on this, Mr. Otto?

Mr. Otto: Mr. Chairman, I suggest that since all three of Mr. Mather's bills more or less overlap he be allowed to make the statement or statements on the three bills and then he can be examined by members. Mr. Yanakis and Mr. Howe could then follow.

The Chairman: Is this agreed to by everyone?

[Interpretation]

Mr. Thomas (Maisonneuve): I have a question of privilege before we begin our proceedings. Mr. Chairman. First of all, I am speaking my own language to help out my friends who are learning French; they have forgotten everything since the 20th of December. I have two little points I would like to have cleared up because on December 19, my colleague, Mr. Robinson, spoke to me. I do not have the French version, but I shall read in English the points I would like to have clarified.

[English]

I have a further point, Mr. Chairman, with regard to procedure. Since this matter concerns smoking and smoking is a health hazard, I am wondering whether all the smokers should not be removed from the Committee and become witnesses only to the Committee. I am not suggesting, of course, that this include the Minister who is before us today.

[Interpretation]

Mr. Chairman, you did not follow the suggestion of my colleague Mr. Robinson since you have kept on three smokers since the holiday period.

I have another one and this one is a little more serious. I did some research during the holiday season and I found some points to counterbalance the claims made. I quote again the words of my colleague, Mr. Robinson:

[English]

I make my suggestion from the point of view of pollution. I have read a certain amount of material on this and it seems to me that today probably there is more harmful pollution from cigarette smokers than from any other existing source of pollution. We are in the position that we cannot get away from it. We must associate and socialize with people who smoke as are some of the members in this room at this very moment.

[Interpretation]

Of course, it was my privilege at that time to smoke or not to smoke. If we have a Committee of non-smokers, then we will have a Committee which will reach unilateral decisions. In my studies of Professor Daniel Bovet, (I am of course, not a doctor) a Nobel prize winner in 1957 who stated in "Tempo" a Milan, newspaper:

"Nicotine produces slight euphoria which stimulates the brain functions, increases the capacity for attention, favours the memory and has a special tranquilizing effect."

Professor Bovet also added:

"Tobacco smoke harms no healthy person . . .

"... but is harmful to those who are ill."

I do not feel ill yet; so I feel it is my privilege to smoke.

I would have other remarks to make but I will keep them for the experts.

The Chairman: Thank you. Of course you had a right to be heard when—

[English]

Mrs. MacInnis (Vancouver-Kingsway): Mr. Chairman, I think he is predicting the evidence ahead of time.

[Interpretation]

The Chairman: I am happy to hear that Professor Bovet did not speak of the effects of smoking on sex.

[English]

• 1550

The Chairman: Gentlemen, before calling on Mr. Mather, I would like to inform the Committee that during the recess letters were sent out to individuals, national associations, advertising agencies and so on, inviting them to appear before the Committee. It is our intention to call a meeting of the steering

committee to discuss some suggestions received about calling other witnesses. Government departments also have been asked to supply information.

I would like to read into the record the reply received from the Executive Assistant to the Minister of National Revenue, but as the letter is in French and we do not as yet have the translation, I wonder whether members would agree to having this letter printed as an appendix to today's Proceedings?

Some hon. Members: Agreed.

The Chairman: Our first witness today is Mr. Mather.

Mr. Barry Mather (Sponsor of Bills C-39, C-45 and C-53): Thank you.

Mr. Chairman, Mrs. MacInnis and gentlemen, I believe we are met here today to consider the subject matter of the bills of several hon. members, representing as it may be the three major parties in the House of Commons, so to that extent it is a nonpolitical conference that we are starting. These bills include three of my own and, like the other hon. members' bills, in one way or another mine have something to do with the subject of smoking, related diseases and steps which at least some of us consider, in the interest of public health, it is imperative that the public's representatives take to reduce the promotion of cigarette consumption.

I intend to outline very briefly the subject matter of my bills C-45, C-53 and C-39. I think the members have these bills before them and I believe if I were to simply quote the explanatory notes in each case and later stand ready to try to answer questions as to their subject matter, this will suffice for this afternoon.

However, to give some perspective to the aim of the subject matter of my bills, before dealing with the actual subject matter of the bills I would like to put a few words on record as to the need for legislation to control disease caused by cigarettes and also to mention legislation which is, of course, already in effect in other countries and which is along the very lines which the Minister of National Health and Welfare suggested to this Committee on December 19.

Mr. Chairman, several countries have examined the problem of disease which is caused by cigarettes and all of them have come to the same conclusion. In the words of the United States authorities, it is a serious

health hazard of such significance as to require governmental action to control and reduce it. For some years in the United States they have required reports on cigarettes to Congress by their health department, their toll, and what steps are recommended from time to time to meet the situation. You may recall that in their 1964 report they stated that cigarette smoking is associated with a 70 per cent increase in the age specific death rates of males and, to a lesser degree, females. This ranges to a 120 per cent higher death rate in the case of a 2-pack-a-day male smoker. The 1967 and 1968 reports of the same authority simply confirms, adds to and strengthens the earlier report of the 1964 committee. The Federal Trade Commission in the United States has recommended in recent months:

(a) A ban on all radio and TV advertising and that all forms of remaining cigarette advertising, including packaging and printed advertising, must carry warnings of the health hazards involved in smoking.

They also recommend a second step:

(b) The Americans have also begun to require that broadcasters carrying cigarette advertising must also carry antidote warnings, anti-smoking advertisements.

Of course, the health studies in Great Britain reached the same conclusion about this unsafe product, cigarettes, back in 1965, and at that time the government removed all their TV cigarette advertising from the air.

• 1555

As the members are well aware from the material supplied to us by the Department of Health and Welfare, several other countries have already taken steps to regulate the promotion of cigarette sales. I believe that within the next three or four years cigarette advertising in North America will practically cease to exist, as it has in the case of those former attachments of the tobacco product, the cuspidor and the snuff box. Or, if cigarette advertising is permitted at all, it will be self-defeating, in that the public will require that all of it, whether spoken or printed, must carry a clear warning to the effect that cigarette smoking is hazardous to health.

Without further preliminaries, Mr. Chairman, I now come to the subject matter of my bills, commencing with Bill C-45. The purpose of this bill is to protect the consumer or purchaser of tobacco products from being deceived or misled as to their character,

toxicity or safety and to restrain the use and consumption of tobacco in Canada. It will give the Governor in Council power to regulate the advertising of tobacco products and it is also intended as a basis for the compulsory publicizing of the ingredients in tobacco products.

This bill is in two parts and Part II sets out in detail the regulations relating particularly to the labelling, packaging, selling, distributing, offering, exposing, promoting and advertising of tobacco. I should point out to the Committee, Mr. Chairman, that when I first introduced this bill—I think it was in 1963—I did so, and it still stands in this situation, as an amendment or an addition to the old Act, which I believe is of the vintage of 1908, and which was called an Act to restrain the use of tobacco by young persons, and this old Act dealt primarily with regulating the sale of tobacco to young persons.

That part of the Bill is, of course, law. It is still law. I do not think it is a very effective law but it is there. The subject matter of my bill is really an amendment to that basic Act. My amendment is contained in Part II, which deals with the controlling of labelling, packaging and advertising of tobacco products.

As to the subject matter of Bill C-39, I will quote from the explanatory note:

It has been established that there is a link between cigarette smoking and lung cancer, heart and respiratory diseases.

It has been established that television and radio advertising promote the use of cigarettes, particularly among young people and consequently spread diseases.

The purpose of this Bill is to enable the Board of Broadcast Governors...

which is now the Canadian Radio and Television Commission:

...to make regulations controlling or prohibiting cigarette advertising.

This is the end of the explanatory note concerning Bill C-39.

Mr. Chairman, my final bill is Bill C-53. Once again I will read the explanatory note to introduce the subject:

The *Food and Drugs Act* presently protects the consumer against *inter alia* fraudulent advertising and selling of food, drugs, cosmetics, and devices. This Bill would extend that protection to tobacco products.

The bill then goes on to some degree to spell out what is to be done in that way.

As I say, Mr. Chairman, I am ready to try to answer the hon. members' questions on the subject matter of these bills. I would like to say in passing that to my mind today they represent the possible raw material from which we may later wish to consider drafting recommendations for legislation.

I would like to conclude my remarks by stating just a few perhaps not so well known facts about cigarette smoking in our country. Firstly, in the past 10 or 11 years an estimated one million Canadians have quit smoking but in their place approximately 300 people a day, or 9,000 a month, start smoking. Of course, of those who start the great majority are young people, children in fact, the very people the subject matter of my Bill seeks to protect the most, for while it is very good when an adult person or a veteran smoker protects his or her health by belatedly giving up cigarette smoking, I for one am not so concerned with that and our immediate health toll, as I am with doing all possible to reduce the toll of the future.

• 1600

Mr. Chairman, this is a deeply embedded ailment and a long-range business, and the steps which we may come to recommend later this year and which may become law will have their effect probably a generation from now.

Secondly, I would like to put on the record the fact that as long ago as 1966 a public opinion poll, sponsored by *Readers Digest*, established that over 60 per cent of all Canadians were, even at that time, convinced that action must be taken by the Canadian Government to reduce the promotion of cigarette consumption in our country. I am confident personally that today that figure would be nearer 70 per cent than 60 per cent.

One final fact. A report of the Department of National Health and Welfare two years ago estimated that approximately \$500 million a year is the toll taken financially in Canada due to cigarette sickness.

I end, Mr. Chairman, with two very brief quotations. One is from the late U.S. Senator Robert Kennedy, who had proposed two bills which were rather similar to some of those bills which are before you or are coming before you here. He told the 1967 World Conference on Smoking and Health in New York:

Broadcast advertising promotes the sale of cigarettes. Cigarettes kill people, many people. I do not think it is morally or

socially acceptable to encourage people to kill themselves. Cigarette broadcast advertising must be banned.

Finally, Mr. Chairman, I will quote an old acquaintance of mine, the Vancouver *Sun*, which is now Canada's second largest paper in circulation. I quote their report on Christmas Eve last on this Committee and our work, and what is liable to come before us. The *Sun* said, and I conclude by repeating it:

At this time of the year...

that is, at Christmas time...

... when the tobacco industry is urging you to add to the lung cancer possibilities of the mailman and the milkman by giving them gifts of cigarettes, the makers are wheezing in panic. The Government means business, despite the powerful tobacco lobby, the money that industry pumps into the tax coffers, and the political implications in the tobacco-growing parts of the country. The public is getting the message more and more and figures in Canada show that consumption per capita, while over-all volume continues to rise, is falling slightly. The Government is now overwhelmingly convinced that growing evidence of the health hazard and its cost in suffering and medical expenses is a major concern in Canada today. Having taken the initial step and with increasing public support, the Government is going to keep going."

I sincerely hope that it will, Mr. Chairman.

The Chairman: Thank you, Mr. Mather. You have just heard the exposé of Mr. Mather. Would you rather hear Mr. Yanakis now and hold your questioning until later, or put your questions to Mr. Mather now, and proceed with Mr. Yanakis afterwards? What is the wish of the Committee?

Mrs. MacInnis (Vancouver-Kingsway): Mr. Chairman, is Mr. Yanakis' material similar?

The Chairman: No, it is on his own bill; it is a different thing.

Mrs. MacInnis (Vancouver-Kingsway): In which case it might be better to do Mr. Mather's now?

The Chairman: If you wish. Are we all agreed on this? The meeting is open for questioning.

Mr. Robinson: Mr. Chairman, I fail to see how it is different; it is on the same topic, the

same subject matter entirely. The subject matter is practically the same. If we have the bills before us, I fail to see how there is any real difference.

Mr. Otto: I do not think that we can presume that Mr. Mather and Mr. Yanakis and Mr. Howe have formed a consortium. Therefore, it is impossible to question them as a consortium. I think they are each individually presenting their point of view, and I think it is only fair of us to presume they have their own point of view and they might conflict. So I suggest that we ask questions of each speaker as he makes his comments.

• 1605

The Chairman: Is it agreed to proceed in the way that Mr. Otto has just suggested?

Agreed.

Mr. Otto: Mr. Chairman, following Mr. Mather's comments about the United States' experience, I believe he said that for several years cigarette packages have had a printed warning on them that the cigarettes could be poisonous and dangerous to health. How many years has this been going on in the United States?

Mr. Mather: I believe they started that about 1964 or 1965.

Mr. Otto: Do you have any figures as to the decline in consumption, or the increase in consumption of cigarettes in the United States?

Mr. Mather: Mr. Chairman, I do not have the exact figures, but I think I can report factually that there has been an increase in the over-all consumption of cigarettes in the United States, but a very slight decline in the per capita consumption.

Mr. Otto: I believe that you are correct that there has been an increase. Since the subject of your bills is that a warning should be placed on the package and that we are to presume that the warning will be effective, is there anyone in Canada, or is there a large number of Canadians, who are not aware of the possible dangers of cigarette smoking? In your opinion, referring of course to the great number of articles, television programs, newspaper comments. Do you think there is a sizeable number of Canadians who are not aware of the danger?

Mr. Mather: I think more and more Canadians are becoming aware of the danger,

but in specific answer to your question I do not think that nearly enough has been done to make them aware. I will add that literally millions of dollars have been spent in Canada every year on every form of cigarette promotion and advertising. We have had only in the last four years a beginning of what the health department, I believe, calls education against cigarette smoking. As I indicated in my earlier statement, I personally think this is a very long-range, deeply embedded problem that we are beginning to tackle. Therefore I would not be of the opinion that simply making a start at labelling cigarette packages, either in the United States or here, will necessarily inform everybody of the hazards involved to the extent needed.

Mr. Otto: Going along with what you said about a very deeply embedded problem, I put it to you that although I have no objection to your bill, in Ontario there has been a regulation that second-hand cars must have a certificate at the point of sale stating whether or not those cars are roadworthy. Up to quite recently every time a purchaser bought a used car from any used car lot, he got a certificate which stated in half-inch letters across the middle of it: "This car is not roadworthy". And it has not stopped the sale or purchase of any second-hand cars because, of course, this is the whole thing. Presuming we pass this law, how do you anticipate that the caution to be put on cigarettes is going to be effective? Or if no advertising is permitted by any company, then of course they are all saving a great deal of money. Do you think that the lack of advertising is really going to be effective in the reduction of consumption of cigarettes?

Mr. Mather: Both in the case of the warning put on the car sale certificates, and in the case of cigarettes or tobacco products, I think that the beginning which has been made in recent years by different governments will play a part in further acquainting the people, and particularly the younger people, with the facts involved in both cases. It seems to me that we have to do a great deal in this case. My bill suggests two or three ways—and there are many other steps that might be taken—of combating the promotion of cigarettes and cigarette disease through this.

• 1610

But the main thing in my mind, Mr. Chairman, frankly, is not my own particular bills,

although I think that they may contain in them some worthwhile things, and the same applies to the bills of the other members. But the big thing that we have to begin to do, like other countries have done, is to get legislation. Once we get legislation, then if it does not work we can extend that legislation to see that it is more effective. So let us at least make a beginning in this.

Mr. Otto: Mr. Chairman, this is my last question to Mr. Mather. I address it to you because the presumption has been made, and it is up to this Committee to decide whether we accept it or not, that it is a fact that cigarette smoking is directly the cause of lung cancer. Now I suggest that if this Committee is going to accept this presumption then, of course, it will not be necessary for us to deal with the whole strata of cigarette smoking or the use of tobacco; we will merely have to discuss methods of government action.

There has been a great deal of research done by Dr. Hans Selye connecting cancer with stress and tension. It may quite possibly not be the cigarettes at all. Therefore, may I ask the Chair to arrange to invite Dr. Hans Selye to give evidence to this Committee, rather than this Committee just accepting the statements made by Mr. Mather that there is no doubt that cigarette smoking is a direct cause of lung cancer.

Mr. Mather: Mr. Chairman, you have had a request. However, I would like to reply to a suggestion made in that request. You do not have to take my word that the smoking of cigarettes promote lung cancer, heart trouble or emphysema; you should have before you the reports of our own health department and those of the United States, Britain, Russia and France, which all say the same thing.

Mr. Chairman, I have no objection whatsoever to any witnesses being called because I am very confident that they will not be able to deny the findings of impartial health authorities.

The Chairman: Mr. Otto, we will discuss this matter in our Steering Committee. I understand that you are a member of that committee.

Are there other questions for Mr. Mather?

Mr. Robinson: Mr. Chairman I have several questions.

I have a couple of questions on the explanatory notes to Bill C-45. I note, in particular, Mr. Mather, that you indicate the

consumer is to be protected, that there is to be restraint in the use of tobacco, and that there is to be regulation of the labelling, packaging and advertising. Could you tell us what you mean by protecting the consumer from being deceived or misled? Also, could you explain the three terms: character, toxicity and safety?

Mr. Mather: In broad terms, Mr. Chairman, I think the consumer of tobacco products would be protected by the government or the health department having the power to specify the ingredients of the product and to state definitely whether or not that product is safe for public consumption. I think in time this would be a safeguard to the public.

Mr. Robinson: Mr. Chairman, I got the impression from the way this reads, that you would merely be indicating the ingredients. I would not be satisfied that just indicating the ingredients would indicate that there was any concern about safety of the individual.

Mr. Mather: That is not my intention, sir. I think it is spelled out further on in the Bill just how this would be regulated.

• 1615

Mr. Robinson: In any event I would want to make it abundantly clear, Mr. Chairman, that it would not be sufficient merely to indicate the ingredients; it would be necessary to indicate that the ingredients are harmful and in whatever way they are harmful. This is what I would be hopeful the Bill would say.

Mr. Mather: I would agree with you. That would be my hope and intention.

Mr. Robinson: Looking at Bill C-53, the explanatory notes, once again, indicate fraudulent advertising with regard to food, drugs, cosmetics, and devices, indicating that tobacco would be in the same category. I am wondering what there is about the advertising of tobacco that is fraudulent at the present time?

Mr. Mather: I would say that the general advertising of tobacco, particularly the cigarette part of tobacco products, is misleading and to the extent fraudulent. Without stating whether the product is good, bad or indifferent, nearly all advertisements of all forms of cigarettes picture the consumer as a happy, healthy, carefree, successful, "sexcessful" person.

Mr. Robinson: I might suggest, Mr. Chairman, that maybe the consumers of cigarettes are that way and that it is only when they become sick that they cease smoking because their doctors advise against it.

Mr. Otto: They get miserable when they quit smoking.

An hon. Member: They get miserable too late.

Mr. Robinson: I am wondering whether you are equating "misleading" with the term "fraudulent". Frankly, I do not see them as being the same at all. If you say "fraudulent" I think you have to show where the present advertising is fraudulent and, frankly, I do not know of anything fraudulent about it. You see people who smoke and who appear to be happy. There may be athletes who smoke. But what is fraudulent about this? You and I know that some athletes do smoke. There is nothing fraudulent about that, as far as I can see. I think we have to tie it down a little more closely than this, and I am wondering exactly what you mean when you use this term "fraudulent advertising".

Mr. Mather: I am all in favour of tying it down even more than I have tried to do in this Bill or the others, Mr. Chairman, but I certainly think it is fraudulent when an advertisement for an unsafe product does not carry a definite statement that the product is unsafe.

Mr. Robinson: With respect—and I do not want to be argumentative—it would seem to me that although we may say that it is unsafe, and we may have statistics to back this up to some extent, I do not think the merchandisers themselves or the producers of tobacco are prepared to admit that their product is unsafe. It depends how it is used. I have never seen any advertising that indicates that you should smoke two or three packages of cigarettes a day. The advertising I have seen merely indicates that it is attractive to smoke, but it does not indicate how many. I would suggest to you that if you only smoked one or two cigarettes, or maybe three or four cigarettes a day, and did not inhale that there would be no bad or harmful effects.

Mr. Mather: Mr. Chairman, if the hon. member thinks it is the aim of the advertisements to encourage people to smoke one or two cigarettes a day, maybe he is right, but I

do not agree with that at all. I think the aim of cigarette advertising is to promote the sale of cigarettes in as many cases as possible and at as early an age as possible. I repeat that any advertisement of a cigarette which does not in effect become selfdefeating by carrying a very tangible warning to the public, either on air or paper, is misleading if it does not get over the message that this is a dangerous product and hazardous to health.

Mr. Robinson: I am not concerned about that if you are talking about misleading, but your bill states specifically that it is fraudulent advertising. When you use that term I think that you are missing the point entirely. There does not appear to be anything fraudulent about their advertising at the present time. I would suggest that possibly the wording should be changed and this clause should be strengthened.

Mr. Mather: I would be very happy to have it strengthened.

The Chairman: Mr. Robinson, may I remind you that we are not discussing the bills; we are discussing the subject matter of them.

Mr. Robinson: I appreciate that, Mr. Chairman. I will go on to the next bill, if I may.

You have indicated in the second paragraph of the explanatory notes to Bill C-39 that in effect television and radio advertising promote the use of cigarettes, particularly among young people and consequently spread diseases. Could you explain to the Committee what you mean by "spread diseases"?

• 1620

Mr. Mather: The promotion of cigarette consumption adds to the number of cigarettes consumed, and all the health departments that I am familiar with claim in their reports that the number of cigarettes consumed helps to promote and extend disease.

Mr. Robinson: What disease?

Mr. Mather: The diseases listed in some of the reports we have here are lung cancer, emphysema, some forms of heart trouble, and bronchitis. There is a whole list, and I am sure that you are as familiar as I am, sir, with the diseases. I think your point is whether there is a real link between the consumption of cigarettes and the spread of these diseases.

Mr. Robinson: My concern is that the statement here, that television and radio advertising promotes the use of cigarettes which in turn produces disease or spreads disease, does not seem to be correct. I do not think you can say that television and radio spread disease.

Mr. Mather: There is a difference of opinion. I think television advertising of cigarettes does spread disease. The point of the bill is to control this.

Mr. Robinson: Well, if they can spread disease, then that is a new kind of carrier that I am not familiar with.

Mr. Mather: Well, if they promote the extra consumption of a dangerous product then surely they are helping to extend the effect of that product.

Mr. Robinson: I will not argue that point.

I would like to go on to the next paragraph where you indicate that the Board of Broadcast Governors would be able to make regulations controlling or prohibiting cigarette advertising. Which do you mean, controlling or prohibiting?

Mr. Mather: My hope would be that by the time we get through with our hearings of this Committee that we would bring in some recommendations which would give a lead to the Board of Broadcast Governors or the new broadcast authority on controlling or prohibiting. This would be a matter for the Committee, but I would like to see cigarette advertising on television prohibited here as it is in Britain.

Mr. Robinson: Well, really it is not a question of controlling, but rather of prohibiting it entirely.

Mr. Mather: Well, I repeat. I would like to see it prohibited, but it may be that the Committee does not agree entirely with prohibiting it.

Mr. Robinson: If it is to be controlled only, what limits do you set for the controlling?

Mr. Mather: In some countries, the television people took voluntary steps to get their cigarette advertising off the air at hours which they thought, and the health authorities thought, would be hours when most young people or children would be viewing it. This might be a form of control.

Mr. Robinson: I have no further questions at the present time, Mr. Chairman.

The Chairman: Mr. McBride.

Mr. McBride: Mr. Chairman, perhaps I had better ask a question for clarification. We are not, if I understand you correctly, to talk about the wording of the Bill, but only the idea, the aim behind the Bill.

The Chairman: That is right.

Mr. McBride: My questions all concern material in Bill C-45, and I would state at the outset that I essentially agree with Mr. Mather's concern, and in no sense do I want my remarks to be interpreted that I am in disagreement with the point of his Bill.

However, in clause 2, "use of tobacco by young persons", near the end of the clause it states "Whether for his own use or not". This would mean that it would be an offence for any person under the age of 16 to even do such a routine and minor errand as going to the corner confectionery to get a pack of cigarettes for a parent. In other words, they cannot have cigarettes in their possession at any point. Do I understand you correctly?

Mr. Mather: I think that is what the Bill states, Mr. Chairman. But as I tried to point out earlier, my part of this Bill C-45, is the section further on, Part II.

Mr. McBride: Oh, I see, Part I, was already in the Bill.

Mr. Mather: The part you referred to has been law in this country for about 60 years, although I think rather poorly administered. But in bringing in this Bill which I did some years ago, I was advised by the authorities who helped me draft it that it might be logical simply to bring it forward as an amendment or an addition to the existing legislation. All of my concern in this Bill is in the second part which has to do with the protection of the consumer by setting out what the health department might do in the way of controlling, labelling, packaging, and so on.

• 1625

Mr. McBride: We are not talking about anything on pages 1 and 2, then.

Mr. Mather: Well, it is possibly my fault that I did not make that clear to the Committee.

Mr. McBride: My questions are all on that. I am sorry.

[Interpretation]

The Chairman: Mr. Thomas.

Mr. Thomas (Maisonneuve): Mr. Chairman, I agree that the Steering Committee should invite some doctors, with new ideas and clarify the issue. Like many others I have studied certain aspects of the matter but not in depth. Mr. Mather has based his conclusions on American writings. I have some material here which hold the opposite to be true. The Director of the Cancer Institute of Tokyo, Mr. Tomuso Yoshida, who said at a press conference that cancer was affecting people with infections mainly pulmonary and that or following long illnesses. He says we still do not know whether the origin of cancer is due to a virus, and that in the year 2000, cancer will be as curable as tuberculosis is today. Dr. Yoshida is of course a heavy smoker himself but he insists that tobacco is not a cancer-producing agent. So it is up to the doctors to come to an agreement and enlighten us laymen. I have an old aunt who is dying of lung cancer although she has never smoked in her whole life. The doctors keep her under morphine constantly. You cannot blame tobacco for every case. You also referred to Dr. R. J. Bing of Detroit University who seems to be a man of some experience. He stated that nicotine does not give heart disease nor causes arteriosclerosis. During his long experience, he has never seen a real heart disease caused by the abuse of tobacco. I am of course speaking as a layman. So I think that we should invite some doctors here, even if they do not have the same opinions, we will be better informed as legislators and we will be able to find a proper solution. I feel it would be an infringement of peoples rights to tell them: you must not smoke I think there are a number of other areas where commercials should be controlled sex, for example.

Thank you very much, Mr. Chairman.

The Chairman: I should say also that we will invite some specialists from the Heart Institutes and Research Institutes on Cancer, from the Research Institute on Tuberculosis, as we have already done, and then we will be able to ask them some questions. If you think that certain scientists or research workers can clarify the issue for you, you should give a list of their names to our sub-committee, so that we can contact them and invite them here. I must say here that our goal and objective is not necessarily to forbid smoking, but (if the theory is well founded), to find means to reduce advertising which encourages the

young people to smoke in order to discourage what is considered today to be a cause of certain types of cancer. So, if you want to ask more information to be able to have certain opinions, then we will be able to submit certain recommendations.

Mr. Thomas (Maisonneuve): I cannot give you names of well known doctors because I do not know any. Maybe others could be able to do it. Any questions I might have to ask would depend on what they have to say and then I may have questions. But I think you know what I mean. As legislators we must avoid haste in coming to any conclusion. A decision along the lines suggested would open the way to legislating on air pollution, baby food pollution—what all. There does not seem to be any consensus among the doctors. They are still working on assumptions. I agree that cigarette smoking does no one any good including myself. The day they get around to selling courage in the stores I will buy some to help me stop smoking.

• 1630

The Chairman: Congratulations Mr. Thomas.

[English]

Mr. Mather: That was not exactly a question, but could I say just a word. The member is concerned, and rightly, with the feeling of doctors in this connection. I certainly hope that we will have every conceivable medical authority invited before us to examine this. For his information I would tell him that doctors in Great Britain have set an example to the rest of that country by giving up smoking in droves, by the thousands, in the last five years with the increased weight of evidence of lung cancer and heart trouble associated with cigarettes. But I am all for having experts here. I am not an expert. I am only one of a number of members of all parties who are very concerned with this problem and I think it is up to us, as other countries have done, to get the best medical advice on it.

The Chairman: Mr. Osler?

Mr. Osler: Mr. Chairman, I think the main question is the interrelationship of Bill C-39 and Bill C-45. On Bill C-39 I have a passing comment to which I would like Mr. Mather to react. I do not like the suggestion that the Board of Broadcast Governors, or the people that have succeeded it, should have to decide

on controlling or prohibiting because they are quite different things and there is a great monetary difference between controlling and prohibiting.

Controlling suggests that there are all kinds of ways whereby cigarette advertising can still be done and it is very big business in the radio and television fields. I would not like to see the onus of that decision on the Board of Broadcast Governors; I think it should be clearly spelled out in the Bill that we are talking about.

Second, I am wondering whether the Bill is necessary at all because clause 13 of Bill C-45 appears to me to give the Governor in Council whatever powers are necessary to regulate advertising in whatever media they want to regulate it. Therefore, the matter would be up to government and not necessarily up to the Board of Broadcast Governors at all.

In other words, if it is immoral or it is bad or it is poor for your health to advertise on television or radio, the same thing applies to newspapers and magazines and anything else. It would seem to me that you have got powers under the second bill that would obviate the necessity of the first bill.

Mr. Mather: Mr. Chairman, I have no real disagreement with that at all. I think we should consider my bills and perhaps the other members who have bills would agree that we are not—at least I am not—suggesting to the Committee that we adopt my bills, or even parts of the bills. I think they are probably worth while as raw materials for the Committee to consider.

Concerning the fact that some of my proposals overlap others, you must recall that for the last six years I have been putting forward various bills, questions, taking what action I could, to encourage the getting of the subject matter that we are discussing to this very body. That satisfies me and I hope, whether it is my bills, or part of them, or somebody else's, that out of this consideration we will come forward with worth while recommendations to the government.

Certainly I agree with you that it should not be left to the broadcast authority to make a decision of either controlling or prohibiting cigarette advertising, but I would hope that our Committee might consider whether we wish to recommend either prohibition or control.

• 1635

I do not have any disagreement with you, sir, but in explanation of my position I want to say that if, out of my bills or anybody else's, we can come forward eventually with some practical proposals to help to reduce this disease and the spread of it I will be very happy.

The Chairman: Are there any other questions of Mr. Mather? If not, we will hear now the exposé of Mr. Yanakis.

Mr. Yanakis: Thank you, Mr. Chairman. I am sorry that facilities given to M.P.s did not give me a chance to have this brief translated. I hope to have it for the members in the near future.

[Interpretation]

Mr. Yanakis: Mr. Chairman, first of all, I would like to thank Dr. Isabelle, the Chairman of the Committee on Health, Welfare and Social Affairs, for having given those people responsible for introducing the various "Anti-Tobacco" Bills the opportunity to put forth their reasons for drawing to the attention of the government and especially that of the public, regarding the harmful results of smoking.

First of all, I should tell you that I have never smoked, except during a certain period of my youth, just as most young people who, moreover, seem to feel that by smoking they will derive a feeling of virility, which is falsified, needless to say, by abusive and misleading advertising.

What led me particularly not to smoke—this is a personal experience—is that around the age of 14, when I was very active in sports, my teacher at college who was a good sportsman and a very good hockey player, had pointed out to me that his ability and his endurance in sports were due to abstaining from smoking.

I put this into practice myself, and I derived a great deal of satisfaction from sport, contrary to my team-mates who were always out of breath.

Another major reason which led me to present those two Bills, i.e. Bill C-134 and Bill C-137, is because of what occurred in my own particular family, especially with respect to my father and two of my uncles.

All three were inveterate smokers. My father used to get up during the night to smoke a cigarette; of course, in the morning,

when he awakened, he coughed his lungs out. Moreover, when he had bronchitis, the doctor forbade all smoking; after a certain time, as if by a miracle, all his coughing ceased. Thereafter, he stopped smoking. He was cured.

His older brother also followed his example and has been better after having gone through the same illness.

His other brother was unable to stop smoking and he died three years ago from lung cancer. The doctor, who had advised him more than once to cease smoking, has attributed his death to cigarette smoking.

In addition, more recently, a mother of seven children in my riding, who smoked two packages of cigarettes per day, died at the age of 52 from lung cancer due to cigarette smoking.

These are personal reasons which led me to introduce these Bills and, of course, since my arrival in Parliament, in January 1966, I have become more specifically interested in the problem by following the deliberations taking place in the British Parliament and at the White House in Washington.

To support further my arguments by basing them on more advanced studies, I should like to refer the hon. members of the Committee on Health, Welfare and Social Affairs, to reports I have been able to obtain from different sources as well as newspaper and magazine articles which reveal, following intensive research on the part of eminent doctors and scientists, the real dangers of smoking.

Manual of statistics from the biological division of the Department of Health:

1. Causes of death from heart disease: i.e., arteriosclerosis, coronary diseases, angina, chronic bronchitis, emphysema, lung diseases, between 1950-1966, published in English.

2. The 1964 report on cigarettes and health, published by the Department of Health and Welfare, informing the public of the risks to health resulting from the smoking of cigarettes.

3. A book dealing with the consequences to health of smoking habits, published in 1968, and which is a supplement to the 1964-1967 edition published by the Department of Education and Health of the U.S. Government, also containing technical and scientific reports from experts on the relationship between cigarette smoking and the various categories of illness occasioned thereby.

4. A book on the world conference held in 1967 in New York, sponsored by the Council of International Agencies, on health and the smoking habit.

5. An act passed by 89th United States Congress, at its first session, on July 27, 1965, obliging tobacco firms to mark on cigarette packages that smoking may be damaging to health and limiting also advertising in any form.

• 1640

Time has not allowed me, Mr. Chairman, to quote you all the newspaper and magazine articles which I have in my possession and which are all very interesting. However, they are always available to the Committee for reference purposes.

Mr. Chairman, I am convinced that our work here will certainly attract the attention of the general public regarding the effects of smoking but that the results will be rather relative because of the difficulties which smokers have in getting rid of this bad habit.

However, I am confident that in addition to the restrictions that we recommend, an intense publicity campaign will begin so as to warn the young generation of the dangers incurred in adopting this bad habit of smoking.

That is why I recommend to the Committee to consider very seriously the two Bills which I have introduced. That is Bill C-134 obliging companies to mark on cigarette packages that smoking may be damaging to health, and Bill C-137 which asks the government to prohibit all advertising on radio, TV and in press.

I thank Hon. Members of the Committee for the kind attention they have given.

The Chairman: Thank you, Mr. Yanakis. Are there any other questions? Mr. Otto.

[English]

Mr. Otto: Thank you, Mr. Chairman. I will confine my questions then to the broadcasting part, Mr. Yanakis. If consideration is given to the purpose behind your bill, how do you intend to exercise control over the American broadcasting stations that broadcast directly to Canada at any hour?

[Interpretation]

Mr. Yanakis: Mr. Chairman, I believe in fact that the United States government has not yet abolished advertising on TV. I think though, that they are forced to advertise at

certain hours. The British government does so, and I admit that we are going further than the American government. However, I believe that, documented as we are now as the result of the studies made in various countries, we are right in going further and asking for the prohibition of all advertising on radio and TV.

[English]

Mr. Otto: Mr. Chairman, I wonder if we should not agree, possibly, since this section of the ideas presented has a great deal to do with the American broadcasting business, that we should try to get more information for this Committee in regard to any committees in the American Government studying the same problems to see if we are working along the same lines. It seems to me that otherwise no matter what we decide we are not going to get very far.

[Interpretation]

Mr. Yanakis: Mr. Chairman, I think that the United States government is seriously considering the possibility of abolishing all TV advertising, and hence—

• 1645

[English]

Mr. Otto: Have you any idea how they are progressing with it, Mr. Yanakis, or Mr. Mather?

Mr. Mather: Mr. Chairman, to my knowledge they have got to this extent, not in regard to abolishing cigarette advertising on United States broadcasting, but they have got to the extent that their Federal Trade Commission has recommended to the Government that any broadcaster of cigarette advertising, radio or television, must carry antidote advertising now, saying that cigarette consumption is a hazard to health and that they are beginning to specify how much and when that advertising will be carried. As to your point about the advisability, if Mr. Yanakis would agree with us, of calling an American authority on this point, I have recommended to the Steering Committee that we do that.

Mr. Otto: Thank you.

[Interpretation]

Mr. Yanakis: Mr. Chairman, if I might read a section of the Act adopted in the United States which deals with this possibility of restricting advertising. The specific subsection reads as follows:

[English]

Some cigarette advertising in past years has been objectionable, particularly in its appeals to young people.

However, the cigarette manufacturing industry has entered into an agreement under which all cigarette advertising will be subject to an advertising code administered by the former Governor of New Jersey, Robert B. Meyner. All cigarette advertising is required to be submitted in advance to Governor Meyner, who has the power to prohibit any advertising which he determines does not meet the requirements of the code.

Mr. Otto: Yes. But, Mr. Yanakis, through Mr. Chairman, the purpose of your bill, of course, is to restrict advertising completely. As you have mentioned, the American committees are studying merely the type of advertising. Do you anticipate any action by the CRTC preventing American broadcasting into Canada unless it conforms with whatever the Government here passes?

[Interpretation]

M. Yanakis: I think that it would be very difficult to prevent advertising on radio or TV in Canada, but I do believe that an effort has been made in this regard. As I said a little while ago, to the effect that the United States government will go as far as the British government, or as far as we want to go at the present time.

[English]

Mr. Otto: Thank you very much, Mr. Chairman.

Mr. Mather: Mr. Chairman, may I add a supplementary answer to Mr. Yanakis on that point. I think it is true to say that the American thinking now in their Department of Health, Education and Welfare, and their Federal Trade Commission in regard to broadcast advertising of cigarettes is to specify that any advertising of cigarettes on their air, and some would go so far as in their newspapers and magazines, must be accompanied by strong anti-cigarette advertising. The thinking behind that is that if that can be established, and they are working on it, it would surely discourage the cigarette industry from paying for anti-cigarette advertising.

Mr. Otto: Mr. Chairman, I saw a runner for a proposed type of advertising consisting of a cartoon comedy. It starts off with several ways of contemplating suicide if you are sick

and tired of living and things have got a little too far ahead of you. Will you jump in the river? Will you do this? And it ends up suggesting that you order a truckload of "X" brand cigarettes and then you will die happy.

What you are saying, Mr. Mather, is that you are presuming that the antidote type of advertising is going to be effective. I want to know what sort of support you have for the statement that antidote advertising is effective.

Mr. Mather: I think the indication is that already, with the very minor beginning that the Americans have made and with our own efforts through education, there is a slight decrease in the per capita consumption of cigarettes. But this is very early days. I think that the Americans, and I hope ourselves, will come to the point where if any cigarette advertising is permitted, it must be self-defeating.

• 1650

Mr. Otto: This is Mr. Yanakis' bill and I am sorry about getting Mr. Mather involved. That is the end of my questioning.

Mr. Robinson: Mr. Chairman, as a sort of follow-up to my honourable friend in connection with Bill C-137, I note that the regulations are to prohibit any form of cigarette advertisements in Mr. Yanakis' bill, and also that Bill C-39, Mr. Mather's bill, is to control or prohibit cigarette advertising. He indicated in particular that he was concerned about the prohibiting of the advertising. And I notice that in *The Telegram* of November 22, 1968, it states:

The U.S. Circuit Court of Appeals upheld yesterday a Federal Communications Commission ruling that radio and television stations which carry cigarette advertising must devote a significant amount of broadcast time in presenting the case against cigarette smoking.

Would either of you or both of you care to comment on this, and would you be prepared to say that if the advertisers were prepared to spend as much time indicating the evils of smoking as they do the pleasures of smoking, this in itself would be a step in the right direction?

Mr. Yanakis: Are you saying that the tobacco company will have to spend as much time and pay for it?

Mr. Robinson: Yes.

[Interpretation]

Mr. Yanakis: For the beginning, I think this would be acceptable but I think that the object of the Bill which I have introduced would be to completely prohibit advertizing. I do not see any advantage in the companies spending funds and moreover I do not think they would do so to show that their product may be harmful. You are free to smoke or not, but we cannot guarantee that you will not be affected by some kind of illness should you persist in smoking cigarettes. I think it would be a rather foolish idea to believe that the companies would go this far, but if there is no possibility of doing otherwise, I think we could accept it temporarily.

[English]

Mr. Robinson: Mr. Yanakis, with regard to your Bill C-134, you indicate in the Explanatory Notes that the manufacturers of cigarettes would stipulate on their products that the products constitute a serious health hazard. I am wondering if you have in mind any suggestions such as, say, skull and crossbones with the word "poisonous" or something of this nature or something that would bring the attention of the public to this serious problem. It seems to me that if you just have some printing, even though it may be in red on the flap of the cigarette package, this in itself would not be sufficient. It would not necessarily bring it to the attention of the user. I am wondering just what you have in mind in this regard.

[Interpretation]

Mr. Yanakis: Mr. Chairman, I think that simply the fact of specifying on cigarette packages that smoking is injurious to health would be sufficient to warn those who at the present time are smoking perhaps too much. It has been proved—I do not have the notes here before me—that the fact that the United States Government specified on cigarette packages that smoking was injurious to health urged millions of smokers to stop smoking. With the means that we now have at our disposal, it is a beginning. The evidence which existed in 1965 did not enable the United States Government to go further in the warning to be given to the American public or to the consumer. But I think that today with the more advanced studies that have been made by eminent doctors and scientists, the United States Government wishes to go further. I simply wanted by

means of this Bill, to begin, as they had done, to warn the public. I believe that the simple fact of drawing its attention will enable us to launch our program more easily, which is what happens when we introduce other bills.

• 1655

[English]

Mr. Robinson: I have no further questions.

Mr. Otto: A supplementary to that, Mr. Chairman. On these figures, Mr. Yanakis, you are repeating the figures that Mr. Mather gave. He said that there are approximately one million smokers who have stopped smoking and that 9,000 a month started smoking. In my calculations, this means that we had 108,000 new smokers but one million who quit smoking. Yet the cigarette consumption has gone up and at the same time the per capita consumption has gone down. Now how is this possible?

Mr. Mather: The statement I made on that was that our Health and Welfare Department stated, I think a year and a half or two years ago, that approximately one million Canadians have quit smoking in the last 10 or 11 years and that 300 start every day.

Mr. Otto: I am sorry.

Mr. Mather: You will see that the figures are not all that different over 10 or 11 years. And those 300 that start every day are young people who, I am sorry to say, are not like some of us here—veteran smokers. They are virgins in this territory. We want to stop them from starting.

The Chairman: Mr. Knowles?

Mr. Knowles (Norfolk-Haldimand): Mr. Chairman, part of my question has already been answered by Mr. Yanakis and Mr. Mather about the antidote or self-defeating advertising. How in the world could we expect a company to agree to this type of proposition that would defeat the purpose of advertising in itself? It did not seem to me to be sound and reasonable but I think he has explained that he is not too much interested in that but that he is rather interested, if I understand him correctly, in eliminating it altogether. Is this correct, Mr. Chairman?

The Chairman: Yes.

Mr. Yanakis: Yes, sir.

Mr. Knowles (Norfolk-Haldimand): In the opening remarks you made, Mr. Yanakis, you

spoke from personal experience of having seen cigarette smokers suffer and die from lung cancer. And I can from my own experience, and many here can point to many, many other persons who have gone through the same experience who never touched or looked at tobacco at all. This then indicates to me a great grey area where more information is required. Would you not agree that perhaps we should be devoting our greater effort to seeking out the causes of lung cancer which are yet largely unknown rather than to what we are now doing?

[Interpretation]

Mr. Yanakis: Mr. Chairman, when I speak of personal experiences, I lived these experience. But when eminent physicians discuss the number of persons who die each year of cancer, of course, cancer is not only caused by smoking, but, unless I am mistaken, I think that approximately 70 per cent of those who die from cancer are smokers.

That is why we arrive at these figures and that we are right, after considering everything that has been printed along with the reports which have been given from both sides, in basing ourselves on these data to discuss this danger.

[English]

Mr. Knowles (Norfolk-Haldimand): Thank you, Mr. Chairman.

The Chairman: Mr. Fortin?

[Interpretation]

Mr. Fortin: In your Bill C-137, you propose that we include on cigarette packages some form of warning with regard to the danger connected with cigarette smoking. I understood that it might be specified that smoking may be injurious to health. Is that right?

Mr. Yanakis: Mr. Chairman, I think that this was precisely what I had in mind when I introduced the Bill, and that is: "Smoking may be damaging to your health," although there is no question of this here.

Mr. Chairman, I think we should go further. Basing ourselves on the various reports that we have received in the past year—I introduced this Bill three years ago—I think that we should consider the possibility of specifying in print: "Smoking is a danger to your health."

• 1700

Mr. Fortin: Would you agree to have this note included in a Bill or would it be up to the Cabinet or the Department itself?

Mr. Yanakis: I would be in favour of including it in a Bill.

Mr. Fortin: Do you not believe, Mr. Yanakis, that this formula which you are proposing and which is bound in itself, is also incomplete at the same time because there is a negative element to it, i.e. the same can be said regarding advertising on TV which some want to reduce. Do you not think that there could also be positive factors? Could this Bill not be used to suggest educational broadcasting for this purpose?

Mr. Yanakis: Yes, and I think that we should consider this possibility of encouraging the Government, and I personally asked the minister when he came here the last time, when he presented his brief and made a statement, I asked the minister to encourage immediate advertizing in schools so as to prevent, as Mr. Mather said a little while ago, the nine thousand youths from twelve to fifteen years of age who, each month take up the habit of smoking.

Mr. Fortin: Mr. Chairman, before ending my brief list of questions, I would like to congratulate those who presented bills. We are all very glad of them because they give us a serious basis of discussion. It is a step forward.

I would like to suggest to you, Mr. Chairman, that we could invite representatives of tobacco companies to come here and speak of research possibilities, if any, on nicotine content and also, a maximum safety margin in nicotine content could be arrived at. And I think this point was included in the minister's speech at the last session.

The Chairman: We have already done so, Mr. Fortin.

Mr. Fortin: I would like to know if reports nos. 8 and 9 have been translated into French. Do we have French copies.

The Chairman: The translators are working on it.

Mr. Fortin: Then that will be all for now, it is nearly finished. Mr. Chairman.

The Chairman: Thank you very much, Dr. Ritchie?

[English]

Mr. Ritchie: Mr. Chairman, medical statistics are classified as good statistics, bad statistics and lies. Appearing before this Committee will there be those who will have statistics and who have done work on the subject, such as people from the Vital Statistics Section?

The Chairman: Yes, sir. They will also be given through those associations that we have asked to come before us, such as Ligue Antituberculeuse de Montréal Inc., the Canadian Cancer Society and the Institut de Cardiologie de Montréal.

Mr. Ritchie: They will all be appearing, then?

The Chairman: Yes.

Mr. Ritchie: I have one question on the statistics that so many people have quit smoking. Are there any figures, or studies, to show whether those who have quit smoking are the casual smokers, who smoke as a pleasant habit and who probably comprise almost 80 per cent, as opposed to the segment who seem to find smoking a necessity? I have heard that a million have quit. How are these statistics gathered, and is there any real correlation of them?

Mr. Mather: Mr. Chairman, I would prefer that somebody from the Department of National Health and Welfare might answer that later, but it is my understanding, from their earlier reports, that approximately one million Canadians, heavy, medium, or casual smokers, have quit in the last 10 or 11 years. A fair cross-section of Canadian smokers have quit.

The Chairman: We will be able to cross-examine them when they appear before us.

Are there further questions?

• 1705

[Interpretation]

The Chairman: Mr. Thomas.

Mr. Thomas (Maisonneuve): I thought you had forgotten me, Mr. Chairman. I do not want to be the devil's advocate, I never speak, I always listen. I will see if this is included in my New Year's resolutions. If it is included, I will remove it.

I would like to make some comments on what Mr. Yanakis said. We have had two experiences in common but not on the same

wave-length. He told us about his teacher, who was a very good athlete. When I was younger, I was known as a very good hockey player. I have the records to prove it. At that time, we used to play for sixty minutes or so, and after the game, it was so good to smoke a cigarette. Maybe to relax in anticipation of victory or to console ourselves in defeat. But we're not agreed on this.

My second remark is not so funny, but it is true. As all my colleagues know, in 1968, three of my brothers died between February and August, all from heart disease. It seems odd, but two were smokers and one was a non-smoker. The extraordinary thing is that there were two smokers and one non-smoker. There are three of us still living—two smokers and one non-smoker. One might wonder which one will die first in order to establish whether cigarettes are the culprit. I do not think it would be a valid criterion anyway.

My only point is that I am so far unconvinced. We need to do a lot more digging Mr. Chairman.

The Chairman: Thank you Mr. Thomas.

[English]

Are there any further questions? Mr. Osler?

Mr. Osler: I do not want to labour this point. I am completely in agreement with what these two gentlemen are trying to accomplish, and yet I have in my mind the same awful doubt that has just been expressed. My own doctor told me a story after I had had an examination. He said, "You are fine. Do you feel fine?" I said "Yes, I feel fine. What about smoking?" It is not something I do, but my wife does a lot of it. He said, "Well, I have quit smoking because I am convinced by the statistics, but it may be that statistics are making liars out of us. I had an 85-year-old man in today just before you. His blood pressure was perfect and his reflexes were perfect; he had no ill-health at all, I asked him the same question afterwards, whether he was bothered about anything that had not shown up in the examination. He said, there is one thing; all this stuff about cigarettes is worrying me. I asked what he did about cigarettes. He said he smoked about two packs a day. I asked how long he had been smoking, and he said, "Oh, since I was 20, 22 or 23". He is 85 years old.

I recount that only because it seems to me that there is the horrible possibility that a

certain amount of the problem may be related to the metabolism.

If this were to be the case it would be unfair to those who make a living out of tobacco to hit them on the heads, if it were found in 20 years that it was caused by pollution or other things, and that cigarettes were a small factor in it; that it might be the way a man lived, in combination with cigarettes, that caused it.

Will we have before us experts who will give us an opportunity to clarify this point?

The Chairman: Are you asking me?

Mr. Osler: Yes, Mr. Chairman.

The Chairman: You will be able to cross-examine all the witnesses who will appear before us, and there will be quite a number of them, on every field.

Mr. Mather: Mr. Chairman if I may reply briefly to Mr. Osler's point, it is quite true that not everybody who smokes cigarettes is going to die from lung cancer, or emphysema, or heart trouble.

Relative thereto, I thought the former Minister of Health, Mr. MacEachen, made a very good answer when the head of the Imperial Tobacco Company of Canada Limited, or the head of one of the large tobacco companies, said that many people who smoke do not die from lung cancer, or heart trouble. Mr. MacEachen said—I thought very shrewdly—that he knew that, but he was concerned about the thousands who did.

• 1710

There is absolutely no question left, in any country whose impartial health authorities have examined this question, that cigarette smoking—whether it aggravates existing disease or creates it—is a very dangerous health hazard, resulting in premature death and hundreds of millions of dollars worth of time lost through sickness. Therefore, although you are right that many people who smoke survive, there are thousands who do not.

The Chairman: Do you have another question, Mr. Osler?

Mr. Osler: No.

The Chairman: Mr. McBride?

Mr. McBride: Mr. Chairman, I am becoming more and more frustrated here. I hear

people say—as my colleague, Mr. Osler just did—that we need to have witnesses to prove conclusively. Does anyone assume that this Committee is going to be able to make the conclusive decision on the cause of lung cancer that great and august medical bodies have been unable to make for several years? This is presuming that in this room there is a kind of expertise that just does not exist.

We have to take our facts from decisions that have been made by medical conferences. We should not call a whole fleet of doctors and spend months and months pretending we are medical analysts. Rather we should look at the material produced and weigh that. In other words, it is a case of doing homework, not setting up another forum to hear evidence. This is only my opinion, sir.

Mr. Mather: To my mind there is no need to call these experts, except to help to convince people here and in other places that we are being extremely impartial. I think we are going to a lot of work unnecessarily, because every examination that has been made into this has resulted in the same conclusion by every country that has looked into it. These health authorities are not selling anything except health. However, I think in fairness we should invite the people who want to come; people who have something to say on this matter.

The Chairman: Does that satisfy you, Mr. McBride?

Mr. McBride: Yes.

The Chairman: You are now ready to come to a conclusion.

Gentlemen, if there are no further questions we will now hear a statement by Mr. Howe who has presented a private bill. Mr. Howe?

Mr. Marvin Howe (Sponsor of Bill No. C-147): Mr. Chairman, Mrs. MacInnis and gentlemen, I presume that you all have the statement. I am sorry that my secretary was away and I was not able to get a French copy of this, but we have it in English and when and if you ever get the Committee report you will be able to get the French in that.

The purpose of this Bill is summed up in its Short Title as set out in paragraph 1, "The Cigarette Poison Content Control Act". In other words, it is a measure that seeks to alleviate the harmful effects of smoking

through government controls rather than to prohibit smoking by statute or discourage manufacture of cigarettes by punitive regulation of the industry's commercial processes.

It would achieve its objective by controlling the two elements in cigarettes that prolonged and exhaustive international scientific research have established as serious health hazards—tars and nicotine.

Like many others I would be happy to see cigarette smoking abolished. I might say that I do smoke to a certain extent myself and am like a lot of other people who have found it easy to stop—we have done it a thousand times. Certainly in existing circumstances I do not believe that total prohibition would be practical, effective or fair, nor do I believe that punitive regulation, applied arbitrarily to one segment of Canadian industry, would be just or helpful.

I believe it is important to remember that our chief objective should be safeguarding the health of the Canadian people. If this can be done through government action that does not work an injustice on a long-established, reputable and important industry, then I think this Parliament will have done its duty.

It was my conviction that controls, patterned on existing and publicly acceptable controls in other areas, such as foods and drugs, would be both practical and fair that led me to prepare Bill C-147 in its present form. This Bill seeks to ensure that the safest possible cigarettes are available to the Canadian public. This can only be brought about by a national system of control.

• 1715

Most members are aware of the vast amount of research data, amassed over the past decade or so, that has led the medical profession generally to brand smoking as one of the most menacing, if not the most menacing, health hazard facing us today.

The weight of medical opinion, which I will not quote at this time unless members particularly want me to, is that smoking is a prime cause of lung cancer and that cigarettes are the chief agent in promoting this lethal disease. The evidence supporting this opinion is that the two chief agents in cigarettes that cause the trouble are the tars and the nicotine in cigarettes. The contention is that if these two dangerous elements could be reduced or eliminated entirely, cigarette smoking would be a comparatively harmless habit.

Modern technology has provided us with several methods—filters, and so on—of reducing cigarette tars and nicotine dramatically. Tables are now regularly published showing the tar and nicotine content of all leading brands of cigarettes. Many of the most advanced types of filter are now incorporated in widely advertised brands.

These figures are proof positive that the offending tars and nicotine can be reduced to negligible quantities. The only trouble today is that these "safe" cigarettes are a very small minority among the many brands being marketed. They have not yet won general acceptance and, as far as I am aware, have not had the weight of official backing so far.

What my Bill seeks to do is to give the Governor in Council power to set the maximum amount of tar or nicotine a particular cigarette may legally contain. Such action would force the manufacturer to produce a "safe" cigarette. How to achieve this would be up to him.

Such action is in line with our long-accepted practice of setting the maximum alcoholic content of distilled liquors, of the amount and type of preservative that may be used in canning and packaging food, and in a hundred and one other areas covered by our pure food and drug laws. Government would decide the standard of safety and acceptability; the onus would be upon the industry to meet these standards.

It is also in line with the thinking of the Department of Health and Welfare to judge by remarks made to the Standing Committee on Health and Welfare on June 21, 1966, by Dr. J. N. Crawford, Deputy Minister of the Department.

These may be found at page 434 of the report of that session and read, in part:

...we are so concerned about the impact of cigarette smoking on the health of the population that we would be prepared to do almost anything to assist in the elimination of this problem...

I suggest the provisions of this Bill provide the best opportunity for the Department, for the government, for this Parliament, to do something about the evil effects of cigarette smoking. We do not need to cripple or kill the patient in order to stop the spread of the disease, Mr. Chairman. We need simply to attack that element or those elements that make it a lethal disease.

I sincerely believe regulation and control of the tar and nicotine in cigarettes will remove the threat and leave a very important segment of our economic life relatively untouched and healthy.

In all that I have said, I have taken it for granted that I am not required to prove to members of the subcommittee that cigarette smoking is a health hazard. I believe this point has been made over and over again by reputable medical opinion, international studies and figures compiled by our own Department.

The Department of Health and Welfare in November released figures indicating that the lung cancer epidemic plaguing Canada increased 10 per cent between 1966 and 1967. Lung cancer caused 4,318 deaths in our Centennial year. Lung cancer is now the leading cause of cancer deaths among both Canadian men and Canadian women and, it should be pointed out, other deadly diseases are traceable in whole or in part to cigarette smoking such as emphysema, coronary heart disease and chronic bronchitis.

I appreciate the content and intent of other bills that have been framed to meet the situation caused by cigarette smoking. I am in general sympathy with their aims. I am in hearty agreement with the aims of the educational programs that have been advanced, programs designed to prevent young people forming the habit and of bolstering the resolve of smokers to give it up.

However, these are long-range efforts that will take some time to prove their worth. I believe we need direct and immediate action, but I believe such action should be aimed directly at the source of the trouble and be of a nature to cause fewest damaging economic side effects.

We should remember, however strongly we feel about smoking, that the cigarette manufacturing industry is a long established and reputable one that gives considerable employment to Canadians, income to farmers, and pays considerable taxes to the federal government. If we can devise a means of curbing the dangerous elements in this industry while leaving it economically healthy, I believe it will be a worthwhile effort.

I believe this Bill will achieve this aim. It would cause the minimum of interference with the industry, cause the least disruption in employment and taxation and control the two dangerous elements in smoking—tar and nicotine.

I believe it would be fair to the industry and in line with a historic pattern of Canadian government action in similar areas. I believe, too, it would enable Parliament to discharge its responsibility of safeguarding the health of citizens.

The Chairman: Thank you, Mr. Howe. Are there any questions of Mr. Howe? Mr. Robinson?

• 1720

Mr. Robinson: Mr. Chairman, I would like to ask Mr. Howe what he means when he says in the explanatory notes:

The federal authorities should ban all high-tar and high-nicotine...

What do you mean by "high-tar and high-nicotine?"

Mr. Howe: Well, Mr. Robinson, a chart was prepared by the University of Waterloo in connection with the efficiency of different filters and the efficiency of cigarettes with regard to the tar and nicotine content. This was also carried forward in *Reader's Digest* in November, 1966 which showed that there was a difference in the efficiency of the filters that were being used, in that some removed a lot more of the dangerous substances that are to be found in cigarettes than others did.

Mr. Robinson: Mr. Chairman, I do have a copy of the report. I have it here before me, as a matter of fact. What I am concerned about is putting some teeth into the legislation and I am wondering whether you would be referring to the report prepared by the Health, Welfare and Social Affairs Committee of December, 1968 which states on page 15:

Maximums of about 22 milligrams of tar and 1.5 milligrams of nicotine for plain-end cigarettes and about 16 milligrams of tar and 1 milligram of nicotine for filter cigarettes might be acceptable for a start.

Is this what you are suggesting?

Mr. Howe: Well, of course, Mr. Robinson, I realize that it is difficult for laymen like myself to come up with a definite answer to this. I believe it is up to the Department of National Health and Welfare and the Food and Drug Directorate to decide what maximum it is possible to achieve.

This was carried out, of course. In his report to the Committee on Thursday,

December 19, 1968 the Minister had a suggestion about the maximum. It is probably from the same report that you are reading and is to be found on page 49 of the the Committee report.

Of course I, along with Mr. Mather and Mr. Yanakis, am particularly honoured in the fact that we have been able to bring private members' bills before this Committee in order that the whole subject of cigarettes and cigarette smoking may be raised and discussed freely and openly as it is being done in so many countries of the world today.

It is not a new subject. We go back to 1963 when Miss LaMarsh set up a fund of \$600,000 to use in educational programs. That came out after a very definite statement by the Surgeon General of the United States who indicated very definitely that in the United States they believed there was a link between lung cancer and smoking. At that time that fund of \$600,000 was set up; the anti-tobacco campaign was given a \$600,000 boost. We had big headlines in the paper over that.

As I say, this is not something that is new. I can remember the phrase that was coined many years ago when cigarettes were called "coffin nails". This has been going on for years. I welcome this opportunity to bring this Bill before the Committee to provide a vehicle for the discussion and elaboration of the whole problem of cigarette smoking for Canadians.

Sorry, Mr. Robinson, but your question prompted me...

Mr. Robinson: Well, Mr. Chairman, I have both the reports that have been mentioned and the reason I am concerned about high tar and high nicotine content is that in my view it does not really mean very much unless you indicate the limits, and I assumed that Mr. Howe had in mind some limits he would set. I would not be happy with setting the limits as indicated in this report of the Health, Welfare and Social Affairs Committee of December, 1968.

I might say that I had a bill on this in preparation but it was too late to get it before this Committee, but my suggestion would have been that we take the lowest levels of tar and nicotine content according to the survey that was carried out of some 85 brands of cigarettes smoked in Canada and consider those the levels that we would use. I notice they are quite substantially less than the levels indicated in the report from our Department.

• 1725

Mr. Howe: Well, Mr. Robinson, does this not bear out the point that I have raised somewhere that there is a variation in the types of tobaccos that are used? The difficulty is to set a standard from one year to another. For some particular scientific reason that I cannot elaborate on but of which I have heard there is a variation. The very fact that you see a difference in those two reports would indicate that there must be a variation in the lower levels that appear.

I hope we have the tobacco growers associations before us because I feel they are working on types and varieties of tobaccos that will not have such high tar and nicotine content as to endanger the lives of people. I think they are trying their best, through research, to find something that will counteract these health hazards.

Mr. Robinson: I have one further question, Mr. Chairman, I note there is no reference to the use of filters. I do not know whether it would make any difference in your Bill concerning the high tar and high nicotine content, but there seem to be some filters out now that are apparently doing quite a good job. You hear them advertised as such.

I do not really know to what extent they are filtering the tars and nicotine, but apparently cigarettes that are using certain filters are producing cigarettes that taste or smell the same but have less tar and less nicotine. I am wondering whether something of this nature would not be considered.

Mr. Howe: Well, there again we get into a very involved situation, Mr. Robinson. According to the report of the Department of National Health and Welfare that Mr. Munro gave to us that day, sometimes they do find that a cigarette tobacco itself is as good a filter as the specially manufactured one that is put on a cigarette so long as people do not smoke them down too far. In that report, as probably you remember, he mentioned in an educational program that there might be a line put around the cigarette to indicate that if you smoked it below that the hazard increased tremendously. It is a very involved question.

I have a letter from a blind inventor in Lucerne, Quebec who maintains that he has a very efficient filter. There is another filter that has been developed down in Windsor. I was very interested in that because in one of the news stories I saw it was reported that

the authorities in Detroit were rather interested in the principle of this filter from Windsor because it might be used for air pollution in big factories.

I think one thing this Committee's work will do is to stimulate the research into the possibility of getting a filter that will make this possible and this is the purpose of my Bill.

As we see, the committee reports from the United States refer to reviewing progress made towards the development and marketing of a less hazardous cigarette. I think this is what we in this Committee are interested in providing for the people of Canada. As I said in my introductory statement, I do not think it would be feasible or sensible to stop cigarette smoking by regulation when we remember many years ago the difficulty with the temperance question. We would get such a volume of smuggling from other countries that produce cigarettes it would be terrible.

I also believe that the cigarette industry has contributed a great deal to our nation. They are spending money in research and it is possible they might be just as interested in and affected by this question of health as we in this Committee are, or doctors or any other organization.

Mr. Robinson: I have no further questions.

The Chairman: Are there any other questions, gentlemen?

Mrs. MacInnis (Vancouver-Kingsway): Mr. Chairman, rather than ask questions there are just one or two comments I would like to make. First of all, I would like to say that we have all been impressed by the completely non-partisan and very effective presentation that has been made by the three witnesses. I think it reflects in part not only their abilities but the fact that the Canadian people from all sections are thinking, and are ready now for action and will expect us to produce results from this Committee.

• 1730

There are two or three things that I would like to see us do in the Committee, and I would like to raise these points now. We have all been worrying about this matter of statistics. I am familiar with this subject, not only from being in the Committee but from speaking with people that I meet outside. They just simply are not prepared to accept what they hear. If you take a group of people who live in the same country, the ones that smoke

have a higher rate of death and disease than the others. People are not prepared to accept that.

I think for the benefit of the doubting Thomases—and I am not referring to any friend here as an exception among the whole lot of us—that we ought to have people attend from the Department of Health and Welfare who would be prepared to outline for us just how they got those figures and the control groups that were involved so that we could question them. You can give these statistics to people, and even though they are figures they just do not believe them. I think we should have a chance to go into it. I do not mean witnesses such as the medical people, and this and that, but people from the department that compiled those statistics. People who know how they were made and who can give us information as to whether it was done geographically or whether other factors came into it that could have falsified these statistics. I would like to have a session on the statistics of smoking so that we could turn loose on it.

Another point that I would like to make is that I agree with Mr. Howe when he says that if we went straight out and put a ukase in that we were going to ban all cigarette smoking that we would have prohibition over again if we did it that way. In the previous meeting we had I asked the question whether there was any country in the world where cigarette smoking had been prohibited by law and with what result and I was told that some years ago it was banned in Italy and the result was that cigarette smoking had fallen off. Even though I know you cannot do such a thing suddenly like that in this country, I would very much like to have before the Committee the information about Italy—and any other place, for that matter—and the result of doing that over a period of time, so that the Canadian people can see what the result of complete prohibition is as compared with the result in the United States and Great Britain and other places where they have not banned it completely. I think we need this information to evaluate the impact of total prohibition and to find out what it does as far as smoking is concerned. This is the second thing I would like to ask for.

The third thing...

Mr. Robinson: On a point of information, Mr. Chairman, if I may.

Mrs. MacInnis (Vancouver-Kingsway): Yes.

Mr. Robinson: Are you talking about prohibiting advertising or prohibiting the smoking of cigarettes?

Mrs. MacInnis (Vancouver-Kingsway): I mean advertising. I am glad you corrected me. Prohibiting advertising, that is correct.

My third point—I had already thought of this and I was very glad to hear Mr. Otto raise it, although he raised it from a different angle—is that I think, from the standpoint of stress, if we heard from Dr. Hans Selye it would be a tremendous asset to this Committee. I do not mean to prove that it is stress that causes lung cancer rather than smoking, that is not the angle I am interested in, I am interested in finding out from an expert of Dr. Selye's calibre—who is the top man in the field—how much stress is responsible for people taking up smoking, what types become strongly addicted to it and what the effect of cutting out smoking would be to a lot of people, or urging them to cut it out. Would they go in for something worse; heroin, or something like that. In other words, I think we ought to have somebody who knows about the effect of stress vis-à-vis smoking because I think stress and addiction in connection with smoking is a very important thing.

I think we should hear from all these bodies that are connected with smoking but, as I say, I think there are three other fields we should cover. One, a day on statistics from our own department, and if they want to bring somebody from the Dominion Bureau of Statistics who helped to prepare this, that is all right. Two, information about the places where they abolished cigarette advertising. Italy is one country which I heard about. There may be others. Third, to have Dr. Selye appear before us to talk about cigarette smoking in relation to stress. Those are the points I wanted to raise, Mr. Chairman.

• 1735

The Chairman: Thank you for your suggestions, Mrs. MacInnis. I am sure that the Steering Committee will be able to arrange those things very easily.

Are there any other comments or questions? If not, the meeting is adjourned to the call of the Chair.

APPENDIX C

January 8, 1969.

Doctor Gaston Isabelle, M.P.,

House of Commons,

Ottawa, Ontario.

Dear Dr. Isabelle:

As the minister is absent, I am replying to your letter of December 17th in which you enquire about the sales and excise tax and excise duties on cigarettes and tobacco.

Cigarettes are subject to an excise tax of 3¢ per packet of five or any fraction thereof.

There is an excise tax of 90 cents a pound on all processed tobacco, including snuff, but excluding cigars and cigarettes.

All cigars produced in Canada are subject to excise tax of 17½%.

Sales tax in the amount of 12% is levied on the sale of all cigarettes, processed tobacco and cigars but not on the excise taxes given above.

Translation Over and above these amounts, excise duties are levied (under the Excise Act) as follows, on tobacco products:

All categories of processed tobacco except cigarettes—thirty-five cents a pound, true weight;

Cigarettes weighting at most three pounds per thousand, four dollars a thousand;

Cigarettes weighing over three pounds per thousand, five dollars per thousand;

Cigars, two dollars per thousand;

Canadian leaf tobacco sold for consumption, ten cents a pound, true weight.

I would point out that the 12% sales tax, above-mentioned, is applied to excise duties.

Should you need any further information for the guidance of the Standing Committee on Health, Welfare and Social Affairs I shall be glad to supply it.

I am, Sir,

Yours very truly,

(signed) Ovila Benoit,

Executive Assistant.

OFFICIAL BILINGUAL ISSUE

HOUSE OF COMMONS

First Session

Twenty-eighth Parliament, 1968-69

STANDING COMMITTEE

ON

**HEALTH, WELFARE AND
SOCIAL AFFAIRS**

Chairman

MINUTES OF PROCEEDINGS
AND EVIDENCE

No. 11

TUESDAY, JANUARY 28, 1969

Respecting

Bill C-102, An Act to amend the Patent Act,
the Trade Marks Act and the Food and
Drugs Act.

Appearing:

Minister of Consumer and
Corporate Affairs

WITNESSES—TÉMOINS

Messrs.—MM.

*From the Department of Con-
sumer and Corporate Affairs:*

Deputy Minister
Director of Investigation and
Research, Combines Investi-
gation Act
Director, Merger and Monop-
oly Division
Legal Division, Combines In-
vestigation Act

*From the Food and Drug Direc-
torate, Department of National
Health and Welfare:*

Director General
Assistant Director General
(Drugs)

Hon. Stanley Ronald
Basford

J. F. Grandy
D. H. W. Henry, Q.C.
R. M. Davidson
F. N. MacLeod

Dr. R. A. Chapman
M. G. Allmark

FASCICULE BILINGUE OFFICIEL

★ CHAMBRE DES COMMUNES

Première session de la

vingt-huitième législature, 1968-1969

COMITÉ PERMANENT

DE LA

**SANTÉ, DU BIEN-ÊTRE SOCIAL
ET DES AFFAIRES SOCIALES**

Président

PROCÈS-VERBAUX ET
TÉMOIGNAGES

LE MARDI 28 JANVIER 1969

Concernant

Le Bill C-102, Loi modifiant la Loi sur les
brevets, la Loi sur les marques de com-
merce et la Loi des aliments et drogues.

A comparu:

Ministre de la Consommation
et des Corporations

*Du ministère de la Consommation
et des Corporations:*

Sous-ministre
Directeur des enquêtes sur les
coalitions
Directeur, Division des fusions
et monopoles
Division du contentieux (Loi
relative aux enquêtes sur les
coalitions)

*De la Direction des Aliments et
Drogues, ministère de la Santé
nationale et du Bien-être social:*

Directeur général
Directeur général adjoint
(Drogues)

L'Imprimeur de la Reine, Ottawa, 1969

The Queen's Printer, Ottawa, 1969

STANDING COMMITTEE ON
HEALTH, WELFARE AND SOCIAL
AFFAIRS

Chairman
Vice-Chairman

Forget,
Fortin,
Foster,
Gendron,
Godin,
Guilbault,

M. Gaston Isabelle
Mr. Steve Otto

and Messrs.
et Messieurs

Haidasz,
Howe,
Mrs. MacInnis (M^{me}),
McBride,
Monteith,
^a Ritchie,

COMITÉ PERMANENT DE
LA SANTÉ, DU BIEN-ÊTRE SOCIAL
ET DES AFFAIRES SOCIALES

Président
Vice-président

Robinson,
Rynard,
¹ Saltsman,
Thomas (Maisonneuve),
² Yewchuk,
Yanakis—20.

(Quorum 11)

La secrétaire du Comité:
Gabrielle Savard
Clerk of the Committee.

Pursuant to
S.O. 65(4) (b)

¹ Replaced Mr. Mather
on January 24.

² Replaced Mr. Ritchie
on January 28.

³ Replaced Mr. Knowles
(Norfolk-Haldimand)
on January 28.

Conformément à l'article
65(4) b) du Règlement

¹ Remplace M. Mather
le 24 janvier.

² Remplace M. Ritchie
le 28 janvier.

³ Remplace M. Knowles
(Norfolk-Haldimand)
le 28 janvier.

ORDER OF REFERENCE

HOUSE OF COMMONS,

TUESDAY, January 21, 1969.

Ordered,—That Bill C-102, An Act to amend the Patent Act, the Trade Marks Act and the Food and Drugs Act be referred to the Standing Committee on Health, Welfare and Social Affairs.

ATTEST:

ALISTAIR FRASER,
The Clerk of the House of Commons.

ORDRE DE RENVOI

CHAMBRE DES COMMUNES

Le MARDI 21 janvier 1969

Il est ordonné,—Que le bill C-102, Loi modifiant la Loi sur les brevets, la Loi sur les marques de commerce et la Loi des aliments et drogues, soit déféré au comité permanent de la santé, du bien-être social et des affaires sociales.

ATTESTÉ:

Le Greffier de la Chambre des communes
ALISTAIR FRASER

(Text)

MINUTES OF PROCEEDINGS

TUESDAY, January 28, 1969.

(12)

The Standing Committee on Health, Welfare and Social Affairs met this day at 3.40 o'clock p.m. The Chairman, Mr. Gaston Isabelle, presided.

Members present: Mrs. MacInnis (*Vancouver-Kingsway*), Messrs. Forget, Fortin, Foster, Gendron, Guilbault, Haidasz, Isabelle, McBride, Monteith, Otto, Robinson, Rynard, Saltsman, Thomas (*Maison-neuve*), Yanakis—(16).

Other Members present: Messrs. Emard, Knowles (*Norfolk-Halifax*), Richard and Rock.

In attendance: The Honorable Stanley Ronald Basford, Minister of Consumer and Corporate Affairs; *And From the Department of Consumer and Corporate Affairs:* Messrs. J. F. Grandy, Deputy Minister; D. H. W. Henry, Q.C., Director of Investigation and Research, Combines Investigation Act; R. M. Davidson, Director, Merger and Monopoly Division; and F. N. MacLeod, Legal Division, Combines Investigation Act. *From the Food and Drug Directorate, Department of National Health and Welfare:* Dr. R. A. Chapman, Director General; Mr. M. G. Allmark, Assistant Director General (Drugs).

The Committee proceeded to the consideration of Bill C-102, an Act to amend the Patent Act, the Trade Marks Act and the Food and Drugs Act.

The Chairman presented the Second Report of the Subcommittee on Agenda and Procedure as follows:

The Subcommittee recommends:

1. That the Committee hear the Minister of Consumer and Corporate Affairs today and request him to come again if the Committee so desires;

(Texte)

PROCÈS-VERBAUX

Le MARDI 28 janvier 1969.

(12)

Le comité permanent de la Santé, du Bien-être social et des Affaires sociales se réunit aujourd'hui à 3 h. 40 de l'après-midi, sous la présidence de M. Gaston Isabelle.

Présents: M^{me} MacInnis (*Vancouver-Kingsway*), MM. Forget, Fortin, Foster, Gendron, Guilbault, Haidasz, Isabelle, McBride, Monteith, Otto, Robinson, Rynard, Saltsman, Thomas (*Maison-neuve*), Yanakis (16).

Autres députés présents: MM. Emard, Knowles (*Norfolk-Halifax*), Richard et Rock.

Aussi présents: L'hon. Ronald Stanley Basford, Ministre de la Consommation et des Corporations; et du Ministère de la Consommation et des Corporations: MM. J. F. Grandy, sous-ministre; D. H. W. Henry, Q.C., directeur des enquêtes sur les coalitions; R. M. Davidson, directeur, division des fusions et monopoles; et F. N. McLeod, division du contentieux (Loi relative aux enquêtes sur les coalitions). De la Direction des Aliments et Drogues, Ministère de la Santé Nationale et du Bien-être social: D^r R. A. Chapman, directeur général; M. M. G. Allmark, directeur général adjoint (Drogues).

Le Comité entreprend l'étude du Bill C-102, Loi modifiant la Loi sur les brevets, la Loi sur les marques de commerce et la Loi des aliments et drogues.

Le président présente le Deuxième Rapport du sous-comité du programme et de la procédure comme suit:

1. Que le Comité entende aujourd'hui l'exposé du Ministre de la Consommation et des Corporations, et le prie de revenir devant lui au besoin;

2. That the Committee meet at 11.00 o'clock a.m. on Thursday;
3. That no new witnesses be called, because the subject was fully covered in previous sessions; and unless good and valid arguments are given that there is brand new evidence, the Committee should not hear any new witnesses.

On motion of Mr. Otto, seconded by Mr. Robinson, the Second Report of the Subcommittee was adopted.

The Chairman called Clause 1 of the Bill.

The Minister of Consumer and Corporate Affairs read a statement and was questioned thereon; Mr. Henry supplied information about percentage of Canadian firms in the pharmaceutical industry.

The questioning continuing, the Committee adjourned to 8.00 p.m. this evening.

EVENING SITTING (13)

The Committee reconvened at 8.10 o'clock p.m. The Chairman, Mr. Gaston Isabelle, presided.

Members present: Mrs. MacInnis (*Vancouver-Kingsway*), Messrs. Forget, Foster, Gendron, Guilbault, Haidasz, Isabelle, McBride, Monteith, Ritchie, Robinson, Rynard, Saltsman, Thomas (*Maison-neuve*), Yanakis—(15).

Other Members present: Messrs. Emard, Knowles (*Norfolk-Halldimand*) and Rock.

In attendance: Same as at afternoon's sitting.

The Committee resumed consideration of Bill C-102, An Act to amend the Patent Act, the Trade Marks Act and the Food and Drugs Act.

The Members resumed questioning of the Minister; Dr. Chapman answered questions respecting the Food and Drug Directorate.

At 10.10 o'clock p.m. the Committee adjourned to 11.00 o'clock a.m. Thursday, January 30.

Gabrielle Savard,
Clerk of the Committee.

2. Que le Comité se réunisse à 11 heures du matin jeudi;
3. Qu'aucun nouveau témoin ne soit entendu, vu que la question traitée dans le bill a été discutée à fond lors de sessions précédentes, à moins qu'il ne soit établi hors de tout doute que des éléments entièrement nouveaux pourraient être apportés.

Sur la proposition de M. Otto, le Deuxième Rapport du sous-comité est adopté.

L'article 1 du Bill est appelé.

Le Ministre de la Consommation et des Corporations lit un exposé et il est interrogé. M. Henry répond aux questions qui ont trait au pourcentage des compagnies canadiennes dans l'industrie pharmaceutique.

L'interrogatoire se poursuivant, le Comité s'ajourne à 8 heures ce soir.

SÉANCE DU SOIR (13)

Le Comité se réunit de nouveau à 8 h. 10 du soir, sous la présidence de M. Gaston Isabelle.

Présents: M^{me} MacInnis (*Vancouver-Kingsway*), MM. Forget, Foster, Gendron, Guilbault, Haidasz, Isabelle, McBride, Monteith, Ritchie, Robinson, Rynard, Saltsman, Thomas (*Maison-neuve*), Yanakis (15).

Autres députés présents: MM. Émard, Knowles (*Norfolk-Halldimand*) et Rock.

Aussi présents: Les mêmes qu'à la séance de l'après-midi.

Le Comité reprend l'étude du Bill C-102, Loi modifiant la Loi sur les brevets, la Loi sur les marques de commerce et la Loi des aliments et drogues.

Les membres du Comité interrogent de nouveau le ministre. Le Docteur Chapman répond aux questions relevant de la Direction des Aliments et Drogues.

A 10 h. 10 du soir le Comité s'ajourne à 11 heures du matin le jeudi 30 janvier.

La secrétaire du Comité,
Gabrielle Savard.

[Text]

EVIDENCE

(Recorded by Electronic Apparatus)

Tuesday, January 28, 1969

• 1539

The Chairman: Mrs. MacInnis and gentlemen, I now see a quorum. First of all I would like to inform the Committee that starting today the Minutes of Proceedings and Evidence will be printed in a bilingual form, as is being done for other committees.

We are now printing 750 copies in English and 350 copies in French, 1,100 all together, and this number should be sufficient for the bilingual edition.

• 1540

The Sub-Committee on Agenda and Procedure met today and has agreed to recommend as follows: first, that the Committee hear the Minister of Consumer and Corporate Affairs today and request him to come again if the Committee so desires; secondly, that the Committee meet at 11.00 o'clock on Thursday; thirdly, that no new witnesses be called because the subject was fully covered in previous sessions, and unless good and valid arguments are given that there is brand-new evidence, the Committee should not hear any new witnesses.

Mr. Rynard: Mr. Chairman, I intend to bring up that there is reason to hear new witnesses at a later date.

The Chairman: Thank you, sir.

Mr. Rock: So do I, although I am not a member of the Committee.

The Chairman: This having been said, later on you could bring along your presentations. We would like to have a motion for concurrence on the report of the sub-committee.

Mr. Otto: I so move.

The Chairman: We do not need a seconder. I have agreed that the second report of the sub-committee be adopted.

Mr. Rock: How can you adopt that, Mr. Chairman, when there are members here who have said that they want to bring up the subject of new witnesses?

The Chairman: Yes.

[Interpretation]

TÉMOIGNAGES

(Enregistrement électronique)

[Interprétation]

Le président: Mesdames et messieurs, je vois que nous avons le quorum. Premièrement, je tiens à informer le comité qu'à partir d'aujourd'hui, le compte rendu des délibérations paraîtra en français et en anglais d'une façon juxtaposée comme pour les comptes rendus des autres comités. Nous imprimons actuellement 750 exemplaires en anglais et 350 en français, soit 1,100 au total. Je pense que ce nombre sera suffisant pour l'édition bilingue. Le sous-comité a recommandé que le comité entende le discours du ministre aujourd'hui et lui demande de revenir si le comité le désire. Ensuite, que le comité siège jeudi matin à onze heures. Troisièmement, qu'aucun nouveau témoin ne soit cité à comparaître car le sujet a été examiné à fond aux sessions antérieures. Voilà pourquoi nous avons décidé de ne pas convoquer d'autres témoins, à moins d'un fait absolument nouveau.

M. Rynard: Monsieur le président, j'entends prouver plus tard qu'il est nécessaire d'entendre d'autres témoins.

Le président: Merci.

M. Rock: J'aimerais le faire aussi même si je ne suis pas membre de ce comité.

Le président: Ceci étant dit, vous pourrez faire vos représentations plus tard. J'aimerais avoir une proposition d'adoption pour le rapport du sous-comité.

M. Otto: Je propose.

Le président: D'accord. Que ledit rapport du comité d'organisation soit adopté.

M. Rock: Comment pouvez-vous adopter cela monsieur le président, quand certains députés ici présents qui ont déclaré vouloir revenir sur le sujet des nouveaux témoins.

Le président: Oui.

[Text]

Mr. Rock: And you in advance, Mr. Chairman, have asked for the adoption. They should say they adopt, except that part until this is heard. This way, we have no right after that because it is adopted to hear any more new witnesses. How can we bring these arguments forward? On a point of order, I think that this is wrong.

The Chairman: If you had listened to what I have just said—I said “unless good and valid arguments are given that there is brand-new evidence.” So this argument will be taken into consideration and we will see what Dr. Rynard or you or Mr. Émard or anybody else has to bring forward and we will submit it to the sub-committee, and the sub-committee will decide what to do and will refer it back to the Committee.

Mr. Rynard: Mr. Chairman, I want to put on the record now that we have never heard anything from industry and that we have never heard anything on the question of counterfeit drugs, so that this could not be complete. And I object to this steering committee bringing this in and saying there is nothing new to be heard. You have never heard from either of those two points, just two points that I can only suggest now.

The Chairman: Are they suggestions?

Mr. Rynard: I would suggest that wherever we feel that it is necessary and that the field has not been covered or that there may be new evidence, witnesses be called. We never called anybody to prove clinical efficiency, Mr. Chairman, and this I think should be decided upon.

Mr. Otto: Mr. Chairman, on a point of order. The motion was put, it was carried. Surely we can hear the Minister now and if there are any more arguments, I am sure we will be pleased to hear them after we have heard the Minister and his Department.

Mr. Rynard: Providing that we come back to this after the Minister has spoken, I would be quite willing to agree to hear the Minister.

The Chairman: You will all have the opportunity of doing so.

Mr. Monteith: On Mr. Otto's point, I do not think, Mr. Chairman, that the motion was carried. It was put but we have objections from three people here. Dr. Rynard objected. I have no objection to hearing the Minister

[Interpretation]

M. Rock: Et vous, monsieur le président, vous avez demandé l'adoption. Il faudrait dire que l'adoption se fait à l'exception de ce sujet. De cette façon, nous n'avons pas de recours par après, puisqu'il a été adopté que l'on ne pourrait entendre de nouveaux témoins. Comment pourrions-nous revenir à ce sujet. Vis-à-vis du Règlement, il me semble que cette attitude est erronée.

Le président: Si vous aviez écouté ce que je viens tout juste de dire; j'ai dit qu'à moins que de bons arguments soient présentés en faveur d'une matière complètement nouvelle. Nous verrons alors si le docteur Rynard, ou vous, ou M. Émard, ou n'importe qui d'autre ont à nous proposer. Nous soumettrons alors le projet au sous-comité qui décidera si oui ou non, l'objet de cette proposition sera renvoyé au comité.

M. Rynard: Monsieur le président, j'aimerais qu'on note dans le compte rendu, que nous n'avons pas entendu de témoins de l'industrie pharmaceutique, et que nous n'avons pas eu de témoins en ce qui concerne la contrefaçon de médicaments, c'est donc loin d'être complet. Et je m'objecte à ce que ce sous-comité décide par lui-même qu'il n'y a rien de neuf à dire. Nous n'avons même pas eu de témoins sur les deux points auxquels je pense présentement.

Le président: A part votre objection, avez-vous quelque chose à proposer?

M. Rynard: Je dirais que lorsque nous en ressentirons le besoin, et que le sujet n'a pas encore été abordé, ou qu'il pourrait avoir une nouvelle preuve, nous demanderons à entendre des témoins. Nous n'avons pas encore entendu quiconque en ce qui concerne l'efficacité clinique, monsieur le président, et il me semble qu'on devrait en parler.

M. Otto: La motion a été proposée, elle est adoptée. Nous pouvons certainement écouter le discours du ministre. Si nous avons quelque chose à débattre nous pourrions le faire après avoir écouté le ministre et ses conseillers.

M. Rynard: A condition que nous puissions reprendre la question après le discours du ministre, je suis prêt à écouter le ministre.

Le président: Vous aurez toute la latitude de le faire.

M. Monteith: A propos de ce que M. Otto a dit, je ne pense pas que le rapport a été adopté. Il a été proposé, mais nous avons eu trois objections. Le docteur Rynard s'y opposait. Je ne m'oppose pas du tout à écouter le

[Texte]

now, as long as Dr. Rynard's objections are listened to later.

Mr. Saltsman: Mr. Chairman, may I ask a question? Have you received any communication from people who wish to appear before this Committee?

The Chairman: Only one to date.

Mr. Saltsman: Who was that from?

The Chairman: The PMAC.

Mr. Saltsman: They die hard.

The Chairman: Any other questions?

Mr. Rock: Mr. Chairman, I think it is fair then if the Minister—or possibly while the Minister is speaking there will be questions anyway and some of the arguments that we have maybe could be resolved right here.

The Chairman: Afterwards. Mrs. MacInnis and gentlemen, we have before us today Bill C-102, an Act to amend the Patent Act, the Trade Marks Act and the Food and Drugs Act, referred by the House on January 21.

We are now on Clause 1 of the Bill.

It is my pleasure to welcome once again the Honourable R. Basford, Minister of Consumer and Corporate Affairs, and the officials of his Department. I am sure that Mr. Basford will want to make a statement.

Hon. R. Basford (Minister of Consumer and Corporate Affairs): Mr. Chairman and honourable members, I appreciate the opportunity of coming before the Committee. I would like to introduce the officials I have with me. On my immediate right is Mr. D. H. W. Henry, the Director of Investigation and Research under the Combines Investigation Act; next to him, my Deputy Minister, Mr. J. Grandy. We have taken over two of the Committee chairs, occupied by Mr. R. M. Davidson and Mr. F. N. MacLeod, both of the Combines Investigations Branch. Not with me, but here observing, is Dr. Chapman, the Director General of the Food and Drug Directorate of the Department of National Health and Welfare and the Assistant Director General, Mr. Allmark.

I have what started out as a short statement, but has got a little longer, to make before we proceed with the examination of the Bill.

Mr. Chairman, I do not think it necessary for me to repeat at this time the lengthy state-

[Interprétation]

ministre maintenant, en autant que le docteur Rynard pourra revenir sur la question de ses objections plus tard.

M. Saltsman: Avez-vous reçu des demandes de personnes qui voudraient comparaître au comité?

Le président: Une personne seulement m'a fait part de son désir, jusqu'à aujourd'hui.

M. Saltsman: De qui?

Le président: De l'Association canadienne des fabricants de produits pharmaceutiques.

M. Saltsman: Ils ne renoncent pas facilement.

Le président: D'autres questions?

M. Rock: Monsieur le président, je pense qu'il serait utile, si le ministre, ou lorsque le ministre parlera, de pouvoir lui poser des questions qui pourraient être résolues immédiatement.

Le président: Après. Madame MacInnis messieurs, nous sommes saisis aujourd'hui du bill C-102 *Loi modifiant la Loi sur les brevets, la Loi sur les marques de commerce et la Loi des aliments et drogues*. Nous en sommes à l'article 1 du bill. J'ai le plaisir de souhaiter une fois de plus la bienvenue à l'honorable Ron Basford, Ministre de la Consommation et des Corporations, ainsi qu'aux fonctionnaires de son ministère. Je suis sûr que M. Basford tient à nous faire un exposé.

L'hon. R. Basford (ministre de la Consommation et des Corporations): Monsieur le président, honorables membres, je suis très heureux de venir faire un exposé au comité. Je tiens à vous présenter mes collaborateurs. À ma droite se trouve M. D. H. W. Henry, directeur du Bureau de l'administration des enquêtes sur les coalitions, et, à côté de lui M. J. Grandy, mon sous-ministre. M. R. M. Davidson et M. F. N. Macleod, de cette même division, occupent les sièges du comité. Le docteur Chapman, directeur général de la Division des aliments et drogues du ministère de la Santé nationale et du Bien-être social et le sous-directeur adjoint, M. Allmark, sont ici présents comme observateurs. J'ai commencé à rédiger un court exposé, mais il s'est ralenti au fur et à mesure de sa rédaction, que je présenterais avant l'étude du projet de loi.

Cette observation vaut aussi pour les déclarations de mon collègue, le ministre de la

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ments I have already made on second reading with respect to Bill C-102, presently before this Committee, and I would think this would also apply to the statements made by my colleague the Minister of National Health and Welfare, whose address has also been made to the House of Commons by his Parliamentary Secretary. For purposes of ready reference, however, committee members will find my address on second reading of Bill C-102 in Hansard of October 17, 1968, commencing at page 1509 of Hansard, and the address made on behalf of my colleague, the Minister of Health and Welfare, by his Parliamentary Secretary may likewise be found in Hansard of Friday, January 17 of this year, commencing at page 4422.

However, there are some things I would like to bring to the attention of the Committee to clarify certain points raised during the debate on second reading. Most important of all perhaps, I would like to call to the attention of honourable members that safety—the safety and quality of any imported drugs, and even domestically manufactured drugs for that matter—is a concern of all members of the House and of the government regardless of their political persuasion and is a matter entirely within the competence of the Food and Drug Directorate.

The Commissioner of Patents, who issues compulsory licences under the Bill, as in the past—indeed, since 1923—has never been entrusted with safety requirements for drugs manufactured under compulsory licences granted by him. I cannot make this too clear. Under the terms of this Bill the Commissioner grants, almost as a matter of right, a compulsory licence to an applicant (unless, of course, he sees good reason to the contrary) but that licence will not allow the applicant for the compulsory licence to import, to manufacture or to sell the drug until he has satisfied the requirements established from time to time under the Food and Drugs Act and the Regulation.

For the Commissioner of Patents to concern himself with safety and quality of drugs would be an assumption going far beyond and outside his competence. The Food and Drug Directorate which, as hon. members will remember, has received plaudits from every side of the House during the debate on this Bill and its predecessor C-190, is the only federal authority concerned with and competent to deal with the safety of Canadians in these matters; and consequently I could remind the honourable members of this Committee to keep these two aspects in mind when considering this Bill—the one aspect which deals with compulsory licences to

[Interpretation]

Santé et du Bien-être qui s'est également adressé à la Chambre des communes par l'entremise de son secrétaire parlementaire. Afin qu'on puisse plus facilement relire mon exposé, je signale aux membres du Comité qu'on le trouve au Hansard du 17 octobre 1968 à partir de la page 1509. L'exposé de mon collègue, le ministre de la Santé figure au Hansard du vendredi, 17 janvier à la page 4422.

Il y a néanmoins certains points que je tiens à signaler au Comité afin de tirer au clair certaines questions évoquées au cours du débat lors de la deuxième lecture. Ce qui importe avant tout, c'est de rappeler aux députés que la sécurité et la qualité des produits pharmaceutiques importés, voire des produits pharmaceutiques fabriqués au Canada, doivent préoccuper tous les députés, sans égard à leur étiquette politique. C'est, d'ailleurs, une question qui ressortit entièrement à la compétence de la Direction des aliments et drogues.

Le Commissaire aux brevets, qui délivre les permis obligatoires aux termes de la Loi, comme c'est le cas, du reste, depuis 1923, n'a jamais eu à veiller à la sécurité des produits pharmaceutiques préparés en vertu des permis obligatoires qu'il délivre. Je tiens à ce que la chose soit parfaitement claire. Aux termes du projet de loi, le Commissaire délivre, pratiquement de plein droit, un permis obligatoire au requérant à moins, cela va de soi, qu'il ait de bonnes raisons de ne pas le faire. Mais le permis en question n'autorise nullement le requérant à importer, fabriquer ou vendre le produit avant d'avoir satisfait aux exigences de la *Loi sur les aliments et drogues* et des règlements.

Si le Commissaire allait se préoccuper de la sécurité et de la qualité de ces produits, il s'engagerait dans un domaine qui dépasse ses compétences. La Direction des aliments et drogues qui, l'on s'en souviendra, s'est attiré les félicitations des députés de tous les côtés de la Chambre au cours du débat sur le présent bill ou sur le bill C-190 qui l'avait précédé, est l'unique autorité fédérale qui s'intéresse à la sécurité des Canadiens à cet égard, et qui a la compétence voulue. En conséquence, je rappelle aux honorables députés de garder sans cesse présentes à l'esprit ces deux considérations durant l'examen du bill. D'abord que la question de la délivrance de

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manufacture or import patented prescription drugs in any form, and which is solely a matter for the Commissioner of Patents; and the safety and quality of such drugs, which is strictly a matter of concern for the Food and Drug Directorate.

Mr. Chairman, a word of explanation about the patent and trade mark system may be of assistance to the hon. members, particularly those who did not sit on the Harley Committee and are new members to this Parliament and this Committee.

The owner of a drug patent has, by statute, the exclusive right for 17 years from the issue of the patent to make, use or sell the invention which is patented. The statute gives him a complete monopoly. Without the permission of the patent owner another person is not at liberty to import, make, use or sell a drug resulting from the invention without subjecting himself to a private action for damages. There are two ways in which another person can get permission to use a patented product or process. The patent owner may voluntarily grant a licence to another person pursuant to an agreement or a contract between them.

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Or where the statute so provides, as in our present Patent Act, a person may apply to Commissioner of Patents to order that the patent owner grant what is called a compulsory licence to the applicant by which he may use the patent and the process. The Patent Act at present provides for a compulsory licence to manufacture a drug in Canada, and the bill will extend this facility to the importation of drugs.

I remind you that not all ideas, devices or processes to make products are patentable. For example, methods devised for doing business or proposed commercial schemes, scientific principles, methods of medical treatment for humans or animals and software material for programming computers are not patentable. Foods and medicines have, for many years (since 1923) been in a special patent position—the patent monopoly is limited by the principle of compulsory licences, and comparable restrictions on the patent system in the drug field are found in most countries of the world.

In some countries, indeed, the patent system does not provide for patents at all with respect to foods and drugs. Although one of the major public inquiries recommended the abolition of drug patents in Canada the government does not at present propose this

[Interprétation]

permis obligatoires en vue de la fabrication ou de l'importation de produits pharmaceutiques relève entièrement du Commissaire aux brevets. Et, ensuite, que la question de la qualité et de la sécurité ressortit entièrement à la Direction des aliments et drogues.

Un mot d'explication, monsieur le président, sur le régime des brevets et des marques de commerce. La chose pourrait être utile aux membres du Comité qui n'ont pas siégé sur le Comité Harley ou qui en sont à leur première expérience parlementaire. Le propriétaire d'un brevet sur un produit pharmaceutique, jouit, aux termes de la Loi, du droit exclusif de fabriquer, d'utiliser ou de vendre le produit breveté pendant 17 ans à compter du jour de délivrance dudit brevet. La Loi lui cède un monopole absolu. Sans l'autorisation du propriétaire, personne n'est autorisé à importer, fabriquer, utiliser ou vendre un produit pharmaceutique dérivé de l'invention sous peine d'une action en dommages et intérêts. Mais une personne peut obtenir l'autorisation d'utiliser un produit breveté de deux façons. Le propriétaire du brevet peut, de son plein gré, délivrer un permis à cette autre personne aux termes d'un accord, ou d'un contrat, intervenu entre eux.

D'autre part, dans les cas prévus par la Loi, une personne peut présenter une requête au Commissaire aux Brevets afin que le propriétaire du brevet délivre au requérant un permis obligatoire. La présente Loi sur les Brevets prévoit la livraison d'un permis obligatoire pour la fabrication d'un produit pharmaceutique au Canada. L'objet du présent projet de loi est d'étendre cet avantage à l'importation de ces produits.

Il n'est pas possible de protéger d'un brevet toutes les idées, les appareils et les processus de production. C'est ainsi par exemple, que certaines méthodes commerciales, certains principes scientifiques, certaines thérapeutiques intéressant les hommes ou les animaux, certains modes de programmation des ordinateurs ne peuvent pas être brevetés. Depuis longtemps—depuis 1923 plus exactement—les aliments et les remèdes se trouvent dans une situation particulièrement avantageuse, en ce sens que le monopole des brevets est restreint par le principe des permis obligatoires. Ces restrictions se retrouvent dans la plupart des pays du monde.

Dans certains pays, il n'est pas possible de breveter ce qui a trait aux aliments ou aux produits pharmaceutiques. Bien que l'une des grandes commissions d'enquête ait recommandé l'abolition des brevets sur les produits pharmaceutiques dans notre pays, le gouver-

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course but rather has elected to preserve the patent system subject to the limitation of compulsory licensing, as recommended by the Special Committee of the House of Commons or recommended by the Harley Committee.

Likewise, the Trade Marks Act provides that the owner of a trade mark in Canada has the exclusive right to use the trade mark, which includes selling a product which bears it. The remedies we are applying to the Patent Act we are applying to the Trade Marks Act.

The patent and trade mark system by creating a private right leaves the enforcement and protection of the right to private lawsuits for infringement of the patent or trade mark. This places the Canadian owner of the patent or trade mark in the position of being able, if necessary by litigation, to prevent a person making, importing, using or selling the patented product or process.

We have had a system of compulsory licences with respect to foods and medicines, as I have said, since 1923. Some compulsory licences have been awarded under those provisions. The awarding and the terms of compulsory licences as determined by the Commissioner have been consistently fought in the Courts by patentees who, incidentally, have been largely unsuccessful; but not to my knowledge at least has the awarding of any such compulsory licences been detrimental in any measurable extent to the pharmaceutical manufacturer in Canada. Rather, the awarding of such compulsory licences to manufacture patented prescription drugs has in the past brought some less costly but safe and high quality drugs to Canadians.

In other words, the impact in the Canadian market of this compulsory licensing to manufacture has been limited. In some cases where only one or two licences have been issued, the licensees manufacturing in Canada have tended to price their products under the licences fairly close to the products of the Canadian patent owner in much the same way as a Canadian manufacturer of other products in a protected market tends to price products just below the landed cost of imports which must hurdle the tariff.

In other cases, drugs marketed at substantially lower prices by licensees are of no great concern to the patent owner, because they are produced by companies which are not well known and doctors are reluctant to prescribe

[Interpretation]

nement n'entend pas, pour l'instant, retenir cette solution, mais préfère maintenir le régime actuel de brevets sujets aux permis obligatoires, selon la recommandation du Comité spécial de la Chambre ou du Comité Harley.

La Loi sur les marques de commerce prévoit que le propriétaire d'une marque au Canada, bénéficie du droit exclusif sur ladite marque de commerce, y compris la vente des produits portant cette marque. Nous appliquons les mêmes amendements aux deux lois.

Le régime des brevets et marques de commerce, générateur d'un droit privé, est tel que l'application de la loi et la protection du droit d'intenter un procès, reste du domaine du droit privé. Le propriétaire du brevet ou de la marque de commerce se trouve donc avantagé. Il lui est loisible, au moyen d'un procès s'il y a lieu, d'empêcher quiconque de fabriquer, importer, utiliser ou vendre le produit visé par le brevet ou la marque de commerce.

Je disais que le régime des permis obligatoires existe chez nous depuis 1923. Quelques permis obligatoires ont été émis en vertu de ces dispositions. La délivrance de ces permis, et leurs conditions ainsi que le détermine le Commissaire, ont depuis toujours fait l'objet d'actions en justice intentées par les détenteurs des brevets. Disons en passant que la plupart de leurs appels n'ont pas été retenus. Mais, à ma connaissance, la délivrance de ces permis obligatoires n'a jamais sensiblement compromis la situation du fabricant canadien de produits pharmaceutiques. Au contraire, ces permis obligatoires permettant la fabrication de produits pharmaceutiques brevetés, vendus sur ordonnance, a mis à la disposition des Canadiens des remèdes à la fois moins dispendieux, sûrs et d'excellente qualité.

Autrement dit, l'effet sur le marché canadien de ce régime de délivrance obligatoire de permis n'a pas été considérable. Dans certains cas, là où seulement un ou deux permis ont été délivrés, les titulaires desdits permis, fabriquant au Canada le produit en question, ont eu tendance à pratiquer des prix assez voisins de ceux auxquels se vendent les produits des propriétaires du brevet canadien à peu près de la même façon que le fabricant canadien d'autres produits dans un marché protectionniste tend à pratiquer des prix justes, inférieurs à ceux des produits importés frappés d'un droit de douane.

Dans d'autres cas, les produits pharmaceutiques vendus sensiblement moins chers par le titulaire du permis ne préoccupent guère le propriétaire du brevet, en ce sens qu'ils sont fabriqués par des maisons peu connues et que

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their products. This situation could be expected to change drastically if some of the international companies sought compulsory licences or if doctors were given reason to have confidence in the lower-priced drugs. Perhaps most important, as the P.M.A.C. itself has pointed out, it has not proved economical in Canada even for the patent owners to manufacture in Canada the great bulk of the active ingredients in pharmaceutical products. Where it is not economical for the owners, it is not ordinarily to be expected that it would be economical for would-be licensees. Yet under existing law, patent owners can impose an absolute barrier against the importation by anyone else of all drugs covered by patents. It is this non-tariff barrier to competition with which this Bill is concerned.

By allowing compulsory licences to import drugs, competition from firms which will have to emphasize lower prices in order to find a place in the market will make it almost mandatory for the large drug firms to operate more efficiently and to cut down on what might well be unnecessary promotion of their products.

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Much has been said, Mr. Chairman, by those who fear a setback in the Canadian pharmaceutical industry as a result of this Bill. Even if that were so, which I doubt, there is no question that a large group of Canadian-owned small drug manufacturers might indeed be helped considerably through the passage of this Bill. As the Food and Drug Directorate proceeds with the information program for doctors through the distribution of its periodic bulletin, now in preparation, doctors and druggists will be provided with full information concerning the choice of drugs available and the range of prices applicable.

It is not the intention of the program to persuade doctors to substitute generic names for brand names but to encourage doctors, by presenting them with a choice in order that in selecting the medicine that they consider necessary for the patient, to take into account in a better informed way the alternative drugs available as well as their relative prices. I might add that the choice continues to be that of the doctor and the suggestion that was made in the House during the debate the other day on second reading that it is the government's intention to regulate the practice of medicine is clearly unwarranted and unfounded. Undoubtedly many physicians and pharmacists will be likely to prefer less

[Interprétation]

les médecins hésitent à les prescrire. Cette situation pourrait évoluer très rapidement si certaines grandes sociétés internationales allaient demander la délivrance de permis obligatoires et si les médecins avaient raison de faire confiance aux produits moins chers. Mais ce qui importe le plus, c'est que même le propriétaire du brevet n'a pas jusqu'ici jugé rentable la fabrication au Canada de la majeure partie des ingrédients actifs des produits pharmaceutiques. Si le propriétaire lui-même juge l'opération peu rentable, on ne peut guère s'attendre qu'elle le soit pour l'éventuel titulaire d'un permis. Et pourtant, aux termes de la loi actuelle, il est loisible au propriétaire du brevet d'opposer un obstacle infranchissable à l'importation par quiconque de tous les produits brevetés. C'est de cet obstacle non tarifaire à la concurrence que la présente loi se préoccupe.

En autorisant la délivrance de permis obligatoire visant l'importation de produits pharmaceutiques, la concurrence des sociétés qui auront à pratiquer des prix plus bas pour s'introduire sur le marché obligera presque les grandes sociétés pharmaceutiques à améliorer leur rendement ou à réduire, par exemple, la publicité inutile.

Ceux qui craignent un recul de l'industrie pharmaceutique au Canada consécutif à l'adoption de ce projet de loi ont déjà longuement exprimé leurs craintes à ce sujet. Mais même s'ils avaient raison, ce dont je doute, il n'est pas douteux que l'adoption du bill est de nature à aider énormément les petits fabricants canadiens de produits pharmaceutiques. Au fur et à mesure que le programme d'information de la Direction des aliments et drogues informera davantage les médecins et pharmaciens, par la diffusion du bulletin périodique actuellement en préparation, ils seront davantage renseignés sur les produits disponibles et les prix.

Il n'est pas dans les intentions des auteurs du programme de convaincre les médecins de substituer des noms génériques aux appellations particulières, mais, au contraire, en faisant connaître au médecin le choix dont il dispose en établissant son ordonnance, il pourra tenir mieux compte des caractéristiques des produits en cause et de leur prix. Ajoutons que le médecin reste libre de choisir. Prétendre, comme on l'a fait à la Chambre, à l'étape de la deuxième lecture, que le gouvernement aurait l'intention de réglementer la pratique de la médecine est une accusation gratuite. Il est certain qu'un grand nombre de médecins et de pharmaciens auront une préférence pour les produits pharmaceu-

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expensive drugs actually manufactured in Canada over their imported counterparts.

It should be borne in mind that the basic pharmaceutical chemicals are more readily available for importation than are the dosage forms under well-known brands because manufacturers of the latter are unlikely to encourage the export to Canada of such dosage forms in competition with those marketed by their affiliates in Canada. More important, the *ad valorem* tariff bears more heavily on the high priced dosage forms than on the low priced pharmaceutical chemicals. It is our belief that after the bill is enacted many of the smaller Canadian drug manufacturers will be able to import basic raw drug materials which they have been unable to import heretofore. These will be formulated in their Canadian plants into the final dosage form and will supply that part of the market that prefers the Canadian manufactured drug to the imported drug.

Bill C-102, as you are aware, is the result of the most important recommendation of the Harley Committee which, as you are also aware, was a special committee of this House formed from representatives of all parties. For those who are new members I need hardly add that this recommendation was unanimous. An analysis of the 24 recommendations of the Harley Committee is available to hon. members if they wish and I would be happy to discuss it.

I wish to turn now very briefly to the safety provisions which are in the Bill and which will be studied as the members of the Committee go through the clause by clause review. Before I do so, however, I wish again to attempt to clear up a misunderstanding, which through the persistent assertions of special interests, is in danger of being perpetuated. This is the suggestion that patented and trade marked (i.e., brand name) drugs are safe drugs and non-patented drugs or drugs not sold under well-known brand names are unsafe or at least suspect.

The patent and trade mark system, as I have explained, does nothing more than create or protect a property interest recognized in law in the patent or trade mark. What protects the public from hazards relating to safety and quality is the Food and Drug Regulations, the Food and Drug Directorate, and the skill and care of the manufacturer himself. A patented drug is not safe because it is patented; all drugs whether patented, trade marked or not will be safe according to the degree to which the manufacturer, whether in Canada or abroad, has complied with

[Interpretation]

tiques moins chers présentement fabriqués au Canada au détriment des produits importés correspondants. Il ne faut pas oublier que les éléments essentiels des produits pharmaceutiques s'importent plus facilement que les médicaments tout préparés et porteurs d'une appellation particulière. En effet, les fabricants de ces médicaments hésiteront vraisemblablement à favoriser l'exportation de ces médicaments au Canada où ils auront à concurrencer ceux qui y sont déjà fabriqués par leurs succursales. Ce qui importe plus encore c'est que le droit *ad valorem* frappe plus lourdement les médicaments tout préparés et chers, que les produits pharmaceutiques à bon marché. Nous avons l'impression qu'après l'adoption de la loi, il sera possible à un grand nombre de petits fabricants canadiens de produits pharmaceutiques d'importer les éléments pharmaceutiques qu'ils n'ont pu trouver jusqu'ici.

Vous n'ignorez pas que le bill C-102 est la résultante de la recommandation principale du comité Harley, qui était, comme vous le savez, un comité spécial de la Chambre groupant des représentants de tous les partis. Inutile de dire que la recommandation était unanime. Les députés ont une liste des recommandations de ce Comité à leur disposition s'ils le désirent.

Un mot maintenant des dispositions du projet de loi relatives à la sécurité que les membres du Comité seront appelés à examiner dans leur étude article par article. Avant de le faire, qu'il me soit une fois de plus permis de dissiper un malentendu qui risque de se propager par suite des déclarations répétées de certains intérêts particuliers. On a dit que les produits pharmaceutiques brevetés et revêtus d'une marque de commerce sont sûrs, alors que les produits pharmaceutiques non brevetés et ne portant aucune appellation connue ne le seraient pas, ou, tout au moins, seraient suspects.

Or j'ai déjà expliqué que le régime des brevets et des marques de commerce n'a pour effet que de créer ou de protéger un droit à la propriété que la loi consacre par le brevet ou la marque de commerce. Ce sont les règlements dits des aliments et drogues, la Direction des aliments et drogues ainsi que la compétence et la conscience du fabricant lui-même qui protègent le public contre ces risques. Un remède breveté n'est pas sûr pour autant. Tous les produits pharmaceutiques, qu'ils soient brevetés ou non, revêtus d'une marque de commerce ou non, seront sûrs

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the requirements of the Food and Drug Act and Regulations.

As to the program of safety and quality control, the Minister of National Health and Welfare has already informed the House in detail of the ability of his department, after the enactment of this bill, to deal effectively and responsibly with this aspect of the matter. The Committee may wish to have my colleague explain further the matters mentioned in his statement in the House. I will, however, refer you to the provisions in the bill which provide specifically for matters of safety and quality control.

The first provision is sub-clause 13 on page 4, whereby notices of an application for a compulsory licence or an interim licence must be given by the Commissioner of Patents to the Department of National Health and Welfare and possibly other departments. The main purpose of this is to allow the Food and Drug Directorate to become immediately aware of the application and to take any steps it deems necessary to prepare to scrutinize or control the importation of the drug under licence. It is conceivable that in important cases the department might wish to make a submission to the Commissioner which can be provided for in the regulations.

The second provision relating to the program of safety and quality control is to be found in subclause 16 on page 5 which is inserted out of an abundance of caution to make it clear that nothing in a licence or interim licence granted by the Commissioner of Patents shall be construed as conferring upon any person authority to do anything that is contrary to the requirements of the Food and Drug Act and Regulations. This provision was not in the former Bill C-190.

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The third provision relating to safety and quality control is in subclause 2 of Clause 49A on page 7, which permits the Minister of National Health and Welfare to control a situation, if it should develop, where a trade-marked drug imported into Canada differs from a Canadian drug similarly trade marked and therefore liable to confusion where the difference in composition between the two is such as to be likely to result in a hazard to health. Such a situation has not to my knowledge been brought to our attention in any significant actual case, but as we would not wish such a possibility to occur we have

[Interprétation]

dans la mesure où le fabricant, au Canada ou à l'étranger, se sera conformé aux exigences de la *Loi sur les aliments et drogues*, et des règlements.

Quant au programme de la sécurité et de la vérification de la qualité, le ministre de la Santé nationale et du Bien-être social a informé la Chambre en détail de la capacité de son ministère à se saisir efficacement et sérieusement de cet aspect de la question. Le Comité voudra peut-être entendre mon collègue lui donner plus de précisions sur les questions déjà évoquées à la Chambre. Je vous signale en tout cas les dispositions du bill qui touchent particulièrement ces aspects de la question, soit la sécurité et la vérification de la qualité.

La première disposition de ce genre est le paragraphe 13 de la page 4 où il enjoint le Commissaire au brevet d'avertir le ministère de la Santé nationale et du Bien-être social et d'autres ministères, s'il y a lieu, lorsqu'il reçoit une demande pour un permis obligatoire ou un permis intérimaire. Le but essentiel de cette mesure est de mettre la Direction des aliments et drogues au courant de la demande afin qu'elle prenne les mesures qu'elle jugera nécessaires pour examiner de près ou contrôler l'importation du produit en cause. Il est concevable que dans certains cas importants, le ministère veuille faire des représentations auprès du Commissaire comme comme l'y autorise le règlement.

La deuxième disposition relative à la sécurité et à la vérification de la qualité se trouve au paragraphe 16 page 6. Il s'agit là en somme d'un excès de prudence. On a tenu à bien préciser que rien dans un permis ordinaire ou un permis provisoire délivré par le Commissaire au brevet ne saurait conférer à qui que ce soit l'autorisation de passer outre aux exigences de la *Loi sur les aliments et drogues* ou des règlements. Cette disposition ne paraissait pas au bill C-190.

La troisième disposition relative à la sécurité et la vérification de la qualité se trouve au paragraphe 2 de l'article 49A, à la page 7. Le ministre de la Santé nationale y est habilité, s'il le juge à propos, à intervenir dans les cas où un produit pharmaceutique importé au Canada diffère d'un produit pharmaceutique canadien porteur de la même marque de commerce, ce qui pourrait éventuellement donner lieu à confusion si la différence de composition entre les deux produits constitue un risque pour la santé.

Aucune situation de ce genre ne nous a été signalée,—aucun cas véritablement important

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placed this additional safeguard in the bill and this again differs from Bill C-190.

The fourth provision relating to safety and quality control is the new Clause 5 on page 8 which has been added since Bill C-190 was before the House. To put the matter shortly this will amend the Food and Drugs Act so as to give the Governor in Council power to make regulations which will be administered by the Food and Drug Directorate regulating or prohibiting the import of drugs into Canada and the distribution and sale of those drugs in Canada.

These regulations may be such as are deemed necessary for the protection of the public in relation to the safety and quality of any imported drugs. The intention is to place beyond doubt, Mr. Chairman, if this were needed, that the Food and Drug Directorate has complete and flexible control, through their regulations, over all imported drugs, including of course drugs imported by the established companies.

I wish to emphasize, in conclusion, Mr. Chairman, that the passage of this Bill does not mean that a miracle will result and that immediately drug prices will come down. We do expect that more competitive conditions will immediately be created in the market at the pharmaceutical manufacturer's level. There are, or were, I need hardly remind you, five points to the government program to reduce drug prices. This Bill is one of them. I discussed these at length in my address to the House on second reading, and I mention them only briefly here. First was the removal of the sales tax on prescription drugs, the reduction of customs duty on these products from 20 per cent to 15 per cent and the narrowing of the application of dumping duty to drug imports.

Secondly, as I mentioned, there is the introduction of this Bill. Thirdly was the development of a drug information service to doctors, a recommendation of the Harley Committee, and which is now or which bulletin is now being proceeded with by the Food and Drug Directorate.

The fourth step in the over-all program was the Pharmaceutical Industry Assistance Program known as PIDA and which is now operating by granting loans to small Canadian drug firms to strengthen and improve the efficiency of that sector of the pharmaceutical

[Interpretation]

s'entend—mais pour éviter ce risque nous avons inscrit cette précaution dans notre texte qui diffère en cela du Bill C-190.

La quatrième disposition relative à la sécurité et au contrôle de la qualité se trouve au nouvel article 5, à la page 8, article qui ne figurerait pas du tout dans le Bill C-190. Pour ne pas prolonger outre mesure mon explication disons que cela modifiera la loi sur les aliments et drogues de manière à habiliter le Gouverneur en conseil à édicter des règlements dont l'application sera confiée à la Direction des aliments et drogues. Aux termes de ces règlements sera réglementée ou interdite l'importation au Canada de produits pharmaceutiques et leur distribution ou leur vente dans notre pays.

On estime ce règlement en tant que tel indispensable à la protection du public en ce qui concerne la qualité ou la sécurité des produits pharmaceutiques importés. Le but est d'établir de façon absolument claire que la Direction des aliments et drogues pourra édicter des règlements de manière à réglementer d'une façon totale et souple les produits pharmaceutiques importés.

Qu'on me permette de signaler que l'adoption de ce bill ne sera pas suivie d'un miracle et de la réduction immédiate du coût des médicaments. Nous nous attendons toutefois à ce qu'il y ait plus de concurrence au niveau des manufacturiers de produits pharmaceutiques. Le programme du gouvernement en vue de la réduction du prix des médicaments comporte cinq points. Ce bill en est un. Puisque j'ai déjà mentionné ces cinq points et que j'en ai déjà discuté en Chambre, permettez que je vous les rappelle brièvement.

Tout d'abord, la suppression de la taxe de vente sur les aliments pharmaceutiques et l'allègement des droits de dumping sur les produits importés.

En deuxième, la présentation de ce bill.

Troisièmement, la mise au point d'un service d'information sur les drogues destiné aux médecins. Un bulletin est maintenant publié régulièrement par la Direction des aliments et drogues.

Quatrièmement, le programme d'assistance à l'industrie pharmaceutique, qui est maintenant en vigueur. Des prêts sont accordés aux petites sociétés canadiennes pour renforcer ce secteur de l'industrie pharmaceutique qui fabrique et vend des produits à meilleur prix.

[Texte]

industry which manufactures and sells prescription drugs at lower prices. The fifth and final step in this program involves discussions with the provinces designed to tackle the problem of the high cost of retail distribution of drugs, which of course is a provincial concern.

I conclude simply by saying, Mr. Chairman and members, that I am available to the Committee at all times that you wish to answer any questions. My officials are here with me and will be with me to clear up any doubts or any questions that the Committee has. Again, thank you very much.

The Chairman: Thank you, Mr. Minister. Are there any questions?

M. Émard: Pourrions-nous avoir une copie du mémoire que vient de lire le ministre?

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Mr. Basford: I am sorry I do not have a copy. I will have copies available by 8 o'clock. I had hoped to have a copy of this statement for distribution to members as I gave it as a convenience to members. I was revising it up until half an hour ago and it will be available in both languages at 8 o'clock.

M. Émard: Volez-vous bien nous donner la version révisée? Le ministre sera-t-il ici à huit heures, monsieur le président?

Mr. Basford: Yes, I will be here at 8 o'clock.

The Chairman: Mr. Émard, have you finished?

M. Émard: Non. Monsieur le président, je ne suis pas membre du Comité et je ne voudrais pas prendre la place des membres, mais je pense avoir certaines choses à dire. Volez-vous me donner la parole tout de suite?

Le président: Monsieur Émard, je vous remercie de votre grand intérêt pour l'industrie pharmaceutique. Vous avez la parole.

M. Émard: Comme vous l'avez mentionné, monsieur le président, j'ai des intérêts particuliers, parce que l'industrie pharmaceutique est située en grande partie dans la province de Québec. De plus, plusieurs fabricants de produits pharmaceutiques résident dans mon comté. C'est pourquoi, j'ai un intérêt tout particulier pour certains problèmes et certains articles de ce Bill.

[Interprétation]

Enfin, la tenue de discussions avec les provinces afin de résoudre le problème du coût élevé de la vente, au détail, des produits pharmaceutiques, un problème provincial.

Je suis maintenant à la disposition du Comité, monsieur le président, pour répondre à toutes les questions. Mes fonctionnaires sont ici avec moi et ils seront avec moi pour éclaircir toutes les questions qui pourraient intéresser le Comité. Je vous remercie beaucoup.

Le président: Merci beaucoup monsieur le ministre. Est-ce que vous avez des questions, messieurs?

Mr. Émard: Mr. Chairman, could we have a copy of the brief that the Minister just read?

M. Basford: Je suis désolé de ne pas avoir d'exemplaires, mais j'en aurai d'ici huit heures. J'aurais voulu pouvoir vous distribuer des exemplaires de ma déclaration, mais sa rédaction a été complétée il y a une demi-heure à peine. J'en aurai des copies, françaises et anglaises, à 8 heures.

Mr. Émard: Will you give us the revised version? Will the Minister be attending at 8 o'clock Mr. Chairman?

M. Basford: Oui, je serai là à huit heures.

Le président: Monsieur Émard, vous avez terminé?

Mr. Émard: Mr. Chairman I would like to state that I am not a Committee member and I do not want to take anybody's speaking time but I have some things to say. Could I have the floor now?

The Chairman: Thank you for your great interest in the pharmaceutical industry Mr. Émard and we will be pleased to hear you.

Mr. Émard: As you stated Mr. Chairman in my case I have a specific interest because a pharmaceutical industry is largely situated in Quebec and there are quite a few manufacturers based in my own county. This is the reason why I am interested in some problems and in some Clauses of the Bill.

[Text]

Un article me concerne plus particulièrement, celui des licences obligatoires qui seront accordées pour importation. Vous connaissez justement les implications économiques qui peuvent dériver de ces importations. Je voudrais faire une remarque au ministre qui, encore une fois, a évité de parler des répercussions économiques. J'ai certaines remarques que je voudrais faire plus tard. Présenterment, j'aimerais savoir du ministre pourquoi, dans son discours ou ailleurs, il hésite constamment de nous parler des implications économiques de ce Bill.

Mr. Basford: Well, Mr. Chairman, I dealt at some length with the economic impact of this Bill or the alleged economic impact of this Bill in my speech on second reading in the House. I would be happy to discuss it further here. Mr. Chairman, is it permissible to smoke in the Health and Welfare Committee?

Some hon. Members: No, no.

The Chairman: It is your privilege. Mr. Émard.

M. Émard: Monsieur le ministre, j'aimerais avoir votre avis. Quelle est votre attitude vis-à-vis de l'industrie pharmaceutique au Canada? Croyez-vous qu'elle puisse être sacrifiée?

Mr. Basford: I think it is important to maintain a pharmaceutical industry in Canada and I think after passage of this Bill we will have a pharmaceutical industry in Canada.

M. Émard: Selon vous, l'octroi de licences d'importation nuira-t-il à l'industrie manufacturière de produits pharmaceutiques?

M. Basford: No. I hope at least they will be operating in a more competitive market. I think that it will be valuable to the Canadian public that the manufacturing industry is more competitive then it has been. There will be, I hope, and I am frank in expressing this hope, some changes in the industry. Hopefully, there will be greater advantages for the small Canadian manufacturer, greater opportunities for him to develop his manufacturing and his research facilities.

That is the reason we have the PIDA Program in addition to the competitive conditions created by this Bill—additional government loans to help that manufacturer and that Canadian concern.

[Interpretation]

There is one Clause which is of particular concern to me—compulsory licences which will be granted for importation. You know, what the economic implications of these imports may be. This is a point I would like to put to the Minister, who, once again, has failed to discuss the economic consequences. There are considerations I want to voice later on but right now I would like the Minister to tell me why in his speech or on the various occasions on which he has had the opportunity to discuss this with us, he has constantly refrained from giving us an idea of the economic impact of this Bill?

M. Basford: Monsieur le président, j'ai parlé assez longuement des répercussions économiques ou des soit-disant répercussions économiques du bill, lors de sa deuxième lecture, en Chambre, mais je suis prêt à répéter cela si vous voulez.

Monsieur le président, je me demande s'il est permis de fumer au Comité de la Santé et du Bien-être Social?

Des voix: Non, non.

Le président: Vous en avez parfaitement le droit monsieur le ministre.

Mr. Émard: Mr. Minister, I would like to know what your opinion is, what is your attitude vis-a-vis the pharmaceutical industry in Canada? Do you think it may be sacrificed?

M. Basford: Je crois qu'il est important de disposer d'une industrie pharmaceutique au Canada et je pense qu'une fois que le bill sera adopté, nous aurons une industrie pharmaceutique au Canada.

Mr. Émard: Do you feel that the granting of import licence will hurt our drug manufacturing industry?

M. Basford: Non. J'espère, au moins, que nous aurons un marché plus concurrentiel, et je pense que cela sera très bon pour les Canadiens. L'industrie devra être plus concurrentielle qu'elle ne l'a été et j'espère, c'est un souhait tout à fait sincère, j'espère que l'industrie évoluera. J'espère que ce sera profitable pour le petit manufacturier qui aura ainsi plus de possibilités de mettre en place des installations de recherches et de production.

C'est pourquoi nous avons un programme d'assistance à l'industrie pharmaceutique en plus des conditions concurrentielles créées par ce bill. Il y a ces prêts du gouvernement qui pourront aider le fabricant canadien.

[Texte]

Mr. Émard: Comment pouvez-vous espérer cela, monsieur le ministre, quand vous savez pertinemment que l'importation de produits pharmaceutiques dans d'autres pays a pour effet de réduire le prix des produits pharmaceutiques? Pensez-vous que les petites compagnies pourront entrer en concurrence avec des importations dans des marchés européens ou ailleurs, là où les prix et les salaires sont tellement bas?

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Mr. Basford: Because we still have a 15 per cent tariff that will continue which is, in many instances, a tariff higher than most industries in Canada enjoy. There will continue to be a heavier tariff on dosage forms than on fine chemicals, which gives the Canadian manufacturer who wants to import the fine chemical and make it into dosage form an advantage over the importer of dosage forms.

The supplies of fine chemicals are easier for the Canadian manufacturer to obtain than the supplies of dosage forms from abroad and it is easier to meet the requirements of the Food and Drugs Act and Regulations in those circumstances. A good deal of protection will be provided by virtue of the new drug regulations of the Food and Drugs Act. The royalty payments will continue to the Canadian patent holder under this amendment. I could go on.

Mr. Émard: On ne partage pas la même opinion relativement aux effets de l'importation sur ces produits de différents pays. Etes-vous conscient du fait que, si ces importations réduisaient grandement la fabrication de produits pharmaceutiques au Canada, ce serait en grande partie la province de Québec qui serait affectée, là où le taux de chômage est, à l'heure actuelle, le plus élevé du Canada?

Mr. Basford: I just do not foresee the prospects that you do and, of course, the drug manufacturing industry in Canada located both in Toronto and Montreal, I might say, could well prevent any importation at all simply by reducing their prices and using the 20 per cent profit margin that they now have to prevent any importation. I hope that this will be the effect of the Bill.

Mr. Émard: Personnellement, je crois que, si l'importation telle que proposée réduit le prix des produits pharmaceutiques et nuit à l'industrie canadienne, les compagnies qui manufacturent des produits auront elles-mêmes des

[Interprétation]

Mr. Émard: How can you have such hopes, Mr. Minister, when you are well aware that the drug import, in other countries has the effect of lowering the price of such drugs, then how, do you believe that small firms will be able to compete with imports from European markets or other markets where prices and wages are very low indeed?

Mr. Basford: Eh bien, oui, parce que nous avons un droit de 15 p. 100 qui sera maintenu, un droit qui, dans de nombreux cas, est plus élevé que celui dont jouissent la plupart des industries canadiennes. Il y aura encore un droit plus élevé sur les médicaments déjà préparés que sur les produits chimiques eux-mêmes. C'est pourquoi, il sera plus intéressant pour le manufacturier canadien de se servir des produits chimiques pour fabriquer des médicaments plutôt que d'importer les médicaments finis.

Il est plus facile d'obtenir les produits chimiques que les médicaments finis, et, partant, plus facile pour le manufacturier d'appliquer les règlements de la Direction des aliments et drogues. Il y aura une large mesure de protection en raison des nouveaux règlements, sur les médicaments, de la Loi sur les aliments et drogues. Le détenteur du brevet canadien continuera de toucher ses droits.

Mr. Émard: We do not have the same opinions so far as concerns the impact of the import from these various products from foreign countries, but are you aware of the fact that in case these imports would reduce to a large extent the manufacturing of drugs here in Canada, then it would be the Province of Quebec who would be most affected and this is the province in which there is the highest rate of unemployment in Canada?

Mr. Basford: Je ne pense absolument pas, je ne vois pas l'avenir de la même façon que vous. L'industrie des produits pharmaceutiques au Canada se trouve aussi bien à Toronto qu'à Montréal et elle pourrait empêcher les importations simplement en réduisant ses prix et en se servant de la marge de profit de 20 p. 100 pour éviter les importations. J'espère que le bill aura cet effet.

Mr. Émard: Personally I believe that what will happen will be that if we have imports—if imports lower the price of drugs and make it harder to manufacture them here, then companies, firms, industries which at present

[Text]

licences pour importer, au Canada, ce qui est déjà fabriqué ici. C'est pourquoi, je crains que l'industrie canadienne soit complètement sacrifiée.

Mr. Basford: As I say, that is not the conclusion we draw from the Bill, Mr. Émard. It is not the conclusion the Department of Industry draws either. The industry that you are referring to, which is now so much concerned about imports, I might point out, already imports 85 per cent of its fine chemicals.

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M. Émard: En parlant de conclusion, ne pourriez-vous pas avec l'aide d'experts académiques ou économiques de votre ministère ou d'autres ministères nous faire une projection économique des effets du Bill C-102 sur l'industrie? Actuellement, on a dit qu'il n'y a pas de danger pour l'industrie et que, d'un côté, les effets seront bons, et du côté de l'industrie manufacturière, les effets seront sûrement moins bons qu'on l'espère. Je voudrais avoir des données précises pour nous indiquer exactement ce qui arrivera.

Par exemple quand le ministre du Revenu national présente son budget, il vient ici avec des chiffres précis. Ne pourrions-nous pas avoir également dans votre Bill des données précises qui nous indiqueraient la route à suivre, et, dans quelques années, votre marge d'erreur?

Mr. Basford: It is impossible to make the precise sort of prediction that you are asking for, Mr. Émard. We are unable, and I think anyone else would be unable, whether he came from a university or not, to say that in this year there are so many employed, and next year there will be so many other people employed. That would be impossible under the existing legislation. Much of this relates to private decisions taken by the owners of the drug firms.

We do not know, even if there were no Bill C-102, what their investment is going to be next year or the year after that, so it would be impossible to make any sort of precise analysis or projection that you seem to want. It is also very difficult because we do not know precisely how the drug industry is going to react to this Bill. We have our expectations of how they will react. We hope that by the creation of more competitive conditions they will be reducing their prices and that they will be excluding, by such reduction, imports or a great bulk of imports, but we do not know. Some of them might not reduce their prices at all, and in that case

[Interpretation]

manufacture these products will have import licences for what used to be manufactured here. This is the reason why I believe we will sacrifice completely Canadian industry.

M. Basford: Comme je l'ai dit, ce n'est pas la conclusion que nous tirons du bill, monsieur Émard, ce n'est pas du tout la conclusion qu'en tire le ministère de l'Industrie. L'industrie dont vous parlez et qui est présentement si inquiète des importations, importe déjà 85 p. 100 des produits chimiques qu'elle utilise.

Mr. Émard: Well, speaking of conclusions, Mr. Minister, could you not with the help of experts, either university or economic experts from your Department or other departments give us an economic projection of the effects of Bill C-102 on industry? All we have now—it was mentioned that there was no hazard for industry that it would be good for industry on the one hand, but that the effects on the manufacturing industry will not be as good as is hoped? I would like to get definite technical data so that we can find out exactly what will happen.

When the Minister of National Revenue presents his budget he gives us definite figures. Could we not also have precise data in your bill so that we know what course to take and also, in a few years, your margin of error?

M. Basford: Il est impossible de faire des prédictions précises comme vous le demandez, monsieur Émard. Nous ne le pouvons pas et je pense que personne ne pourrait dire: «Cette année, il y a tant de salariés et, l'année prochaine, il y en aura tant de plus ou tant de moins.» Ce serait impossible d'après la loi actuelle. Il s'agit de décisions privées surtout, qui sont prises par les chefs d'industrie.

Même si le bill C-102 n'existait pas nous ne saurions pas quels seraient leurs placements, l'année prochaine ou les années ultérieures; il est donc difficile de faire une analyse précise comme celle que vous semblez désirer. C'est d'autant plus difficile que nous ne savons pas exactement comment l'industrie pharmaceutique réagira à ce bill. Nous avons certaines idées au sujet de leurs réactions. Nous espérons que s'il y a plus de concurrence, l'industrie réduira ses prix, et que les réductions, justement, limiteront les importations. Mais, nous ne le savons pas. Certains ne réduiront peut-être pas leurs prix, du tout.

[Texte]

someone else is going to start importing or someone else is going to start manufacturing.

But whether there is employment in Canada is really dependent on the drug firms themselves and how they react to this Bill. In our view there are ample grounds to believe that the pharmaceutical industry in Canada has a sufficient cushion in its profits and its promotional expenses to meet the competition that may be created by this Bill.

Mr. Émard: Jusqu'à un certain point. Mais, je suis surpris de voir, monsieur le ministre, que vous proposez une législation dont les effets économiques se feront grandement sentir d'une façon ou d'une autre sur l'industrie du pays. Par contre, vous dites que vous n'avez aucune preuve tangible de ce que vous avancez. Je dis que je suis surpris de constater que le présent bill aura sûrement des effets économiques, bons ou mauvais si on réussit à faire baisser les prix; mais, il y en aura certainement sur le chômage, la production pharmaceutique au pays, les laboratoires de recherches et plusieurs autres domaines.

Quant à votre législation, vous dites vous-même que vous n'avez aucune preuve tangible à fournir, à savoir si les effets qu'elle entraînera seront néfaste ou non.

Mr. Basford: We think that the Bill will create some restructuring in the industry. This should be helpful to the Canadian public, which is our principal and paramount concern. We do not think that employment is going to be affected in the terms that you suggest; we are creating a more competitive market.

I fully expect, and I am assured by some manufacturers that the Canadian industry will be able to meet that competition. Importation of finished drugs, for example, which will be allowed under the act, will occur only if Canadian firms engaged in the preparation of dosage forms are not prepared to compete. I suggest that they have a cushion which will allow them to compete.

Mr. Émard: Je voudrais vous faire remarquer, monsieur le ministre, que je suis, comme tout le monde, intéressé à ce que le prix des produits pharmaceutiques baisse, et, je compte bien que ce bill malgré ce que j'en pense, amènera un tel résultat.

Vous avez tout à l'heure parlé d'un programme en cinq points: le premier a trait à l'abolition de la taxe de 12 p. 100. Vous savez sans doute que cette taxe n'a eu aucun effet sur le prix des produits pharmaceutiques aux

[Interprétation]

Mais, l'emploi au Canada dépend essentiellement de l'industrie pharmaceutique et de ses réactions à ce bill. Cependant, nous avons tout lieu de croire que l'industrie pharmaceutique, au Canada, a des bénéfices suffisamment larges pour faire face à la concurrence que peut créer ce bill.

Mr. Émard: Up to a certain point, but Mr. Minister I am surprised to see you propose legislation whose economic effects will be very strong in one way or another on the industry of Canada. Then you tell us you have no tangible proof in support of your claim. What I say is that I am amazed to see that the present bill you are introducing here will have economic effects—either good ones or bad ones—if we lower prices but there will be certainly economic effects on unemployment in Canada, on research labs and so on and so forth.

You yourself say that you have no tangible proof to put forward to show that there will be desirable or undesirable effects.

L'hon. M. Basford: Nous pensons que le bill entraînera une certaine restructuration de l'industrie. Ceci devrait aider le public canadien, qui est notre principal sujet de préoccupation. Nous ne pensons pas que l'embauche sera affectée de la façon dont vous pensez. Certains fabricants m'ont assuré que l'industrie canadienne pourra faire face à la concurrence. L'importation, par exemple, des produits finis, qu'autorise la présente loi ne se produira que si les sociétés canadiennes qui préparent elles-mêmes leurs médicaments ne sont pas prêtes à faire face à la concurrence. Je crois que leurs marges bénéficiaires sont suffisantes pour leur permettre de faire face à la concurrence.

Mr. Émard: Mr. Minister, I would like to stress the fact that I am also interested like everybody else in having lower drug prices and I hope that the bill we have here, no matter what I think about it, will have such an effect. You mentioned a five-point program just now.

The first point in the program was the elimination of the 12 per cent tax. You surely know that a 12 per cent tax has no effect whatsoever on the drug price for consumers and that the federal government has lost

[Text]

consommateurs, et de ce fait, le gouvernement fédéral a perdu une vingtaine de millions de dollars. Alors, j'espère que la législation préconisée dans les autres points de votre programme n'entraînera pas de tels résultats.

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Mr. Basford: I am sorry. I might have misunderstood you, Mr. Émard, but I do not think I have ever been quoted as saying what you are now quoting me as saying. Our evidence is that the removal of the 12 per cent sales tax did have an effect on price levels that the manufacturers...

Mr. Émard: I did not say you. This is what I say.

Mr. Basford: Oh, I am sorry.

Mr. Émard: This is what we have found in the majority of cases.

Dans la plupart des cas, les produits pharmaceutiques sont restés aussi dispendieux qu'ils l'étaient avant.

Mr. Basford: We do not entirely agree with that, Mr. Émard. The information obtained by the Combines branch after removal of the sales tax which had its sources of information on this, indicated that generally speaking the removal of the sales tax had been passed on by the manufacturer in his price list.

I am inclined to agree with what I think your point is, that the result at the retail level is somewhat confused and is very difficult to determine because druggists have been changing, in many jurisdictions, their method of charging; therefore it is very difficult to determine at the retail level the precise impact of the removal of the sales tax. But the information we have is that it certainly was passed on by the manufacturers.

M. Émard: Peut-être me suis-je mal exprimé, monsieur le ministre, mais je suis entièrement d'accord avec vous quand vous dites que la taxe de 12 p. 100 a été passée du manufacturier au pharmacien. Mais ce que je dis, c'est que le prix des produits pharmaceutiques est resté le même pour le consommateur, je ne parle pas du transfert entre les manufacturiers et les distributeurs. D'après ce que nous avons entendu à la Chambre, le consommateur paie exactement le même prix, et parfois plus cher encore qu'avant l'imposition de la taxe de 12 p. 100.

Mr. Basford: The only way to assure that such price reductions are passed on is to maintain and to assure competitive conditions in the market, competitive conditions at the

[Interpretation]

about \$20 million by doing this. I hope the other points will be more successful.

L'hon. M. Basford: Je suis désolé, je ne vous ai peut-être pas bien compris, monsieur Émard, mais on ne m'a jamais cité comme ayant dit ce que vous dites maintenant, en prétendant me citer. D'après ce que nous avons pu voir la suppression de la taxe de vente de 20 p. 100 a eu une influence sur le niveau des prix.

M. Émard: Je n'ai pas dit «vous». C'est ce que je dis.

M. Basford: Je m'excuse.

M. Émard: C'est ce que nous avons constaté dans la majorité des cas.

In most cases drugs were just as expensive as they were before the removal of the tax.

L'hon. M. Basford: Nous ne sommes pas entièrement d'accord avec ce que vous dites, monsieur Émard. Les données obtenues après la suppression de la taxe de vente, par la division des coalitions, nous ont montré qu'en général la suppression de la taxe de vente a eu une répercussion dans les prix.

Les résultats au niveau du prix de détail sont assez confus. Il est difficile de savoir où on en est, car les pharmaciens ont, dans de nombreux cas, changé leur façon de procéder.

C'est pourquoi il est très difficile de déterminer, au niveau du détail, les répercussions exactes de la suppression de la taxe de vente. Mais, d'après toutes les données dont nous disposons, le fabricant a réduit ses prix.

Mr. Émard: Mr. Minister, maybe I did not voice my opinion properly. I agree with you when you say that the 12 per cent tax was passed on from the manufacturer to the druggist. What I say is that drug prices—I am sorry if I use Anglicisms—the cost of drugs has remained the same for the consumer. I am not talking about the transfer between manufacturers and distributors, I am talking about the consumer. According to what we heard in the House they pay exactly the same price and sometimes even a higher price than before the 12 per cent tax was removed.

L'hon. M. Basford: La seule façon de s'assurer qu'une telle réduction de prix est transmise consiste à assurer des conditions concurrentielles sur le marché, des conditions

[Texte]

manufacturing level and competitive conditions at the retail level. This we are determined to do, and this Bill is designed to create competitive conditions at the manufacturers' level.

As part of our drug program, we will be meeting with, consulting with and conferring with the provincial authorities to assure competition at the retail level. We will also, hopefully, as part of the information bulletin to doctors being prepared and which will be sent out by the Food and Drug Directorate, be making doctors more conscious of the price of drugs and consequently, that knowledge should have some reflection on the prescriptions that they are writing.

As I said, it is difficult for us, as it is for you, to determine the effect of the removal of the sales tax at the retail level. We can only assure that this, or similar reductions, are passed on by competitive conditions at all levels in the industry. Here we are concerned with competitive conditions at the manufacturing level.

M. Émard: Et ne croyez-vous, monsieur le ministre, que la distribution des produits pharmaceutiques aux consommateurs étant faite par des pharmaciens qui sont sous juridiction provinciale, que vous auriez dû avoir une entente avec les provinces, en même temps que vous présentiez le bill, afin que si les prix des produits pharmaceutiques baissent à l'origine, les consommateurs puissent en bénéficier, contrairement à ce qui est arrivé dans le cas de la taxe de 12 p. 100.

• 1625

Mr. Basford: I think these are quite different steps, Mr. Émard. There are certain things that we can do as a federal government, at our level of jurisdiction. We have acted quickly, in the parliamentary sense of that word, in introducing the Bill in the last Parliament. It takes much longer to deal with the provinces and arrange any sort of agreement with the provinces to take a concerted course of action, but in fairness to the provinces I want to say that their ministers of health and their premiers are very much concerned with the price of drugs and very eager to do at their level all that they can.

You have seen the action—details of which I am not yet clear on as I have not been informed—the announcement from the Province of Ontario that my Parliamentary Secretary spoke of in the House. If one goes back the Harley report one of the witnesses in very ardent support of this Bill was the Province of Alberta. We met with the provinces in a

[Interprétation]

concurrentielles aussi bien au niveau de la production qu'au niveau du détail, ce que nous sommes décidés à faire. Ce projet de loi tend à créer des conditions concurrentielles, au niveau du manufacturier.

Nous resterons en contact avec les autorités provinciales afin de nous assurer qu'il y aura de la concurrence au niveau du détaillant, et nous espérons également fournir tous les renseignements relatifs aux prix des médicaments dans le bulletin d'information destiné aux médecins et qui est publié par la Direction des aliments et drogues. Nous espérons que les médecins seront plus conscients des prix des médicaments et comme ils seront mieux informés, le changement devrait être visible au niveau de l'ordonnance.

Il nous est difficile, aussi difficile pour nous que pour vous, de déterminer l'effet de la suppression de la taxe de vente au niveau du détail. Nous espérons que ces réductions seront transmises à tous les niveaux de la vente depuis le fabricant jusqu'au détaillant.

Mr. Émard: Do you not agree that distribution of drugs to consumers depended on the druggists who are under provincial control? Should you not have had an agreement with the provinces when presented the bill that if drug prices are lowered at the manufacturers' level they should also cost less at the retail level so that we do not have the same problem that we had with the 12 per cent tax?

L'hon. M. Basford: Je crois qu'il s'agit de mesures assez différentes, monsieur Émard. Il y a certaines choses que nous pouvons faire. Nous avons agi rapidement, au sens parlementaire du mot, lorsque nous avons introduit le bill lors du dernier parlement. Il faut plus de temps pour discuter avec les provinces et agir, de concert avec elles, dans un sens donné. Mais en toute justice pour les provinces, je dois dire que les ministres de la Santé et les premiers ministres provinciaux s'intéressent beaucoup aux prix des médicaments et veulent faire, dans leur zone de compétence tout ce qu'ils peuvent.

Vous avez lu la déclaration de l'Ontario. On ne m'a pas informé du texte, mais le secrétaire parlementaire en a parlé à la Chambre. Si on revient au rapport Harley, l'un des plus ardents supporters de ce bill fut l'Alberta. Nous avons rencontré les représentants des provinces, en novembre, et nous leur avons exposé le programme fédéral. J'espère que

[Text]

federal-provincial meeting of officials in November and our program was outlined generally—at that time our federal program. I hope as a result of that discussion to get into more detailed discussions with the provincial governments.

I think if we are going to have lower drug prices in Canada—I am sorry my answer is so long—we at the federal level have to do all that we can. I hope, and I am quite sure that the provinces within their jurisdiction are determined to do what they can.

Le président: Merci, monsieur Émard. Je voudrais mentionner aux députés ici présents, qu'ils soient membres ou non, de tenter autant que possible de faire des questions précises et courtes, parce qu'ils auront l'occasion d'en poser d'autres.

Mr. Saltzman: Mr. Chairman, I appreciate your instructions to the Committee but I was wondering whether I might be permitted a few words in the way of a statement of our position on the Bill.

The Chairman: As long as it is not a speech, yes.

Mr. Saltzman: I would like first of all to say how useful the Minister's presence is to this Committee and to express my hope that the Minister will continue to stay with this Committee since many of the questions arising are of a general nature rather than of a technical nature and involve political answers rather than the answers that department officials are able to provide.

• 1630

Mr. Basford: My officials, too, are good politicians when they need to be.

Mr. Saltzman: Your officials are very good at protecting you, Mr. Basford, which is their job, but I do not think you need any protection.

I think we have heard some incredible arguments here this afternoon—arguments that say the drug companies have a right to continue the exploitation of Canadians and an argument that is essentially one of saying that the profits of the drug companies of Canada must be preserved at the cost of the consumer, despite the fact that these profits are more than twice the average of Canadian industry generally.

I would like to say something about the question of employment. The argument has been put that we are going to lose employment as a result of this legislation. I find this difficult to believe. I am rather inclined to believe that if drug prices come down in

[Interpretation]

nous pourrions entrer dans les détails lors de nos prochaines rencontres. Si nous désirons que baisse le prix des médicaments, nous devons faire tout ce que nous pouvons et je suis convaincu que les provinces, dans les zones de leur juridiction, feront tout ce qu'elles pourront.

The Chairman: Thank you, Mr. Émard. I should like to tell the members here both those on the Committee and otherwise to shorten their questions as far as possible so as to leave time for further questions.

M. Saltzman: Je respecte les instructions que vous avez données au Comité, monsieur le président, mais me serait-il permis de faire connaître notre position?

Le président: Si ce n'est pas un discours, oui.

M. Saltzman: D'abord, j'aimerais dire combien la présence du ministre est utile au comité, et exprimer l'espoir que le ministre demeurera avec nous parce que plusieurs des questions posées sont d'ordre général plutôt que technique et demandent des réponses politiques plutôt que les réponses que peuvent nous fournir les fonctionnaires du ministère.

M. Basford: Mes fonctionnaires sont, eux aussi, de bons politiciens, lorsqu'il le faut.

M. Saltzman: Vos fonctionnaires excellent lorsqu'il s'agit de vous protéger, M. Basford, et c'est là leur travail, mais vous n'avez pas besoin de protection. Je crois que nous avons entendu des arguments incroyables. Il y a des arguments selon lesquels les sociétés pharmaceutiques auraient le droit de continuer d'exploiter les Canadiens, et un autre qui se résume à dire que les profits des sociétés pharmaceutiques du Canada doivent être préservés aux dépens du consommateur, en dépit du fait que ces profits sont deux fois plus élevés que ceux généralement enregistrés dans l'industrie canadienne.

J'aimerais parler de l'emploi. Il a été déclaré que cette mesure entraînerait du chômage. Je trouve cela difficile à croire. Je crois plutôt que si les prix des produits pharmaceutiques baissent, l'emploi va augmenter. De plus, si les prix de nos produits pharmaceuti-

[Texte]

Canada employment in the industry will be increased. Not only that, but if our drug prices come down, for the first time we may have an opportunity of going into export markets that have been denied to us until the present because of the manner in which the industry has operated.

We are not really talking about an industry; we are talking of Canadian industry, we are talking about an industry which is dominated by international corporations whose interests lie as much outside the country as they do here. I, for one, welcome the opportunity of the development of a Canadian indigenous industry which I think this legislation will make possible.

Again the question of confidence, and I am glad the Minister pointed this out, depends on our Food and Drug Directorate, not on brand names. Mr. Chairman, we will make an effort to move an amendment calling for the abolition of all brand name drugs in Canada and for substitution of a different form of marketing because we think that the presence of brand names seriously interferes with the lowering of drug prices and amounts to an indirect type of monopoly exploitation. We think this is at the heart of the problem of the drug industry or the problem of lowering drug prices in this country. We hope to convince this Committee, Mr. Chairman, that that is the case.

We have had reasonable evidence that removing the tax does not really help the consumer that much. It is a fallacy to think that the way to lower prices is to take the tax off drugs. Certainly all that has done is to have shifted the tax burden from one group of citizens to another group of citizens. It has taken it out of one pocket and put it into another pocket. We could argue that drugs are not the place to collect the kind of revenue the government requires, but the point is that the government does require this revenue and to take the tax off drugs only means that we have to collect it in some other way, and usually from the same group of citizens in some other way.

So there is no real long-range hope of lowering drug prices by the expedient of removing whatever taxes exist on those drugs. The only real hope is to cut down the production costs, the unnecessary wasteful expenditures that exist in this industry.

Mr. Chairman, the Minister himself has pointed out that this is but a minor step, faced with the great problem...

Mr. Basford: I do not think I used that word.

[Interpretation]

ques baissent, nous aurons pour la première fois l'occasion de nous lancer sur le marché d'exportation, ce qui n'a pu se faire jusqu'à ce jour.

Nous ne parlons pas d'une industrie mais d'une industrie canadienne. Nous parlons d'une industrie dominée par des sociétés étrangères dont l'intérêt repose hors le Canada autant qu'ici. Personnellement, je vois d'un bon œil la mise sur pied d'une industrie indigène que cette mesure va peut-être rendre possible.

Notre confiance repose sur la Direction des aliments et drogues et non sur des marques commerciales connues. Nous essayerons de présenter un amendement pour abolir ces noms commerciaux donnés aux médicaments, au Canada et établir une autre méthode, parce que nous croyons que la méthode actuelle empêche la réduction des prix et devient une sorte de monopole.

Nous croyons que c'est le nœud du problème et nous espérons pouvoir persuader les membres du comité, monsieur le président.

Les témoignages entendus nous permettent de croire que le fait d'avoir supprimé la taxe n'a pas tellement aidé le consommateur. Il est faux de croire que pour réduire les prix, il faut éliminer la taxe sur les produits pharmaceutiques. Le fardeau des taxes est simplement passé d'un groupe de contribuables à un autre. L'argent a été pris dans les goussets d'une personne et versé dans ceux d'une autre. Il est possible que les produits pharmaceutiques ne soient pas tous désignés pour percevoir ces recettes, mais le fait est que le Gouvernement a besoin de ces recettes et si nous supprimons cette taxe il faudra la percevoir ailleurs.

Il n'y a donc pas d'espoir à long terme de baisser les prix en supprimant les taxes imposées sur les produits pharmaceutiques. Le seul espoir serait de réduire le coût de production, les dépenses d'exploitation inutilisées dans l'industrie.

Monsieur le président, le ministre lui-même a signalé que c'est une question de moindre importance, par rapport au problème...

L'hon. M. Basford: Je ne crois pas avoir utilisé ce terme.

[Text]

Mr. Saltsman: If I am taking it out of context, I apologize. I think you left that impression, though, Mr. Minister. You also pointed out that you did not expect miracles from this Bill and that you were hopeful that drug prices would come down.

I think that the Bill will help; there is no question about that. I think it is a step in the right direction, but I think that the doubts about great effectiveness are quite correct and that we really have to go beyond this Bill. One of the things that I think we have to consider is the establishment of a Crown corporation, at least to commence the distribution of drugs in Canada. This is a direct quotation from the Minister:

...if doctors were given reason to have confidence in the lower-priced drugs.

Some changes could take place. Doctors are not going to have confidence until some sort of assurance is placed on those drugs backed by the credibility of the Canadian Government. A small company may be the very best company in the world. It may be the most conscientious company in the world. It may be inspected by our Food and Drug administration, but because of the power of advertising in this country—the historic power of advertising—people have been taught to think that if it is not advertised, if it is not promoted, you cannot have confidence in it. This is one of the things we have to face up to. We have to find some way of establishing credibility for these small companies that you are encouraging into existence and which you are encouraging to manufacture some of these drugs. And I would respectfully suggest through you, Mr. Chairman, to the Minister, that he should seriously consider this proposal.

I was somewhat disturbed by the Minister's statement when he said: Whether there is employment in Canada depends on how the drug industry reacts to this Bill. Surely we are not dependent on the drug industry, on their decisions, for employment. We have a government that can make this decision. If the drug industry does not do its job, then the House of Commons should see that there is a Crown corporation that will do the job. We are not to tie our hands in dependence on the drug industry. And I would seriously recommend this for your attention.

• 1635

This is not socialism. All right, you may call it what you wish. Mr. Chairman, as you saw I was fully prepared to cease and desist

[Interpretation]

M. Saltsman: Je m'excuse, si je ne cite pas correctement, mais c'est l'impression que vous avez créée, monsieur le ministre. Vous avez également signalé que vous ne vous attendiez pas que le projet produirait des miracles et que vous espérez une baisse de prix des produits pharmaceutiques.

Je crois que la mesure constitue un pas dans la bonne direction mais je crois que nous doutons, à raison, de son efficacité et qu'il faudra aller plus loin. Il faut songer à établir une société de la Couronne au moins pour entreprendre la distribution des produits pharmaceutiques au Canada. Je cite ici le ministre:

«si les médecins avaient raison d'avoir confiance en des médicaments à meilleur marché...»

Nous pourrions nous attendre à un changement, mais les médecins n'auront pas confiance à moins que ces produits jouissent d'une certaine garantie et l'appui du gouvernement. Une petite entreprise a beau être la société la plus consciencieuse et la meilleure du monde et inspectée par notre Direction des aliments et drogues, mais à cause du pouvoir de la publicité au Canada, on tend à croire qu'un produit qui n'est pas bien annoncé, n'inspire pas confiance. Il faudra trouver moyen d'inspirer confiance en ces petites entreprises.

Je propose au ministre, en toute déférence pour vous, monsieur le président, qu'il songe sérieusement à la proposition que je viens de faire.

Je m'inquiète aussi de la déclaration du ministre quand il dit:

«que l'emploi au Canada dépend de la réaction de l'industrie pharmaceutique à la mesure législative»

Mais nous ne dépendons pas de l'industrie des produits pharmaceutiques pour créer des emplois. Le gouvernement prend ses propres décisions. Si l'industrie pharmaceutique ne fait pas son travail, la Chambre des communes verra à ce qu'une Société de la Couronne le fasse. Il ne faut pas avoir les mains liées par rapport à l'industrie pharmaceutique, et je recommanderais sérieusement cet aspect à votre attention.

Mais ce n'est pas du socialisme. Appelez-le comme vous voudrez. Monsieur le président, j'étais prêt à me taire jusqu'à ce que cette

[Texte]

until this question arose. I think because it has arisen I should say something on it. There is a gentleman in the House who yelled out "socialism" when we stated our position in the House. As I pointed out to the gentleman—

Mr. Otto: On a point of order, Mr. Chairman, I am very much interested in the remarks of Mr. Saltsman, but when we get onto the philosophy of socialism I am sure it is beyond the business of this Committee. May we continue on with other members, if Mr. Saltsman has finished his remarks?

Mr. Saltsman: I did not intend to be philosophical. I simply intended to demonstrate that the actions of the Commons did not look upon this as a philosophical question, because the person who cried out "socialism" was the same person, as were most of the members of the House of Commons, who had just voted a Crown corporation for fish marketing into existence less than 24 hours before.

I think it is not a question of socialism or free enterprise or any other name you want to put on it. Surely we are here to see that we do the very best we can for the consumers of this country. That is my only purpose. I am not here to propagate any doctrine. There are lots of other opportunities for that. I am here, as I assume every other honourable gentleman is here, to do whatever he can for the consumers.

The question I would like to put to you, Mr. Minister, after that rather involved preamble, is this: the Minister of National Health and Welfare has indicated his willingness to consider a Crown corporation for the distribution and, if necessary, for the manufacture of drugs. He stated this in a speech recently. Have you given any consideration to this problem, or do you have people within your Department who are examining this proposal?

Mr. Basford: I would like to say, relative to your question and your preamble, that I emphasize again that this Bill is part of a program it is an amendment to the Patent Act following the recommendations of the Hall Royal Commission, and one of some 24 recommendations of the Harley Committee. I have made it clear that we are doing other things. I have made it clear that we are determined to try to reduce the cost of prescription drugs. Therefore, without attaching any labels to what you have said, or any labels to what I have to say, I do not want to

[Interprétation]

question soit posée. Puisque la question a été posée je crois que je dois dire quelque chose. Un député à la Chambre s'est écrié «Socialisme» quand nous avons exposé notre attitude.

M. Otto: J'invoque le Règlement, monsieur le président. Je m'intéresse aux remarques de M. Saltsman, mais quand nous commençons à parler du socialisme, ça dépasse le mandat du présent comité, il me semble. Peut-on continuer, si M. Saltsman a terminé.

M. Saltsman: Je n'avais pas l'intention de parler de philosophie, je voulais tout simplement démontrer que la Chambre des communes n'a pas pris notre attitude du point de vue philosophique, parce que le monsieur qui s'est écrié «socialisme» venait de voter en faveur de l'adoption d'une mesure pour un office de commercialisation du poisson. Nous voulons simplement faire de notre mieux pour les consommateurs du pays.

Je ne suis pas ici pour répandre une doctrine quelconque, je suis ici, comme nous tous d'ailleurs, pour faire tout ce que nous pouvons pour les consommateurs.

Voici la question que je voudrais poser, monsieur le ministre, après ce préambule assez lourd. Le ministre de la Santé et du Bien-être a dit qu'il est prêt à songer à établir une société de la Couronne pour la production et la distribution des produits pharmaceutiques. Il l'a dit récemment. Avez-vous vraiment songé à ce problème? Avez-vous des fonctionnaires de votre ministère qui ont étudié cette question?

L'hon. M. Basford: En réponse à votre question et à votre préambule, je répète que cela fait parti d'un programme. C'est un amendement à la *Loi sur les brevets* à la suite des recommandations de la Commission d'enquête Hall et d'une des vingt-quatre recommandations du comité Harley.

J'ai dit très clairement que nous faisons autre chose. Nous voulons à tout prix réduire le coût des produits pharmaceutiques vendus sur ordonnance. Par conséquent, sans qualifier ce que vous avez dit ou ce que j'ai dit, je ne veux pas fermer la porte aux sug-

[Text]

foreclose any suggestions that may be put forward by any member as to how to solve the problem of the high cost of drugs in Canada.

But my immediate concern before this Committee is to get through the Committee, and through the Senate, an amendment to the Patent Act allowing greater use of compulsory licences.

The Chairman: Are there any other questions? Mr. Fortin.

M. Fortin: Merci, monsieur le président, j'essaierai, autant que possible, d'être bref. D'abord, monsieur le ministre, y a-t-il eu des consultations avec les membres de l'industrie pharmaceutique canadienne. La réponse du ministre à M. Émard m'a laissé dans l'esprit un doute. Il disait qu'il ne savait pas comment cette industrie canadienne réagirait au présent Bill, ce qui me fait me demander s'il y'a eu des consultations entre le Gouvernement et l'industrie canadienne lors de l'élaboration de ce Bill?

Mr. Basford: By what the translator is interpreting as Institute, I take it you mean the Pharmaceutical Manufacturers' Association of Canada, the association of drug manufacturers. Or are you referring to The Canadian Pharmaceutical Association, Inc., the association of the pharmacists?

• 1640

Le président: Le ministre désire savoir si votre interrogation porte sur la participation de l'industrie manufacturière aux consultations.

M. Fortin: C'est bien cela.

Mr. Basford: The proposals in this Bill result, as I am sure you know, Mr. Fortin, from the recommendations of three inquiries; the Restrictive Trade Practices Commission, the Hall Royal Commission, and the Harley Committee. Throughout the course of those hearings by the three commissions, the Manufacturers' Association expressed their views fully.

Since becoming Minister last July, I have met with representatives of the Pharmaceutical Manufacturers' Association of Canada and with the officers of a number of the firms. I felt that they had a right to come and see me as a Minister and we discussed the Bill. I made it very clear that I regarded this Bill as government policy and I expressed my determination to proceed with it. That, I suppose, is consultation.

We have discussed with representatives of the drug industry a number of different

[Interpretation]

gestions que les députés pourraient formuler sur la façon de réduire le prix élevé des produits pharmaceutiques au Canada.

Ce qui me préoccupe directement c'est de faire adopter par le comité, et par le sénat, un amendement de la *Loi sur les brevets* permettant d'utiliser davantage les permis obligatoires.

Le président: Monsieur Fortin.

Mr. Fortin: Thank you, Mr. Chairman. I shall try as much as possible to be brief. First of all, Mr. Minister, has there been any consultation with the members of the pharmaceutical industry of Canada? The Minister's answer to Mr. Émard has left me in doubt. He said that he did not know how the industry would react to the present bill, which makes me wonder whether there has been consultation between the Government and the Canadian industry about the drafting of this Bill.

M. Basford: Je crois que ce que le traducteur a appelé «institution» serait peut-être l'Association des fabricants de produits pharmaceutiques, ou songez-vous plutôt à l'Association canadienne des pharmaciens?

The Chairman: The Minister wishes to know whether your question referred to the participation of the manufacturing industry in the consultations.

Mr. Fortin: That's right.

M. Basford: Les propositions du bill sont les conséquences, vous le savez, j'en suis sûr, monsieur Fortin, de recommandations faites à la suite de trois enquêtes, l'enquête sur les pratiques commerciales restrictives, la Commission Hall et la Commission Harley. Au cours de ces séances, c'est-à-dire celles des trois Commissions, l'Association des fabricants a exprimé ses vues pleinement.

Depuis que je suis devenu ministre, en juillet dernier, j'ai rencontré les représentants de l'Association des fabricants de produits pharmaceutiques et les administrateurs d'un bon nombre de sociétés. Je crois qu'ils avaient le droit de venir me voir; nous avons discuté du bill et j'ai été très clair quant à la politique du Gouvernement et à ma décision d'aller de l'avant. Je crois que vous pourriez appeler cela de la consultation.

Nous avons discuté de divers aspects du bill avec des représentants de l'industrie phar-

[Texte]

aspects of the Bill. We will have to draw regulations under the act. I would expect my officials to consult with the industry in the drawing up of those regulations. That is what has happened so far.

The view I take, however, and I have made it very clear, is that any time the drug industry wants to come and see me, it is welcome to come. But my interests are not always the same as their interests, and I think they understand that. I hope that there are areas—and I said this in a speech in Vancouver—in which government and the industry can co-operate.

We hope to deal with the provinces; we hope to be concerned with what happens at the retail level; we hope to be able to change some of the practices at the retail level, and in doing so I think that the industry, which knows a good deal about the retail level, could provide assistance to me and to the government in making suggestions as to what should happen at the retail level.

• 1645

Mr. Fortin: Dans quelle mesure, monsieur le ministre, le Bill C-102 contribuera-t-il à abaisser le prix des médicaments pour les contribuables? Des prévisions économiques ont-elles été faites en ce sens par vos spécialistes?

Mr. Basford: From the drug industry itself, no, really; because their submission to me was that the Bill would ruin the drug industry. I am reminded that in the Harley Committee, an economist from the Province of Alberta suggested that this kind of measure would reduce prices by 50 per cent. We have avoided any such prediction because it is difficult to make such a prediction. So we have avoided it.

I have in front of me a quotation from the Harley Committee by Hoffmann-La Roche, one of the larger pharmaceutical companies which said that the mischief for Hoffmann-La Roche lies not so much in what business would be lost to copiers but to what happens to the price level as a result of their entry. We hope that it will have an effect on the price structure.

M. Fortin: J'ai aussi sous les yeux, un extrait du rapport Harley et dans ce dernier rapport du comité spécial de la Chambre des communes chargé d'étudier le coût et les prix des produits pharmaceutiques. On y affirme à la page 36, de l'édition française, sous le titre: *Chez le détaillant*, que selon la conclusion qui ressort du témoignage de l'As-

[Interprétation]

maceutique. Il faudra établir des règlements en vertu de la Loi. Je m'attends à ce que mes fonctionnaires consultent l'industrie. C'est ce qui s'est fait jusqu'à présent.

Si les représentants de cette industrie veulent venir me voir, je les recevrai très volontiers. Naturellement, mes intérêts ne sont pas toujours les leurs, mais je crois qu'ils le comprennent. J'espère, et je l'ai dit dans un discours à Vancouver, qu'il y a des domaines où le gouvernement et l'industrie peuvent collaborer.

Nous espérons pouvoir traiter avec les provinces, les détaillants, changer éventuellement certains règlements concernant les détaillants, la vente au détail, et ce faisant, je pense que l'industrie, qui s'y connaît, pourrait m'aider, aider le Gouvernement, en faisant des suggestions sur ce qui pourrait se faire.

Mr. Fortin: Mr. Minister, to what extent will Bill C-102 contribute to lower the price of drugs for the taxpayer? Have any economic forecasts been made concerning this by your experts?

M. Basford: L'industrie pharmaceutique, pas réellement. On me rappelle que dans la Commission Harley, un économiste de l'Alberta disait qu'une mesure semblable réduirait le prix de 50 p. 100. Nous avons évité de faire une prévision semblable, car c'est très difficile de prévoir les choses de façon aussi précise. Nous évitons de citer un chiffre.

J'ai sous les yeux un extrait du procès-verbal du rapport Harley, où les représentants de la compagnie Hoffmann-La Roche, une des plus grandes sociétés de produits pharmaceutiques, disent que ce qui nuit, ce n'est pas tellement ce que perd l'industrie, mais ce qui arrive au prix des produits. Nous espérons que tout cela aura un effet sur la structure des prix.

Mr. Fortin: I have also in hand an excerpt of the Harley Report. This report by the Special Committee of the House of Commons was entrusted with the study of the price and the cost of pharmaceutical products. On page 36 of the French version, it is stated under the heading "At the Retail Level", that according to the conclusion based on evidence presented

[Text]

sociation des Pharmaciens du Canada qui est représentative des organismes statutaires de pharmacies au Canada et de huit mille pharmaciens et plus qui y appartiennent, on affirme donc qu'il est devenu clair, au cours des délibérations, et je cite:

qu'un des principaux facteurs qui influe sur les prix des médicaments se retrouve au niveau du détail; et c'est probablement à ce niveau que le plus grand nombre de difficultés pourraient être soulevées si l'on tentait d'aviver la concurrence, en vue de faire diminuer les prix à la consommation.

Voilà une conclusion, monsieur le président, qui vient contredire complètement le discours du ministre, le présent Bill et les discours faits en Chambre des communes par les deux ministres intéressés lors des débats des 17 octobre et 17 janvier.

Le ministre pourrait-il m'expliquer comment il se fait que les spécialistes ne puissent s'entendre quant aux effets que pourrait apporter un projet de loi, visant à aviver la concurrence d'une certaine façon? Un profane comme moi et comme plusieurs membres de ce Comité, qui s'intéresse au bien du consommateur, est perdu, monsieur le président, devant les deux conclusions auxquelles on en est arrivé. Le ministre pourrait-il commenter l'opposition entre ces deux conclusions différentes?

Mr. Basford: The difficulty in predicting precisely what will happen is that you are creating, hopefully, a more competitive market, a more competitive situation, and much depends on how the industry itself reacts. For example, much depends on how much, or to what extent the small Canadian producers take advantage of the right to the compulsory licences. We do not know to what extent. We are told by some that they are anxious to get this Bill passed, that they are anxious to apply for compulsory licences, and that they are anxious to start producing some of the patented drugs that are now on the market.

Much depends on how they take advantage of that. Much depends on how much the major pharmaceutical manufacturers start copying each other. Much depends on what happens at the retail level, which we have not gone into yet. Much depends on the extent to which doctors become a little more price-conscious, more aware of non-brand-name drugs and their effectiveness and their safety. This is why I cannot say here and now that this Bill or some other measure is going to reduce prescription prices by 25 per cent or 75 per cent.

[Interpretation]

by The Canadian Pharmaceutical Association which represents the statutory pharmaceutical organizations in Canada along with over eight thousand member pharmacists, the following has become clear in the course of discussions, and I quote:

that one of the major factors affecting drug prices was at the retail level; and it was at this level that probably most difficulties would be encountered in any endeavour to introduce competition which could result in lower prices of drugs to the consumer.

This is a conclusion, Mr. Chairman, that contradicts completely the Minister's speech, the present bill and the speeches made in the Commons by the two Ministers concerned, in the debates of October 17, and January 17.

Could the Minister tell me why it is that experts cannot agree regarding the effects of a bill that endeavours to introduce competition? A layman like myself, who, like several members of the Committee, is interested in the good of the consumer, is at a loss, Mr. Chairman, to understand how you come to these two conclusions. Could the Minister explain why the two conclusions are different?

M. Basford: La difficulté à prévoir avec précision ce qui arrivera, c'est qu'on crée un marché plus concurrentiel, on augmente la concurrence et beaucoup dépend de la façon dont l'industrie réagit. Beaucoup dépend de la façon dont, par exemple, les petits producteurs canadiens tirent partie des droits du brevet obligatoire. Nous ne savons pas. Nous savons que certains de ces petits producteurs veulent que le Bill soit adopté; ils veulent cette disposition à propos du brevet obligatoire.

Cela dépend de la façon dont les grandes fabriques se font concurrence entre elles. Beaucoup dépend de ce qui se passe à l'échelon de la vente au détail, du fait que les médecins se rendent un peu mieux compte de l'importance qu'ont les prix pour les consommateurs et sont mieux au courant des produits qui n'ont pas de marques de fabrique. Voilà pourquoi je ne peux pas dire que ce Bill ou d'autres mesures abaisseront les prix de prescriptions de 25 p. 100 ou de 75 p. 100.

[Texte]

M. Fortin: Monsieur le président, une autre question me vient à l'esprit inévitablement: Je suis porté à comparer cette situation avec ce qui est arrivé au Canada dans l'industrie de la chaussure, par exemple, où plusieurs manufacturiers canadiens ont fait faillite, et font encore faillite, particulièrement au Québec, à cause d'une trop grande concurrence. J'ai reçu ce matin même une communication d'une association de boulangers du Canada, qui emploie plusieurs centaines, plusieurs milliers de personnes. Cette association se plaint que la concurrence est en train de leur faire perdre leur commerce puisque les détaillants eux-mêmes baissent le prix à un niveau inférieur au prix coûtant. Pour tenter d'amener les gens dans leur magasin, épicerie et autre, afin de vendre d'autres produits, ils baissent le prix du pain. Le Bill C-102 n'amènerait-il pas une situation analogue?

• 1650

Le gouvernement n'intervenant pas, les boulangers devront choisir entre: ou bien faire faillite ou bien vendre leur commerce et abandonner complètement cette industrie florissante qui pourtant, au Canada, est très importante et qui rapporte environ 5 millions de dollars chaque année seulement dans l'agriculture. Je pense que tout se tient au point de vue économique, monsieur le président, et je n'arrive pas à comprendre comment le ministre peut conclure que le fait d'aviver la concurrence d'un côté, tout en permettant à l'importation d'envahir notre marché, va abaisser les prix, puisque d'après les autres mesures citées, baisse du taux de vente, allègement du droit de dumping, nous en venons au fait que les prix des médicaments n'ont pas baissé?

Monsieur le président, je voudrais demander au ministre, s'il peut relier ces différentes considérations. Ma question est peut-être enfantine, mais j'aimerais avoir une réponse. D'après lui, les ententes du Kennedy Round peuvent-elles avoir une influence sur la concurrence canadienne dans l'industrie pharmaceutique?

Mr. Basford: No. Subject to some further advice from the Department of Industry, Trade and Commerce, I would say no. The Kennedy Round itself has not affected this, but if you wish, I will check again with Industry, Trade and Commerce, and possibly will be able to give you a further answer.

I am hedging on this one a little because I am not that familiar, not being in the Department of Trade and Commerce, with the Kennedy Round and some aspects of the fine chemical industry, which may be related to the pharmaceutical industry.

[Interprétation]

Mr. Fortin: Mr. Chairman, another question comes to mind. I am led to compare this situation with what happened in Canada in the shoe industry, for instance, where several Canadian manufacturers failed, and are still failing, especially in Quebec, due to too much competition. This morning I received a letter from a baker's association in Canada which employs several thousand people. This association complains that competition is presently making them lose their business, because the retailers themselves are lowering their prices lower than the cost price. In an attempt to bring people into their stores, so as to sell other products, they lower the price of bread. Isn't this what it would come to with Bill C-102?

If the government does not intervene, the bakers will either have to fail, or sell their business and completely abandon their flourishing industry which is very important and prosperous in Canada, and which brings in about \$5 million yearly to the farming industry. This is all very basic; I do not understand how the Minister can conclude that encouraging competition on one side, while allowing imports to invade our market, is going to reduce prices, since in view of the other provisions referred to, reduction of the sales price and of dumping rights, we have seen that the price of drugs has not gone down.

Mr. Chairman, I would like to ask the Minister in view of all this if he can establish a tie. I know it is a childish question, but I would like to get an answer. Does he think that the Kennedy Round may have an influence on Canadian competition in the drug industry?

M. Basford: Non. Sous réserve d'une opinion contraire du ministère de l'Industrie et du Commerce, je dirais non. Je peux me renseigner encore auprès du ministère de l'Industrie et du Commerce et vous donner plus d'explications là-dessus. Mais j'hésite un peu parce que je ne suis pas très au courant. Nous ne faisons pas partie du ministère de l'Industrie et du Commerce. Je ne suis pas très bien au courant du Kennedy Round et de certains aspects de l'industrie chimique.

[Text]

M. Fortin: Monsieur le président, en conclusion, je souhaiterais qu'à ce Comité nous puissions disposer de certaines statistiques concernant l'industrie de la chaussure au Canada, notamment quant au nombre de faillites et les raisons de ces faillites. Je pense que des recherches ont été faites, à ce sujet et aussi dans le cas de la boulangerie, et les conclusions de ces recherches pourraient certainement nous aider à savoir si ce Bill aura les effets qu'en attend le ministre.

Mr. Basford: I am aware of the representations that you have received from bakers. I have received the same representations and I met shortly before Christmas with the Bakery Council of Canada. That is an entirely different situation. The problem the independent bakers are encountering has nothing to do with imports and nothing to do with the Patent Act. It is simply that big chain store bakers are allegedly eating up the small independent ones. That is a totally different problem.

With regard to the shoe industry, I think again it is a different problem although it is, of course, an import problem.

However, I think in this situation we are dealing with an extremely profitable industry, unlike the Canadian shoe industry; one that the Harley Committee pointed out has double the profits that apply in general manufacture. We are dealing with an industry with extremely high promotional expenses, which they could well cut down. We are also dealing, it seems to me, with the prospect of allowing greater opportunity to the smaller Canadian manufacturers.

• 1655

Therefore I do not think it is comparable to the shoe industry. But I am aware of the two situations to which you draw my attention. One I am directly related to because of responsibilities under the Combines Investigation Act. The other one is a trade problem. I think both situations are quite different from the situation in the pharmaceutical industry and particularly in respect of this Bill.

M. Fortin: Monsieur le président, ces remarques du ministre m'invitent à ouvrir la porte. Maintenant, je ne voudrais pas l'ouvrir nécessairement, j'aimerais tout simplement terminer sur ceci: à notre point de vue, deux choses sont importantes et fondamentales, la première, comme je l'ai déjà dit en Chambre, c'est la nécessité absolue pour tous de se soigner pour améliorer sa santé physique. La deuxième chose, c'est l'obligation pour chaque

[Interpretation]

Mr. Fortin: Mr. Chairman, to conclude, I would hope that this Committee will dispose of certain statistics with regard to the shoe industry in Canada, namely the number of failures and the reasons therefore. I think some research has been conducted on this subject, and also with regard to the bakeries, and the conclusions of this research could certainly help us to know whether this bill will have the effects which the Minister expects.

M. Basford: Je suis au courant des représentations et des demandes que vous avez reçues des boulangers. J'ai reçu les mêmes demandes du Conseil canadien des boulangers, avant Noël. C'est une situation tout à fait différente. Le problème des boulangers n'a rien à voir avec l'importation et avec la Loi sur les brevets. C'est simplement que les grands magasins absorbent peu à peu les petites boulangeries.

A propos de l'industrie des souliers, c'est un problème d'importation. Mais, je crois que nous avons affaire à une industrie qui, contrairement à l'industrie des souliers, rend de grands bénéfices. Le comité Harley indique que son bénéfice peut être le double de celui des autres industries. Il s'agit d'une industrie dont les frais de publicité sont extrêmement élevés. Nous avons aussi affaire à une industrie dont les perspectives de développement permettront plus d'occasions aux petits fabricants canadiens.

Je ne crois pas qu'on puisse la comparer à l'industrie de la chaussure. Mais je sais que les deux situations existent. Dans un cas, j'ai eu des rapports directs, car il s'agissait de l'application de la Loi relative aux enquêtes sur les coalitions. L'autre cas est un problème de commerce. Je pense que les deux situations sont très différentes de la situation de l'industrie pharmaceutique, spécialement en vertu de ce bill.

Mr. Fortin: Mr. Chairman, these comments of the Minister open the door to me. I do not want to open it too much. I just want to finish as follows.

From my point of view two things are important and basic. The first, as I said already in the House, is the absolute need to look after one's health. The second thing is the obligation that everyone is under to pay for these drugs. I know that for most of us

[Texte]

personne de payer ces mêmes médicaments. Je sais que pour la majorité d'entre nous ce n'est pas un problème, mais pour la majorité de nos concitoyens c'est un problème.

Maintenant, je veux exprimer le souhait que le ministre, éventuellement, prenne des mesures créditistes pour aider les gens à payer leurs médicaments. Merci, monsieur le président.

The Chairman: Before we hear the next question, I want to point out that we must, as much as possible, adhere to the matter which has been referred to us, which is Bill C-102. If we start discussing the bakeries across Canada, the potato growers and all those people, I think we will never come to an end. The Chair has been very lenient. I hope you will now help the Chair. I would like to ask you to ask appropriate questions, good questions, precise questions, in order that the hon Minister might answer you. If he cannot answer himself he may pass on the answering of these questions to those officers who are with him today.

With all respect I ask you to please stick to the matter, which is Bill C-102. Mr. Robinson, would you like to ask a question?

Mr. Rock: Mr. Chairman, on a point of order on what you just mentioned. I cannot agree with you, especially in view of some parts of this legislation, especially Clause 5, which deals with imports and the impact that they have on certain segments of our economy and also on this pharmaceutical industry in the same manner as in the past, when the reduction of import taxes on textiles had an effect on the textile industry which brought about unemployment. I think in this case it should be allowed because it has a direct connection with the past of which we have experience in Canada.

The Chairman: This may come up under Clause 5. We are on Clause 1 right now. Mr. Robinson.

Mr. Robinson: Thank you, Mr. Chairman. I have heard your remarks and I will try to abide by what you have suggested, although some of my questions may be way out in left field. In any event I have a few questions for the Minister.

In his remarks he said that it is virtually automatic that before any drug could be imported or patented—if I understood this correctly—the Food and Drug Directorate would determine its safety. Is this true?

Mr. Basford: No. Before it can be imported it has to meet the Regulations of the Food and

[Interprétation]

this is not a problem, but for most of our fellow-citizens it is a problem.

I would hope that the Minister will at some date adopt Social Credit measures to help people pay for these drugs. Thank you, Mr. Chairman.

Le président: Avant de passer à la prochaine question, j'aimerais signaler que nous devrions autant que possible étudier la question dont nous sommes saisis, soit le Bill C-102. Si nous commençons à parler des boulangers, des producteurs de pommes de terre, etc., nous n'en verrons jamais la fin. Le président a été très tolérant. J'aimerais bien maintenant avoir plus de collaboration. Je vous prie donc de poser des questions précises, de bonnes questions, pour que le ministre puisse répondre.

Si le ministre ne peut pas répondre lui-même, peut-être pourra-t-il confier la réponse à ses fonctionnaires qui l'accompagnent aujourd'hui. Avec tout le respect que je vous dois, je vous prie instamment d'en rester à la matière du Bill C-102. C-102, c'est bien cela. Monsieur Robinson?

M. Rock: J'invoque le Règlement. Je ne suis pas tout à fait de votre avis, surtout lorsque nous parlons de l'article 5, qui traite des importations et des effets que cela peut avoir sur certains aspects de notre économie et sur l'industrie pharmaceutique.

Par exemple, la réduction des tarifs douaniers sur les textiles a eu un effet semblable sur l'emploi. Il me semble donc que les questions que nous avons posées doivent être acceptées, parce que l'application de cet article aura un effet sur l'économie.

Le président: Vous pourrez revenir là-dessus à l'article 5, mais nous sommes actuellement à l'article 1. Monsieur Robinson?

M. Robinson: Monsieur le président, mes questions peuvent être très loin du sujet. Le ministre n'a-t-il pas dit qu'il était à peu près inévitable qu'avant qu'un produit pharmaceutique puisse être importé ou breveté, la Direction des aliments et drogues pourrait déterminer son caractère de sécurité?

M. Basford: Ce n'est pas exact. Avant d'être importé, le produit doit satisfaire aux

[Text]

Drugs Act. The Patent Act does not enter into that. You said that before it could be imported or patented it had to meet the Food and Drug requirements.

Mr. Robinson: I am assuming that you are talking about the patentability of the drug in Canada.

Mr. Basford: I am not sure that I entirely understand the question.

Mr. Robinson: My question really is: to what extent does the Food and Drug Directorate have latitude to investigate the drug to determine side effects, if any, and to determine its safety for use?

Mr. Basford: They will have complete jurisdiction. The point I was making in my speech was that that aspect of it, the safety, the side effects, the sale and importation, is the responsibility of the Food and Drug Directorate in the Act and Regulations. Those are not the responsibility of the Commissioner of Patents. I was trying to make clear that these are two entirely different functions and two entirely different responsibilities.

Mr. Robinson: Will there be any time limit as to when the Food and Drug Directorate will release the drug for human consumption?

• 1700

Mr. Basford: I do not want to get into the technicalities of the Food and Drugs Regulations as I think there are people more competent to speak to them than I, but if it is a new drug it has to go through all the procedures of the Food and Drug Directorate in order to get a certificate of compliance. This follows a whole series of clinical testing, etc. The usual period for a new drug to get cleared is five years.

Mr. Robinson: This period of time would be the experimental time as far as the testing and use of the drug is concerned.

Mr. Basford: If would have received a patent long before that, because the manufacturer would want to protect his process.

Mr. Robinson: Is that then what is known as a patent pending? In other words it would not be granted until it was safe?

Mr. Basford: No. These are two entirely different functions and the fact that the drug is patented does not give the manufacturer

[Interpretation]

prescriptions de la Loi sur les aliments et drogues. La Loi sur les brevets n'entre pas en ligne de compte. Vous avez dit qu'avant d'être importé ou breveté, le produit devait rencontrer les exigences de la Direction des aliments et drogues.

M. Robinson: Mais vous parlez de la possibilité de breveter un produit pharmaceutique au Canada, n'est-ce pas?

M. Basford: Je ne suis pas sûr d'avoir bien compris.

M. Robinson: Voici ma question. Dans quelle mesure est-ce que la Direction des aliments et drogues a le droit de faire enquête sur le produit pharmaceutique, pour déterminer s'il est sûr et ne présente pas de dangers?

M. Basford: Il a tous les droits possibles.

Ce que j'ai voulu dire dans mon discours, c'est que tous les aspects: sécurité, effets secondaires, vente et importation, dépendent de la Direction des aliments et drogues, aux termes de la Loi et des règlements. Ces choses-là ne relèvent en aucune manière du Commissaire aux brevets. J'ai essayé de bien faire comprendre qu'il s'agit de deux fonctions entièrement différentes, de deux attributions entièrement différentes.

M. Robinson: Combien de temps est-ce que la Direction attendrait avant de permettre la vente du produit pharmaceutique?

M. Basford: Je ne voudrais pas entrer dans le détail des règlements de la Direction des aliments et drogues. Il y a certainement des gens beaucoup plus compétents que moi en cette matière. S'il s'agissait d'un nouveau produit pharmaceutique, il devra passer par toutes les étapes successives prévues par la Direction des aliments et drogues, de façon à recevoir un avis. Cela exige toutes sortes d'essais en laboratoire, essais cliniques, etc. Normalement, il faut cinq ans pour cela.

M. Robinson: Au cours de cette période de temps, c'est une période d'essais. Je crois qu'on met les médicaments à l'essai.

M. Basford: Mais le brevet aurait déjà été accordé. Le fabricant tiendrait à protéger son produit.

M. Robinson: Le brevet est en instance? Il ne sera accordé que lorsqu'on aura jugé que le produit est sûr.

M. Basford: Non. Ce sont deux fonctions entièrement différentes. Parce qu'un brevet a été délivré en faveur d'un produit pharma-

[Texte]

the right to sell it. He can only sell it in accordance with the Food and Drugs Regulations, and if it were a new drug he would not be able to sell it at all until he had had permission from the Food and Drug Directorate.

Mr. Robinson: To be more specific, would this proposed legislation have avoided the difficulties and side effects that resulted from the use of the drug thalidomide?

Mr. Basford: Would this Bill?

Mr. Robinson: Yes.

Mr. Basford: No—I would like to check with my officials—but thalidomide I suppose was a patented drug. I presume that thalidomide was patented; I do not know. I am informed that it was. Whether it could be sold was up to the Food and Drugs Regulations, and then, of course, as a result of that very tragic occurrence the Food and Drugs Regulations were changed and made much different.

Mr. Robinson: Well, then, may I assume that because you have incorporated certain changes with regard to the Food and Drugs Act this kind of situation will not occur again because of the tighter regulations that will come about?

Mr. Basford: I hope so, but again those are the provisions of the Food and Drugs Act and its Regulations and the administration of the Food and Drug Directorate. I hope that this situation will not occur again but it had nothing to do with the Patent Act.

Mr. Robinson: Are we not concerned about the safety of releasing a drug? I assume that this was the reason for tying in the Food and Drug Directorate along with this proposal.

Mr. Basford: Partly it is. The Food and Drugs Act is amended in this Bill and there is reference to the Food and Drugs Act in this Bill simply to assure beyond any shadow of a doubt that in so far as safety is concerned the agency with the jurisdiction, the responsibility and the authority over that drug, its sale, its importation, its advertising, is the Food and Drug Directorate. That is why it is in this Bill. We have tried to assure, and I think have assured, when we read the Bill that in

[Interprétation]

ceutique, cela ne donne pas pour autant au fabricant le droit de le vendre. Il ne peut le vendre que conformément aux règlements régissant les aliments et drogues. Et s'il s'agissait d'un nouveau produit pharmaceutique, il ne pourrait pas le vendre du tout avant d'avoir reçu l'autorisation de la Direction des aliments et drogues.

M. Robinson: Pour être plus précis, cette mesure, ce projet de loi aurait-il pu prévenir les difficultés et les effets secondaires de médicaments comme la thalidomide, par exemple.

M. Basford: Ce projet de loi?

M. Robinson: Oui.

M. Basford: Non. Il faudrait tout de même que je contrôle avec les fonctionnaires. La thalidomide, sans doute, était-elle brevetée, je ne sais pas. On me dit qu'elle l'était. Quand à sa vente, elle dépendait des règlements régissant les aliments et drogues. C'est à la suite justement de ces incidents, que les règlements sont devenus beaucoup plus sévères.

M. Robinson: Dois-je conclure que, parce que vous avez apporté un certain nombre de modifications à la Loi des aliments et drogues, cette situation ne se représentera plus étant donné les règlements plus stricts?

M. Basford: Je l'espère bien. Mais encore une fois disons que ce sont des précisions de la Loi des aliments et drogues et du règlement, les régissant et que leur application en général dépend de la Direction des aliments et drogues. J'espère que ces incidents ne pourront pas se reproduire, mais ceci, encore une fois, n'a rien à voir avec la Loi sur les brevets.

M. Robinson: Ne devons-nous pas nous intéresser à la sécurité dans la vente des drogues? A mon avis, c'est la raison pour laquelle nous avons parlé de la Direction des aliments et drogues.

M. Basford: En partie, sans doute. Il est question de la Loi des aliments et drogues dans ce projet de loi, simplement de façon à préciser sans aucun doute possible qu'en ce qui concerne la sécurité, la personne qui est investie des attributions à cet égard, l'entière responsabilité de la vente, de l'importation, de la publicité, etc. revient à la Direction des aliments et drogues.

C'est pourquoi nous en parlons dans le projet de loi. Nous avons essayé de préciser que

[Text]

so far as safety is concerned the Food and Drug Directorate is the boss. This is unrelated to the patent.

Mr. Robinson: Mr. Minister, do we have any indication of how research in the drug field would be affected by this Bill?

Mr. Basford: We have nothing in the Bill. The Bill does not make reference to research. It is our contention that research is not going to be affected by this Bill.

• 1705

We feel that whether a company does research in Canada or not is a decision unrelated to the Patent Act. These are international companies. Whether they locate their research facility in Canada or not is due to circumstances other than the Patent Act. The Hall Royal Commission which looked into this, felt that it would not. The Harley Committee felt that research in Canada had been developed and generated in the main for three reasons. One was principally to satisfy the Food and Drug Directorate regarding any new drugs and to satisfy all the testing and product development requirements. Another was to take advantage of tax concessions that we have granted to Canadian companies engaged in research.

The Harley Committee felt that the deal of the research was involved simply with molecular manipulation in trying to develop slightly different new variations of known compounds to justify a patent and market promotion by the companies.

I think that most of the companies that you would be concerned with in asking that question are large international corporations. The indication we have is that they will find—have found in the past certainly and will continue to find it a more efficient, a better business decision, to concentrate their research facilities in one place. That is the sort of business decision that will prevail before the passage of this Act and after the passage of this Act. We do not see this Act destroying the research facilities in Canada.

Mr. Robinson: Mr. Minister, in your remarks you mentioned an organization known as PIDA.

[Interpretation]

du point de vue de la sécurité, c'est la Direction des aliments et drogues qui est maîtresse. Ceci n'a rien à voir avec les brevets.

M. Robinson: Comment les recherches dans le domaine des médicaments seront-elles touchées par ce bill?

M. Basford: Il n'y a rien dans le projet de loi qui traite de la recherche. Nous avons l'impression cependant que la recherche ne sera en rien compromise par notre projet de loi.

Nous avons l'impression que le fait qu'une compagnie fasse de la recherche au Canada ou pas, n'a rien à voir avec la Loi sur les brevets. Qu'elle installe ses laboratoires au Canada, cela tient assurément à des circonstances qui n'ont rien à voir avec la Loi sur les brevets. La Commission royale d'enquête Hall s'était précisément occupée de cette question, et avait découvert qu'il n'y avait pas de rapport entre les deux.

Le Comité Harley de son côté a pensé que la recherche au Canada avait été, en général, entreprise pour trois raisons: d'abord, pour satisfaire la Direction des aliments et drogues en ce qui concerne les nouveaux produits pharmaceutiques, de façon qu'ils satisfassent à toutes les exigences. Deuxièmement, pour profiter des avantages fiscaux consentis aux compagnies canadiennes qui font de la recherche. Le Comité Harley découvrit qu'une bonne partie des recherches n'avait trait au fond qu'au côté moléculaire de la question, qui n'essayait de modifier simplement des composés connus, juste assez pour justifier l'émission de nouveaux brevets et la mise en marché de produits supposément nouveaux.

La plupart des sociétés touchées par votre question, sont de grandes sociétés internationales. Nous croyons savoir que ces sociétés ont jugé jusqu'ici et à l'avenir continueront sans doute de juger plus efficace du point de vue commercial, de concentrer tous leurs laboratoires de recherches en un endroit. C'est là une décision fondée sur des motifs purement commerciaux et l'adoption de la Loi ne modifiera en rien la situation. Nous ne pensons pas que cette Loi puisse détruire les possibilités de recherche au Canada.

M. Robinson: Monsieur le ministre, vous avez parlé de PIDA.

[Texte]

Mr. Basford: PIDA.

Mr. Robinson: Is this the Pharmaceutical Independent Drug Association? Did I get it right?

Mr. Basford: No. PIDA is the Pharmaceutical Industry Development Assistance Program by which we have set up a program and provided money in the estimates from which Canadian companies—small companies or anyone—are entitled to apply for loans from government to assist them in developing research and production facilities in Canada. The reason for this is that we feel there are small Canadian companies who want to manufacture more or do some more research. We feel that the opportunities for those companies are opened up by this Bill. Many of them find it hard to obtain capital and therefore we have set up a fund to assist them to do that.

Mr. Robinson: Do I understand that this is strictly loans and has nothing to do with any subsidies?

Mr. Basford: This is a loan program.

Mr. Robinson: Are there any government subsidies in the drug field?

Mr. Basford: Not specifically directed at the drug industry but there are the various research or assistance grants formerly under the Department of Industry which could also be available to them.

Mr. Robinson: Mr. Minister, you have suggested that the effect of this Bill will be, hopefully, to reduce the cost of drugs to the consumer.

Mr. Basford: Yes.

Mr. Robinson: In the event this is not successful in your view to a reasonable percentage of decrease in the cost of drugs, would the government be considering setting up some sort of drug operation in competition to try to reduce costs in that manner?

Mr. Basford: I said in answer to Mr. Saltzman that in this Committee I was concerned with getting an amendment through amending the Patent Act and that I did not want to foreclose any other suggestions, but that at the moment I was concerned with an amendment to the Patent Act.

Mr. Robinson: I will not go into that further at this time, Mr. Minister. One of the members mentioned earlier in the questioning the importation of drugs and the whole ques-

[Interprétation]

M. Basford: PIDA.

M. Robinson: S'agit-il d'une association indépendante de fabricants de produits pharmaceutiques?

M. Basford: Non. C'est la «Pharmaceutical Industrial Development Assistance Programme». Il s'agit d'un programme d'aide à l'industrie pharmaceutique. Dans le cadre de ce programme nous avons inscrit des crédits au budget des dépenses. Grâce à ce programme, de petites sociétés pourront obtenir des prêts du gouvernement de façon à développer des outils de recherche ici au Canada. Il existe de petites compagnies canadiennes qui veulent fabriquer davantage et faire davantage de recherche. Nous pensons que ce projet de loi-ci justement leur facilitera la chose. Comme elles ont souvent du mal à trouver du capital, nous avons constitué une caisse grâce à laquelle nous les aidons.

M. Robinson: Dois-je comprendre qu'il s'agit de prêts et non pas du tout de subventions?

M. Basford: Il s'agit d'un programme de prêts.

M. Robinson: Est-ce qu'il y a des subventions du gouvernement dans le domaine des produits pharmaceutiques?

M. Basford: Pas précisément dans le domaine des produits pharmaceutiques. Il existe cependant diverses subventions dont elles pourraient bénéficier, notamment celles du ministère de l'Industrie.

M. Robinson: Monsieur le ministre, vous avez laissé entendre que les conséquences de ce bill seraient de réduire le prix des médicaments au consommateur.

M. Basford: Oui.

M. Robinson: Si ces mesures ne permettent pas de réduire dans un pourcentage suffisant le prix des médicaments, le gouvernement songerait-il à favoriser la concurrence pour réduire les prix?

M. Basford: Pour le moment, j'essaie de convaincre ce comité de voter un amendement à la Loi sur les brevets, et rien d'autre.

M. Robinson: Je ne poursuivrai pas dans cette ligne pour l'instant. Certains membres ont parlé de l'importation des médicaments et toute la question de l'exportation des médi-

[Text]

tion of exporting drugs as well. I am wondering if, in providing incentives through business loans, we intend to get into this field of exporting drugs to compete with the world market.

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Mr. Basford: I think it was Mr. Saltsman who mentioned exports. We do not have that much export now although one manufacturer has substantial exports. On a broad scale across the industry I do not think there is much export. We do not foresee exports being developed particularly. The Department of Industry, Trade and Commerce, would, of course, love to see them develop, but if there is an export business to be developed by Canadian pharmaceutical manufacturers, the prices are going to have to come down a good deal from what they are now because as the Harley Committee found and as they documented in Appendix "F" we have some of the highest prices in the world. If they were to reduce them maybe we would have an export business.

Mr. Robinson: Is there any suggestion by you that there should be less advertising of brand name drugs and more advertising of the generic terms?

Mr. Basford: It is for that reason that the Harley Committee recommended the establishment of this doctors' information bulletin and it is for that reason that the Food and Drug Directorate is going ahead with plans to get this out. They have been criticized for not having it out already. I simply want to go to their defence and say that there are difficulties in getting it out in making sure that it is proper and accurate and a reliable document. That is where the time is taken.

Mr. Robinson: I have one further question, Mr. Minister. In view of Medicare and all its ramifications and the large part that the cost of drugs plays in this kind of program, is it the intention of the government to go even further, if necessary, to reduce the cost of drugs which indirectly would reduce the cost of this program?

Mr. Basford: I do not want at this time to go into my thinking on whether we have a "drugcare" scheme or something, but I think that undoubtedly there will be pressures to include pharmaceuticals within medical plans. Some are included now. Undoubtedly I think this pressure will increase. Therefore, before the taxpayers under some medical

[Interpretation]

cements. Et, je me demande si en fournissant des stimulants, des prêts, ceci permettrait à nos fabricants de concurrencer les fabricants étrangers.

M. Basford: C'est M. Saltsman, je pense, qui a parlé des exportations.

Pour nous, nous n'exportons pas tellement de produits pharmaceutiques bien qu'un fabricant exporte pas mal de produits de ce genre. Mais dans l'ensemble je n'ai pas l'impression que nos exportations soient très importantes. Nous ne prévoyons pas que l'on puisse augmenter de beaucoup les exportations. Et évidemment il va de soi que le ministère de l'Industrie et du Commerce aimerait voir augmenter ces exportations. Mais pour ouvrir des marchés extérieurs, il faudrait de toute évidence qu'ils abaissent leurs prix, car le comité Harley a constaté, et le note dans les documents annexés à son rapport que les prix des produits pharmaceutiques dans notre pays sont parmi les plus élevés du monde. S'ils n'étaient pas aussi élevés, nous aurions peut-être des marchés extérieurs.

M. Robinson: Y aurait-il des moyens permettant de diminuer la publicité faite autour des marques de commerce afin de faire mieux connaître le nom générique des médicaments?

M. Basford: C'est pour cette raison précisément que le comité Harley avait proposé la création d'un bulletin de renseignements à l'intention des médecins, et aussi pour cette raison que la Direction des aliments et drogues est en train de préparer le terrain à cet égard. On l'a critiquée de ne pas l'avoir déjà fait. A son crédit, je veux dire qu'il est très difficile de préparer un document qui soit vraiment valable et adéquat. C'est pourquoi l'attente est longue.

M. Robinson: Une autre question, monsieur le ministre? Étant donné «medicare» et ses conséquences, et étant donné l'important pourcentage du coût des médicaments dans ce programme, le gouvernement a-t-il l'intention d'aller plus loin et de réduire le prix des médicaments et conséquemment de réduire aussi le coût de ce programme?

M. Basford: Je ne tiens pas à vous dire si nous devrions avoir un régime d'assurance des produits pharmaceutiques, «drug care» si vous voulez. Il est certain que des pressions s'exerceront pour que les régimes médicaux comprennent également les produits pharmaceutiques. Il me semble donc essentiel qu'avant qu'un régime médical comprenne tous

[Texte]

scheme start paying for huge quantities of drugs, it seems to me essential that we put the industry in as competitive a position as we can or that we create as competitive conditions as we can. Otherwise we would just be using the Medicare scheme or the "drug-care" scheme to support a very high-priced, non-competitive industry.

Mr. Robinson: Thank you, Mr. Chairman.

The Chairman: Mr. Rock.

Mr. Rock: Mr. Chairman, as does my confrère, René Émard, I represent an area where a lot of the pharmaceutical industry is established and I am definitely concerned with clause 5 of the Bill which deals with importation. I am concerned because of the action that different governments have taken in the past in reducing import taxes on textiles and where in many cases in the Province of Quebec and parts of Ontario a lot of the textile industries suffered and are still suffering because of the type of legislation that was passed at the time. I feel that the same thing is going to happen in our area, on the Island of Montreal, where most of the pharmaceutical industry is established. My concern is not with the internationally-owned companies because I believe that the majority of these companies are internationally-owned.

My concern is with the employees of these internationally-owned companies because most of them are established within a community in the Province of Quebec, they pay municipal taxes; they pay corporation taxes; they pay school taxes and different types of provincial taxes within our province, and these taxes help to develop the expansion of the province and of the community. They also pay corporation taxes to the federal government. Also, the people employed by these internationally-owned companies are Canadian, the majority of them. There are very few that are sent over to run the company from the parent companies.

The great majority of them are Canadians and they also contribute to the expansion of Canada. They contribute by way of school taxes, income taxes, municipal taxes, sales taxes and other things. They derive a revenue from this industry. Now, importation tends to stop this type of expansion as it did in the textile industry when we allowed this importation.

[Interprétation]

les produits pharmaceutiques, il est indispensable de mettre l'industrie dans une situation aussi concurrentielle que possible ou de créer des conditions aussi concurrentielles que possible.

Autrement, le régime d'assurance médical ou le régime d'assurance pour les produits pharmaceutiques ne ferait qu'entretenir une industrie extrêmement onéreuse et non-concurrentielle.

M. Robinson: Merci, monsieur le président.

Le président: Monsieur Rock.

M. Rock: Monsieur le président, comme mon confrère M. Émard, je m'inquiète de l'article 5 du projet de loi, au sujet de l'importation. Ce qui m'inquiète ce sont les mesures prises par les gouvernements dans le passé en vue de réduire les droits d'importation. Dans le domaine des textiles, par exemple, des usines de la province de Québec et de l'Ontario ont déjà souffert de mesures adoptées à l'époque. J'estime que ceci arrivera de nouveau dans la région de Montréal, où l'industrie pharmaceutique est concentrée. Ce ne sont pas les sociétés internationales qui m'inquiètent, la majorité de ces compagnies appartiennent à des intérêts étrangers, ce sont les employés de ces sociétés.

Tout d'abord, ces sociétés internationales sont établies dans une communauté de la province de Québec; la plupart versent des impôts, et des taxes scolaires, municipales, etc.

Et ceci, évidemment, ces impôts profitent à notre collectivité. Et elles paient aussi des impôts au gouvernement fédéral. Les salariés, les gens qui travaillent dans ces industries, sont pour la plupart canadiens.

Très peu viennent de l'étranger pour diriger. La grande majorité sont des Canadiens, et ils contribuent aussi à l'expansion du Canada. Ils y contribuent de différentes façons par les impôts, les taxes scolaires, les impôts provinciaux, les taxes municipales, etc. Les provinces, donc, obtiennent des revenus grâce à ces industries. L'importation tend à mettre un frein à ce genre d'expansion, comme la chose s'est produite dans l'industrie du textile, quand nous avons permis l'importation.

[Text]

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In the textile industry, for instance, we do have most of the raw materials, coal and also wood products, which have a lot to do today with the textile industry, yet we also export these raw materials to Japan, but Japan sends us back a lot of textile finished products which has an effect on the Canadian industry itself. We should possibly get into this field for exportation and not have importation at all. However, this has nothing to do with this bill.

My concern right now is the fact that the importation of these drugs will have the same effect on the industry established in our area, or in the province of Quebec, that the reduction of import duties on textiles had on the textile industry in Canada. It still has this problem at the moment all over. Probably the same thing applies to the shoe industry. Because of importation of shoes, the shoe industry in our province is affected greatly and I feel that the pharmaceutical industry in our province will be affected in the same way.

Importation from another country will come through agencies or possibly the same international companies, because these international companies own all the trademarks and the patent rights in the other countries, too. Do not think for one minute they have not a monopoly in the other countries. They have and you cannot tread on any of their monopolies in the other countries, either. We can do what we want with our legislation here, but they also have protection in every other country in the world, because it is a world monopoly, an international monopoly, and you cannot break that part of it with this legislation.

These people who are employer in another country pay no taxes at all, nor does the industry pay any tax here. All you are going to get now is imported products, a warehouse and the employees to distribute these products. You are not going to have any more employment to manufacture in the future. We are giving these internationally owned companies a break. We are allowing them now to get out of the manufacturing field in Canada and get into the importation of drugs—the same companies. This is actually what to me this legislation is doing and this is what has to be in your mind before you accept Clause 5.

Personally I think Clause 5 should be completely eliminated. I am not against the other parts of this legislation. Personally, I believe that we should bring in legislation to bring the price down in Canada, but not by bring-

[Interpretation]

Dans l'industrie des textiles nous avons la plupart des matières brutes, le charbon et les produits du bois, qui se rattachent à l'industrie des textiles et cependant, nous exportons cette matière brute au Japon qui nous renvoie les produits finis, et ceci a un effet sur l'industrie canadienne. Il faudrait peut-être faire de l'exportation et aucune importation, mais ceci ne concerne pas notre bill ici.

Ce qui m'inquiète ici, c'est que les importations de ces médicaments ont eu des effets sur l'industrie établie dans notre région ou dans la province de Québec, et la réduction des droits sur l'importation des textiles a eu des effets sur l'industrie des textiles au Canada. La même chose s'est produite, par exemple, dans le domaine de la chaussure. Par suite de l'importation de la chaussure, notre industrie en a été affecté et ceci pourrait se produire dans l'industrie des produits pharmaceutiques de la même façon.

Les importations de pays étrangers se feront par l'entremise de compagnies, car ces sociétés internationales possèdent toutes les marques de commerce et les brevets, dans les autres pays aussi. Ils ont des monopoles dans les autres pays et vous ne pouvez empiéter sur aucun d'eux. Nous pouvons faire ce que nous voulons ici, mais ces sociétés sont protégées dans les autres pays du monde, parce qu'il s'agit de monopoles internationaux, et cette mesure ne peut les briser.

Ces gens qui travaillent dans les autres pays ne paient pas de taxes, non plus que l'industrie. Tout ce que vous obtiendrez maintenant, ce sera des produits importés, des entrepôts et les employés pour les distribuer. Ceci ne donnera pas beaucoup plus de travail à l'avenir. Nous permettons à ces mêmes sociétés d'abandonner le domaine de la fabrication au Canada et d'importer des médicaments. Voilà ce que, à mon avis, cette mesure permettra de faire et c'est ce que vous devez avoir à l'esprit avant d'accepter cet article 5.

Je pense qu'il faudrait éliminer complètement cet article 5. Je ne suis pas contre les autres articles de la mesure, mais je pense qu'il faut adopter une législation qui permettra de réduire le prix des médicaments au

[Texte]

ing in competition from outside. Let us suppose that we thought the prices of bread and wheat products were too high in Canada, and the people were complaining. Would we say, "Well, in that case what we should do here, is to bring in some competition to our wheat growers by bringing in cheaper wheat from the United States or from somewhere in South America?"

Suppose we do that. You would have the Committee dealing with that from the West filled right here—every member would be from the West; there would be none of you members here from the East—and they would deal with that down here and they would not let it pass—they would not let that pass.

What surprised me was the NDP member who is not interested so much in employees. However, I will just make this remark—if this industry had union employees I to not think the NDP members would be for the importation of drugs they would be for everything else.

Mr. Saltzman: Mr. Chairman, on a point of order.

Mr. Rock: All right; I think I am out of order.

Mr. Saltzman: I do not think I can let that statement stand. I have no idea whether the employees are unionized or not but it makes no difference whatever, and I would like to have it clearly understood on the record that contrary to the statement just made, I believe that this legislation will result in increased employment in the chemical industry rather than less.

• 1720

Mr. Rock: Well, time will tell. Mr. Chairman...

The Chairman: May I point out again that we are supposed to discuss matters without any partisan bias, so I hope you are reminded.

Mr. Rock: Yes. The Minister indicated that Bill C-102 will bring prosperity to the small Canadian-owned drug industry, and I believe also that the Department of Industry stated the same thing when, in fact, many of these small industries are complaining that they may be put out of business because of this importation.

Because of this, I believe that these small producers should be allowed to come to the Committee to make their statements out here

[Interprétation]

Canada, mais pas par une concurrence de l'extérieur.

Supposons que nous croyions que le prix du pain et des produits du blé est trop élevé au Canada et les gens se plaignent. Allons-nous dire: «Bien, ce qu'il faudrait faire, ce serait d'accroître la concurrence et d'importer du blé moins cher des États-Unis ou d'Amérique du Sud». Supposons que nous agissions ainsi. Alors le Comité aurait à traiter avec les députés de l'Ouest, (tous les députés seraient de l'Ouest, aucun ne serait de l'Est) ces députés ne permettraient pas évidemment que cette mesure fût adoptée.

Alors, ce qui me surprend au sujet des membres du NDP, c'est qu'ils ne s'intéressent pas tellement aux salariés. Mais je dirai simplement que si cette industrie avait des ouvriers syndiqués, les membres du NDP n'appuieraient pas cette mesure, ils seraient en faveur de toute autre chose.

M. Saltzman: Monsieur le président, j'invoque le Règlement.

M. Rock: Très bien; je crois que j'ai enfreint le Règlement.

M. Saltzman: Je ne peux pas laisser passer cette déclaration. Je ne sais pas si les employés sont syndiqués ou non, ça ne fait aucune différence. Je veux que le compte rendu précise bien que contrairement aux déclarations qui viennent d'être faites, cette mesure législative permettra à l'industrie pharmaceutique de fonctionner mieux que par le passé.

M. Rock: Bien, nous verrons avec le temps.

Le président: Puis-je vous faire remarquer encore une fois que nous ne devons à aucun moment faire preuve d'esprit de parti au cours de nos discussions.

M. Rock: Oui, le ministre a indiqué que le bill C-102 donnera une certaine prospérité aux fabricants de produits pharmaceutiques canadiens, et le ministre de l'Industrie nous a dit la même chose, alors qu'en fait, de nombreuses petites industries se plaignent et disent qu'elles risquent de faire faillite en raison de l'application de la loi.

C'est pourquoi je suis personnellement convaincu que ces petits producteurs devraient avoir la possibilité de venir au Comité, d'y

[Text]

in front of you rather than just to the Minister's office, so that everything will be in the open and you people will know what their feelings are.

You do not have this opportunity now because you have adopted the decision that only these people here are going to be heard and no one else, and I do not think this is fair.

Many of you people are new members here, and all you have is a report. That is one of the reasons why I wanted to...

Mr. Robinson: Mr. Chairman, on a point of order, I really do not think I understand it that way. My understanding of the Chairman's remark is that we are quite prepared to listen to witnesses if there is something new. That will come before our agenda and procedure subcommittee.

I am on the committee and I am quite interested in anything new that has not been heard before. I think I can assure the honourable member that this will certainly be considered.

Mr. Rock: Very good. Much of the pharmaceutical industry and almost all of its research, as I said before, is located in the Province of Quebec. Now, the fifth phase of the program that the Minister has is to call an interprovincial conference. How could we call an interprovincial conference without first setting this aside because of the implication this may have economically on one of the provinces, the province of Quebec, if we allowed this importation before? I cannot understand the thinking here.

Even in my first speech when this legislation was first Bill C-90 in the last session, I stated that phase 5 should be phase 1 rather than phase 5 because of this fact, interprovincial conference on the retail level.

Now, I understand, Mr. Chairman, that the Canadian Drug Advisory Committee passed an anonymous resolution at their last meeting expressing concern for the safety and quality of imported drugs under such legislation. I believe the Minister has this resolution, and I believe this also should be tabled here for this Committee so that members may have an opportunity to read it, and also to call in witnesses and to hear and discuss testimony from these witnesses.

[Interpretation]

faire des déclarations, au lieu de se rendre uniquement au bureau du ministre, ainsi tout sera au grand jour et on saura exactement ce que les gens pensent.

Vous n'avez pas cette occasion maintenant, puisque vous avez décidé que nous ne pourrions entendre que les membres du Comité. Ce n'est pas juste. Plusieurs d'entre vous sont prêts à entendre des témoins s'ils ont quelque chose de nouveau à apporter. Cela sera soumis au sous-comité de l'ordre du jour et de la procédure.

M. Robinson: Monsieur le président, j'invoque le Règlement. Je ne crois pas que j'ai compris cela de cette façon. Si j'ai bien compris ce qu'a dit le président, nous sommes prêts à entendre des témoins s'ils ont quelque chose de nouveau à apporter. Cela sera soumis au sous-comité de l'ordre du jour et de la procédure.

Je serais tout à fait intéressé à entendre des gens qui ont quelque chose à dire de nouveau qui n'a pas encore été entendu, et je puis assurer les membres du Comité que l'on étudiera la question.

M. Rock: Une grande partie de l'industrie pharmaceutique et presque l'ensemble de ses installations de sa recherche se fait dans la province de Québec, comme je l'ai déjà dit. L'étape 5 du programme prévu par le ministre sera de convoquer une conférence fédérale-provinciale. Comment pouvons-nous convoquer une conférence interprovinciale sans d'abord mettre cela de côté, car en raison des répercussions, des répercussions économiques sur l'une des provinces, en particulier la province de Québec, si nous le permettons avant cette importation? Je ne peux absolument pas comprendre quelle est la philosophie dont on s'inspire ici.

Même lors de mon premier discours, lorsqu'on nous a présenté le bill C-190, lors de la dernière session, j'ai déjà dit cela. J'ai dit que la phase 5 devrait être la phase 1 et non la phase 5. On devrait d'abord convoquer une conférence interprovinciale au sujet de la vente au détail.

Monsieur le président, si j'ai bien compris, le Comité consultatif canadien des drogues a adopté une résolution anonyme à leur dernière réunion par laquelle il exprimait quelque inquiétude quant à la qualité et la sécurité des drogues importées en vertu de cette loi. Je crois que le ministre dispose de cette résolution, et il faudrait également la déposer ici, au Comité, pour que celui-ci puisse l'examiner; ainsi les députés auront la possibilité de lire cette recommandation, convoquer des témoins et discuter, entendre des témoignages de ces témoins.

[Texte]

I understand also that there is a confidential inter-departmental government report that questions uneconomic benefits that will be derived from this legislation, and it points out that drug testing problems will be seriously complicated. I believe that the departmental members of this committee should be called to give testimony in front of you members.

Also I would like to know from the Minister...

Mr. Basford: Mr. Rock, excuse me if I interrupt you, but I am not aware of what report you are referring to. I wish you would identify it for me.

Mr. Rock: Well, I understand that they have sent you a resolution.

Mr. Basford: No, I am talking about the report; some inter-departmental...

Mr. Rock: I just heard that there is, and I am asking you whether there is an inter-departmental report?

Mr. Basford: Not that I am aware of.

Mr. Rynard: Mr. Chairman, I think something was asked in the House the other day about a resolution that was tabled, or something to that effect, and the Minister of Health and Welfare said that he would do it as soon as he got it. I think this is right.

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Mr. Basford: I know about the resolution, but I know nothing about the reports you are talking about.

Mr. Rock: Mr. Chairman, if the Minister says there is no such report as an inter-departmental report on the effect this legislation may have on economy, how did they make this decision? They must have had that if they did not.

Mr. Basford: Now, just a moment, Mr. Rock...

Mr. Rock: Then I would only say this: that you had better have these departments come up here in front of us so we can get some questions asked. We have the right to ask questions.

The Chairman: Order, order, Mr. Minister?

Mr. Basford: Well, just a minute, Mr. Rock; I do not want to get into an argument with you but you said that there was an inter-departmental report that said certain things.

[Interprétation]

Je crois également qu'il y a un rapport interministériel gouvernemental confidentiel au sujet des avantages économiques qui découleront de cette mesure législative, et je crois que le problème sera sérieusement compliqué. Je crois que les membres ministériels de ce Comité devraient être convoqués pour témoigner devant les membres du Comité.

Je voudrais aussi savoir, monsieur le ministre...

M. Basford: Excusez-moi de vous interrompre, je ne sais pas du tout de quel rapport vous parlez.

M. Rock: Bien, je crois comprendre qu'ils vous ont fait parvenir une recommandation.

M. Basford: Non, je parle du rapport...

M. Rock: J'ai entendu dire et je vous demande s'il y a un tel rapport interministériel?

M. Basford: Pas à ma connaissance.

M. Rynard: Monsieur le président, je crois qu'une question a été posée à la Chambre l'autre jour au sujet d'une recommandation qui a été déposée. Le ministre de la Santé nationale et du Bien-être social a dit qu'il le fera dès qu'il le pourra.

M. Basford: Je suis au courant de la résolution, mais c'est tout.

M. Rock: Monsieur le président, si le ministre dit que ce rapport interministériel n'existe pas au sujet des répercussions de cette mesure législative sur l'économie, comment a-t-il pris sa décision? Ils ont dû l'avoir sinon...

M. Basford: Un instant, monsieur Rock.

M. Rock: Alors, je ne dirai que ceci: vous feriez mieux de faire venir des représentants ministériels afin que nous puissions les interroger, c'est notre droit.

Le président: A l'ordre! Monsieur le ministre?

M. Basford: Un instant, monsieur Rock, je n'ai pas l'intention d'avoir une dispute avec vous, mais vous dites qu'il y a un rapport interministériel, qui déclare certaines choses.

[Text]

Mr. Rock: I said I believed there was.

Mr. Basford: I said that I am not aware of any such report. Naturally there are inter-departmental reports on the effects of this bill, inter-departmental reports that say that this bill and the procedures being taken in the Food and Drugs Act properly protect the Canadian public and will do so.

Mr. Rock: Could you have this tabled here, the full report?

Mr. Basford: No, Mr. Rock. I am not sure what kind of a report you are referring to, but inter-departmental reports are confidential to the government and remain confidential. They are advice to Ministers, advice between departments.

Mr. Rock: That is very good, Mr. Chairman, but.

Mr. Basford: It is a long-standing procedure.

Mr. Rock: Yes, I understand. Then from the statement that has just been made, I believe members here should surely ask that more witnesses be heard.

Mrs. MacInnis (Vancouver-Kingsway): Mr. Chairman, I would like to raise a point of order.

Mr. Rock: I came here for this purpose, Mr. Chairman.

The Chairman: Order, please. Mrs. MacInnis?

Mrs. MacInnis (Vancouver-Kingsway): On a point of order, we decided, Mr. Chairman, at the beginning of the performance that we would finish with the Minister and then we would decide on this other point. Now, I do not think it should be brought in under the guise of questioning.

Mr. Rock: How could you do that without questioning the Minister sometimes, Mr. Chairman? You have to do this in this manner; there is no other way and I think that you must agree to that.

The Chairman: Mr. Rock, I believe that you are not a member of the Committee. You are welcome here and everything that has been said will be taken into consideration later on due to the fact that Mr. Rynard has brought before us something for our consideration. As soon as we are through with the Minister you are free to ask questions of him, not to discuss policy, but to ask him questions so that we can take everything into consideration afterwards.

[Interpretation]

M. Rock: J'ai dit que je croyais qu'il y en avait un.

M. Basford: J'ai dit que je ne suis pas au courant de ce rapport. Il y a des rapports interministériels au sujet des effets de ce bill, dans lesquels on dit que ce bill et les mesures prises en vertu de la Loi sur les aliments et drogues protégeront les Canadiens.

M. Rock: Pouvez-vous déposer ce rapport?

M. Basford: Je ne sais pas de quel rapport vous parlez. Les rapports interministériels sont confidentiels et le demeurent. Ce sont des conseils adressés aux ministres, des conseils interministériels.

M. Rock: Très bien, monsieur le président, mais...

M. Basford: C'est une procédure qui existe depuis très longtemps.

M. Rock: Je comprends. Donc, les députés, les membres du Comité, devraient certainement demander qu'on entende davantage de témoins.

Mme MacInnis (Vancouver-Kingsway): Monsieur le président, j'invoque le Règlement.

M. Rock: Je suis venu ici dans ce but, monsieur le président.

Le président: A l'ordre. Madame MacInnis?

Mme MacInnis (Vancouver-Kingsway): J'invoque le Règlement. Nous avons décidé, au début de la séance, que nous terminerions avec le ministre et que nous prendrions une décision touchant cet autre point. Maintenant, je me demande si ce devrait être fait sous forme de questions.

M. Rock: Comment pourriez-vous faire cela sans poser ces questions au ministre, monsieur le président? Vous devez procéder de cette façon, il n'y a pas d'autres moyens et je pense que vous devez être d'accord avec cela.

Le président: Je ne crois pas que vous soyez un membre du Comité. Vous êtes le bienvenu ici. Tout ce que vous avez dit sera certainement étudié plus tard, M. Rynard ayant soulevé un point que nous devons prendre en considération. Dès que nous en aurons fini avec le ministre, vous êtes libre de lui poser des questions, pas pour discuter de politique, mais de l'interroger afin que nous puissions étudier le tout après.

[Texte]

Mr. Rock: I understand, Mr. Chairman. You must understand also that I used to be a member of this Committee and somehow I was not put back on again during this session—maybe I understand why.

Then, Mr. Chairman, I would like to know whether the Minister will also table with this Committee all correspondence, reports and presentations from the professional academic experts and also the industry. He must have a lot of comments that you people here are not aware of, and before passing a bill as serious as this, affecting to my knowledge the area I represent and the province of Quebec, I believe that such documents should be tabled with this Committee for you all to study.

Also I would like to ask one question, Mr. Chairman, if I may of all the members here. How many of you here have ever visited a pharmaceutical establishment?

An hon. Member: A what?

Mr. Rock: A pharmaceutical company. Have any of you—you too, Mr. Chairman; possibly as a doctor you would have. Has even the Minister ever visited them? I do not know. Have any of you visited them? If you have not, I plead with you all: before you make any decision to pass any clauses in this legislation, arrange first in some way to visit the pharmaceutical community of the Island of Montreal. I think this is of the utmost importance before you pass such legislation.

Now, the Minister stated something about this 20 per cent profit margin as a cushion and of course you also included, Mr. Basford, the advertising part of it which I believe would be around 30 per cent if I recall correctly—about 20 per cent profit margin and 30 per cent advertising margin. What I would like to know, Mr. Basford, is why does not your Department bring in some legislation—I am for reduction in the prices of drugs, but not to the extent of importation and at the expense of the industry and the people who are employed. I think you can appreciate my concern.

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But why does your Department not bring in legislation to reduce that 30 per cent, which I think is an advertising margin, to 10 per cent? Such action may have a direct effect. Why do you not legislate that no phar-

[Interprétation]

M. Rock: Monsieur le président, je comprends, mais vous devez comprendre également que j'ai fait partie de ce Comité un certain temps, mais on n'a pas renouvelé ce mandat pour cette session, je doute un peu pourquoi.

Je voudrais savoir si le ministre pourrait déposer au Comité tous les rapports et documents au sujet, rédigés par les experts économiques et par l'industrie. Il doit avoir beaucoup de renseignements dont vous n'êtes pas au courant et avant d'adopter un bill aussi sérieux qui aura des conséquences pour les gens de la région que je représente et la province de Québec, je crois que ces documents devraient être déposés ici, au Comité, afin que vous puissiez tous les étudier.

Je voudrais également poser une question, monsieur le président, si vous me le permettez. Je voudrais savoir combien d'entre vous, ici, ont visité une usine de fabrication de médicaments?

Une voix: Une quoi?

M. Rock: Une compagnie pharmaceutique. Quelqu'un d'entre vous, y compris vous, monsieur le président, mais je suppose qu'en votre qualité de médecin vous avez dû le faire, a-t-il déjà visité une usine de fabrication de médicaments? Le ministre lui-même l'a-t-il fait? Si vous ne l'avez pas fait, je pense qu'avant de prendre des décisions et avant d'adopter le moindre article de cette mesure législative, vous devriez d'abord vous arranger d'une façon ou d'une autre pour visiter les usines de produits pharmaceutiques de Montréal. Je crois que c'est extrêmement important que vous fassiez cela avant d'adopter la mesure législative.

Le ministre a parlé de la marge de profits de 20 p. 100, aussi de la partie qui a trait à la réclame, qui constitue 30 p. 100, si je me souviens bien, mais il y avait environ une marge de 20 p. 100 de profits et 30 p. 100 de marge pour la publicité. Ce que je veux savoir, monsieur Basford, c'est comment se fait-il que votre ministère ne propose pas des mesures, parce que moi-même je suis en faveur de la réduction des prix des médicaments.

Mais au sujet de ce 30 p. 100 pour la marge de publicité, pourquoi votre ministère ne propose-t-il pas des mesures législatives pour réduire à 10 p. 100, ce qui aurait peut-être un effet direct. Pourquoi ne pas passer une

[Text]

maceutical industry can spend more than 10 per cent on advertising—the rest would not be deductible and that would be it. I think this would be good legislation because it would have an immediate effect. It would also stop a lot of this needless advertising on television which, at times, becomes very nauseating.

Mr. Basford: Mr. Rock, I have said I do not want to preclude any ideas and I do appreciate your suggestion that there should be a limitation on advertising. However, I am informed that either the Harley Committee or the research staff of that committee looked at this proposal and decided that it would not be appropriate. Again, may I say that I am endeavouring on the basis of the recommendations of three very exhaustive and expensive enquiries to make an amendment to the Patent Act.

Mr. Rock: Mr. Chairman, I would like to finish by suggesting, as I did previously, that before passing any clauses, all members of the Committee should visit the pharmaceutical community of the island of Montreal. I certainly think it would be to your advantage to do so before passing this legislation.

The Chairman: Thank you, Mr. Rock. Is that an invitation on your part?

Mr. Rock: No, not necessarily, but if you want one I will arrange it.

The Chairman: It is a suggestion on your part?

Mr. Rock: Yes, Mr. Chairman. There has to be an acceptance of the idea before an invitation is extended.

The Chairman: Thank you, Mr. Rock. Were you on the Harley Committee last year which dealt with the cost of drugs?

Mr. Rock: No, I was not. I was on the Committee that studied abortions and, before that, contraceptives. It was very interesting.

The Chairman: Thank you, Mr. Rock. Mrs. MacInnis?

Mrs. MacInnis (Vancouver-Queensway): Mr. Chairman, as invitations are being issued, I would like to issue an invitation to members to visit some of the low income people—the elderly and the sick who are...

Mr. Monteith: On a point of order, Mr. Chairman. I do not like to question your sincerity in trying to deal with the Committee fairly and properly but I do understand that

[Interpretation]

mesure qu'un fabricant ne pourrait dépenser plus de 10 p. 100 pour la publicité. Toutes autres dépenses publicitaires ne seraient pas déductibles et ce serait tout. On éliminerait ainsi beaucoup de publicité inutile à la télévision.

M. Basford: Je ne peux pas fermer la porte aux idées et je vous remercie de vos propositions. On dit que soit la commission Harley, soit son personnel de recherche a étudié cette proposition et décidé que ce ne serait pas convenable. Mais nous faisons des enquêtes approfondies par rapport à la Loi sur les brevets.

M. Rock: Monsieur le résident, j'aimerais finir en proposant ce que j'ai déjà proposé, soit d'inviter tous les députés du comité à visiter l'îlot des produits pharmaceutiques de l'Île de Montréal, avant que nous adoptions la mesure législative.

Le président: Est-ce que c'est une invitation?

M. Rock: Non, pas nécessairement, mais si vous en désirez une je peux m'arranger.

Le président: Est-ce une proposition?

M. Rock: Oui. Il faudrait accepter l'idée avant de formuler une invitation.

Le président: Merci, M. Rock. Avez-vous fait partie de la commission Harley l'an dernier?

M. Rock: Non, mais j'ai pris part aux discussions du comité sur l'avortement et la limitation des naissances.

Le président: Merci. Madame MacInnis?

Mme MacInnis (Vancouver-Kingsway): Puisqu'on distribue des invitations, je voudrais inviter les membres à visiter certaines personnes à faible revenu, les vieillards et les malades qui...

M. Monteith: J'en appelle au règlement, monsieur le président, je ne mets pas en doute votre désir de mener les débats de ce comité avec équité; mais M. Rynard essaie

[Texte]

Dr. Rynard has been trying to get your eye for some time and our party has not had anybody speak yet.

The Chairman: I will put his name down after Mrs. MacInnis. I am sorry, Dr. Rynard, but I did not catch your eye.

Mrs. MacInnis (Vancouver-Kingsway): I was just completing an invitation when I was interrupted. I think that prescriptions should be made more readily available to the elderly, the sick and the needy. I do believe that in this instance the Minister has very much the welfare of the entire Canadian community in mind and while various sections of the country will still be suffering or their position changed only to a certain extent I am convinced that the net over-all effect will be good. No matter how far it goes it will be in the right direction.

Having said that, I want to ask the Minister what changes in the position of drug retailers he envisages under this new legislation and in what way this bill will affect their position.

Mr. Basford: In terms of regulating or changing the law relative to what goes on at the retail level, of course there is no change. But we would anticipate that the pharmacists would have available to them lower priced drugs, and we would anticipate that some of the more expensive brand name drugs would be manufactured under compulsory licence and therefore would be cheaper. We hope that those will be the economic effects of the bill. The bill itself is not directed at changing the retail market.

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Mrs. MacInnis (Vancouver-Kingsway): The reason for my asking is that I have had inquiries from a number of retailers asking whether their position would be affected? Would this bill give them any more leeway to make up prescriptions, and would their position be changed in any way?

Mr. Basford: No. The only change that it could have would be that possibly the drug-gist would have a larger and a less expensive range of pharmaceuticals. However, it will not change the licensing of the pharmacists. As I said in my statement, it is not going to direct either the doctor or the pharmacist what to prescribe.

Mrs. MacInnis (Vancouver-Kingsway): Again, arising out of questions that I have been asked, will this legislation in any way affect the position of doctor in regard to drugs and, if so, in what way will it affect it?

Mr. Basford: Really in the same way that I have indicated it would affect the pharma-

[Interprétation]

d'obtenir votre attention depuis quelques minutes, et notre parti n'a pas eu encore le loisir de s'exprimer.

Le président: J'inscris votre nom après celui de madame MacInnis, je suis désolé M. Rynard, mais je ne vous avais pas vu.

Mme MacInnis (Vancouver-Kingsway): J'étais à faire un vœux lorsque j'ai été interrompue. J'aimerais que les ordonnances soient plus faciles à obtenir pour les malades, les personnes âgées et les pauvres. Je veux croire que le ministre pense profondément au bien-être de la communauté canadienne et que même si les différentes parties du pays continuent à en souffrir, je suis certaine néanmoins que l'effet d'ensemble sera valable. Ceci dit, je tiens à demander au ministre, quelle sera la position modifiée des détaillants, de quelle manière les détaillants seront touchés par cette loi?

M. Basford: Pour ce qui est de la réglementation ou de la modification de la Loi, la Loi n'exerce aucun contrôle sur les détaillants. Mais nous nous attendons à ce que les pharmaciens abaissent le prix des médicaments. Nous nous attendons à ce que certains médicaments de marque parmi les plus chers soient fabriqués en fonction de brevets obligatoires et par conséquent, les frais de production et les prix seront inférieurs, mais le bill, en fait, ne se rapporte pas aux détaillants.

Mme MacInnis (Vancouver-Kingsway): J'ai reçu plusieurs demandes de personnes au sujet de la position des détaillants, si la situation des détaillants était touchée par le bill. Quels seront les effets sur les frais d'ordonnance?

M. Basford: Non, le seul changement qui pourrait survenir c'est que les pharmaciens auront probablement un éventail plus élargi de produits pharmaceutiques moins coûteux. Mais cela ne touche pas le permis du pharmacien et il n'est pas question d'ordonner aux médecins de prescrire tel ou tel médicament.

Mme MacInnis (Vancouver-Kingsway): La deuxième question que je voudrais poser est celle-ci: est-ce que cette loi touchera le statut du médecin ou sa situation et comment?

M. Basford: De la même façon, en fait; la même façon que les dispositions du bill tou-

[Text]

cists—that hopefully the doctor will have available for prescribing a larger and a less expensive range of pharmaceuticals. But the doctor must have control over what he prescribes, and we are not changing that in any way.

Mrs. MacInnis (Vancouver-Kingsway): Would it be true to say that the Food and Drug administration, to a certain extent, would be taking the place of the big drug manufacturers' detail men?

Mr. Basford: Not taking the place of the detail men. Of course, under this bill, nothing would happen in this regard. But under the information program the information bulletin will be designed to supplement the detail men and to put into the hands of the doctor information that he would not be obtaining from the detail men of the large pharmaceutical manufacturers. It is our hope that through the information bulletin the doctor will have before him on a recurrently up-to-date basis information on what drugs are available—what generic drugs are available, their price and their effectiveness.

Mrs. MacInnis (Vancouver-Kingsway): Would this cut down on the \$5,000 promotion effort that drug manufacturers currently spend on each doctor annually.

Mr. Basford: We would hope that the competitive conditions created by the bill would force the manufacturers to be more efficient more economically minded, which they could be by reducing their promotional allowances, let us say. They could well spend less on promotion.

Mrs. MacInnis (Vancouver-Kingsway): And what would be the net effect to the consumer?

Mr. Basford: Cheaper drugs, hopefully. You see, the scheme of the bill is to allow other than the patent holders to produce these patented drugs.

The patent holder has several alternatives. He can leave his price as it is, which is high, which will of course encourage someone to come in, copy that drug, and market it, or he has the alternative of reducing his price thereby making it uneconomic for others to copy or to import it. That is the scheme.

[Interpretation]

cheront les pharmaciens. Le médecin pourra, aura le loisir de prescrire parmi un choix plus grand de produits pharmaceutiques moins chers. Mais là aussi le médecin doit être libre, doit pouvoir se sentir tout à fait libre d'ordonner ce qu'il veut.

Mme MacInnis (Vancouver-Kingsway): Est-ce vrai que le Directeur des aliments et des drogues prendra en quelque sorte la place du détaillant des grandes sociétés?

M. Basford: Non, elle ne le remplacera pas; en vertu du bill, rien ne se produira à cet égard. Mais en vertu du programme d'information, le bulletin d'information sera conçu pour compléter le détaillant et donner aux médecins davantage de renseignements qu'ils n'obtiendraient pas du détaillant des grandes fabriques de produits pharmaceutiques. Nous espérons qu'au moyen de notre bulletin le médecin soit tenu au courant constamment de l'évolution des produits mis en marché, de leurs prix, et de leur efficacité.

Mme MacInnis (Vancouver-Kingsway): Est-ce que cela abaisserait l'effort publicitaire de \$5,000 que les industries pharmaceutiques déploient chaque année auprès des médecins?

M. Basford: Nous espérons que la position concurrentielle créée par la Loi incitera, les fabricants à augmenter l'efficacité de leur production, les forcera à être plus rentables en abaissant leurs frais de mise en marché et en dépensant moins pour la publicité?

Mme MacInnis (Vancouver-Kingsway): Quel sera l'effet au niveau du consommateur?

M. Basford: Un produit meilleur marché. Enfin, le but du projet de loi, c'est de permettre à d'autres que le détenteur du brevet de produire les mêmes médicaments. Le détenteur du brevet peut agir de différentes façons. Il peut continuer à vendre à un prix élevé, ce qui fait qu'un autre fabricant trouvera rentable de se lancer dans la production des mêmes produits; ou alors baisser les prix, ce qui empêchera les autres fabricants de copier ou d'importer ce médicament. Voilà le programme.

C'est la Commission Harley qui a constaté que les prix étaient trop élevés; s'ils restent trop élevés, ceci encouragera les gens à importer ou à copier. Nous pensons que les grands producteurs canadiens baisseront leurs

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The Harley Committee found Canadian prices unduly high. If they remain high this will encourage people to copy and to import. We would think that the major manufacturers will reduce their prices in large measure to

[Texte]

forestall others copying or importing. I think it is true to say we are really not that concerned which they do. One way or the other there will be on the market cheaper drugs, we hope.

Mrs. MacInnis (Vancouver-Kingsway): It is impossible to foresee the result of this legislation. The Minister has been using the word "hopefully" quite a bit and I understand the reason for it—because one cannot foresee in detail.

Would the Minister be prepared, at least until this scheme gets going, to make an annual report to Parliament on the working of this bill—to be tabled within the first 15 days of Parliament meeting?

Mr. Basford: There is no statutory requirement in this proposed act or any other for such a statement. However, I am sure I will be happy to make a statement. It may not be in any formal statutory way. I have said that we hope that this will have a beneficial effect on drug prices. We are determined to see them reduced, therefore we are going to keep a very close watch on them, and I will be making reports from time to time as to what is happening with drug prices.

You are concerned about an annual report. I would be happy to make a statement in answer to a question in the House of Commons or during discussion on estimates in committee of my Department, if I had not already made one.

Mrs. MacInnis (Vancouver-Kingsway): I am just concerned that the Minister may not be the Minister until the end of time. Would it not be wise, in view of future possibilities, to have this a statutory requirement in the proposed act.

Mr. Basford: I do not really think in this bill, Mrs. MacInnis, because it is a bill dealing with patents, and I would not want to confuse the Patent Act in that way.

Mrs. MacInnis (Vancouver-Kingsway): A good deal of concern has been expressed on the possibility of disrupting or partially destroying the drug industry in the province of Quebec particularly, and I believe that you pointed out that Ontario is in the same situation.

Has either the Minister or his staff any idea of the percentage of Canadian drug manufacturers, in this country—and I mean really Canadian, as opposed to the number of American subsidiary drug manufacturing concerns.

[Interprétation]

prix pour lutter contre cette concurrence de l'étranger. Peu nous importe de ce qui arrivera. D'une manière ou d'une autre, les prix seront abaissés.

Mme MacInnis (Vancouver-Kingsway): Il est impossible de prévoir les résultats de cette Loi, mais le ministre nous a parlé d'espoirs sur les résultats définitifs du bill; je me demande si le ministre serait disposé au moins à faire un rapport annuel très détaillé au Parlement sur les résultats du bill, les 15 jours suivant la reprise de la session.

M. Basford: La loi n'exige pas que le ministre fasse un rapport semblable mais je le ferai certainement. Peut-être pas d'une façon tout à fait officielle comme la loi le prescrirait par ailleurs mais nous espérons, je le répète, que toutes ces dispositions auront un effet bénéfique sur le prix des médicaments et par conséquent, nous suivrons de près les événements.

Je ferai un rapport périodiquement à la Chambre sur cet abaissement éventuel.

Il me semble que toute question posée à la Chambre des communes et toute discussion en comité sur les crédits de mon ministère donneraient l'occasion aux députés de me poser des questions à ce sujet.

Mme MacInnis (Vancouver-Kingsway): En fait, le ministre ne fera peut-être pas le même... ne serait-il pas sage étant donné cet aléa, d'insérer dans cette loi une disposition concernant ce compte rendu du ministre, ce compte rendu obligatoire que nous aurons à chaque année?

M. Basford: Je ne pense pas que ce soit opportun. Je ne voudrais pas utiliser la *Loi sur les brevets* de cette façon-là, et à cette fin.

Mme MacInnis (Vancouver-Kingsway): Une dernière question. Nous avons entendu parler de la possibilité éventuelle de ruiner l'industrie des produits pharmaceutiques dans le Québec—celle de l'Ontario se trouve dans la même situation—est-ce que les collaborateurs du ministre ont une idée du pourcentage de la production des médicaments qui sont réellement canadiens et de ceux qui ne le sont pas, sans compter la production des filiales américaines au Canada ou étrangères au Canada?

[Text]

Mr. Basford: I am going to ask Mr. Henry to answer that question.

Mr. D. H. W. Henry, O.C. (Director of Investigation and Research, Combines Investigation Act, Department of Consumer and Corporate Affairs): Mr. Chairman, we do not have precise figures to answer Mrs. MacInnis' question directly but, as you know, there are roughly 57 members of the Pharmaceutical Manufacturers' Association of Canada and this group does roughly 85 per cent of the production of drugs in Canada.

There is quite a large number of much smaller Canadian firms. They number somewhere—this is a very round figure—about 150, so that you have perhaps 200 firms in Canada. The PMAC firms, of course, are the large firms, and the percentage of production that actually comes from Canadian firms themselves would be somewhere in the area of the 15 per cent that is not done by the PMAC group. That is about the best I can tell you, but if there is any way that we can get more precise figures we will try to do that before the Committee finishes its work. I am sorry we do not have the exact figures on that.

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Mrs. MacInnis (Vancouver-Kingsway): Thank you, Mr. Henry. I want to ask the Minister if he would be hoping by this and the other parts of his program to encourage that 15 per cent of Canadian manufacturers to grow in Canada?

Mr. Basford: Yes, we would. We have had one application under PIDA which has been approved.

Mr. Henry: Yes, and others are pending.

Mr. Basford: Yes, one has been approved. I think six are pending, and we anticipate about 20 applications altogether. There are also some Canadian firms or smaller firms that we anticipate do not need PIDA or will not take advantage of PIDA. They have access to capital or other resources, one way or the other. We know small Canadian manufacturers who are anxious to see this bill passed, and who expect to see their business increase as a result of it.

Mrs. MacInnis (Vancouver-Kingsway): I just wanted to say in conclusion that I think the industry in Quebec and elsewhere deserves something better than to be left to the mercies of those big American drug firms. I would like to see the encouragement of

[Interpretation]

M. Basford: Je demanderais à M. Henry de répondre à cette question.

M. D. H. W. Henry C.R. (directeur des enquêtes et de la recherche, Loi relative aux enquêtes sur les coalitions, ministère de la Consommation et des Corporations): Monsieur le président, nous n'avons pas de chiffres précis qui nous permettent de répondre à la question de M^{me} MacInnis. Mais en termes généraux, vous savez qu'il y a 57 membres de l'Association des fabricants de produits pharmaceutiques et ce groupe s'occupe de 80 p. 100 de la production des produits pharmaceutiques au Canada.

Il y a un grand nombre de sociétés beaucoup plus petites, en chiffre rond, 150 environ. Donc, vous avez à peu près 200 sociétés au Canada. Cette Association compte les plus grandes sociétés. Le pourcentage de la production qui vient des sociétés canadiennes serait de l'ordre de 15 p. 100, ce qui n'est pas fait par le groupe de l'Association. Mais tout probablement nous pourrions donner les chiffres précis avant que le Comité ne finisse son travail.

Mme MacInnis (Vancouver-Kingsway): Merci, monsieur Henry. Je voudrais maintenant demander au ministre s'il espère, dans ce programme, pouvoir encourager les 15 p. 100 des fabricants, encourager la croissance de ces 15 p. 100.

M. Basford: Oui, nous avons eu une demande en vertu de l'ADIP, demande qui a été approuvée.

M. Henry: D'autres sont en suspens.

M. Basford: Six sont en suspens, et nous nous attendons à en recevoir une vingtaine. Il y a aussi des sociétés canadiennes, de petites sociétés, qui ne profiteront peut-être pas de l'ADIP. Nous connaissons de petits fabricants canadiens qui veulent l'adoption du bill et qui s'attendent à ce que leurs affaires s'accroissent en raison de l'adoption du bill.

Mme MacInnis (Vancouver-Kingsway): Je crois que l'industrie québécoise, d'ailleurs, mérite plus que d'être laissée à la merci de ces grands fabricants pharmaceutiques des États-Unis. Et je retournerais à la suggestion de mes collègues, selon laquelle le meilleur

[Texte]

Canadian industry too and, in fact, I could return to my colleague's suggestion that the best place to have this public corporation would be in the Province of Quebec where we could be sure that it would provide employment and a flourishing Canadian position within the drug industry. Thank you, Mr. Chairman.

Mr. Robinson: A supplementary question, Mr. Chairman. It has to do with the remark by the Minister concerning PIDA and the applications for assistance. Are they all presently existing firms, and are they Canadian firms or are they based somewhere else?

Mr. Basford: No, they are existing Canadian firms.

Mr. Robinson: They are not new firms. They are existing firms.

Mr. Basford: Yes. Part of the program is to assist some reorganization of these smaller firms. But it is not a new firm precisely taking advantage of this approach. But some of them anticipate having to restructure themselves and merge, and this sort of thing. So if three firms merge under the auspices of PIDA, it would be a new firm, probably, but they would be existing firms that had merged.

Mr. Robinson: I wondered if they were actively engaged in the field at the present time?

Mr. Basford: Yes.

Mr. Rynard: Mr. Chairman, most of the people around here have sat patiently for about two hours and one half and they want to call it six o'clock. I would be very glad to come on at eight o'clock. I think we are to be back at eight o'clock tonight, are we not?

Mr. Émard: Just one supplementary question concerning what the Minister said. In your present legislation do you not have the possibility of granting manufacturing licences to anybody here?

Mr. Basford: Of granting manufacturing licenses? No, I do not...

Mr. Émard: Yes, a compulsory license to manufacture in Canada. You already have that possibility. I think it was you who stated it in the House.

Mr. Basford: Yes we do. We are changing slightly the provisions relating to domestic or compulsory licenses for domestic manufacturing by providing for the interim licensing, and for providing that the compulsory license

[Interprétation]

endroit pour cette grande association serait au Québec. Merci, monsieur le président.

M. Robinson: Une question complémentaire au sujet de la suggestion du ministère à ce sujet. Est-ce que ce sont des sociétés qui existent à l'heure actuelle? Est-ce que ce sont des sociétés canadiennes ou est-ce qu'elles sont établies ailleurs?

M. Basford: Ce sont des sociétés canadiennes qui existent actuellement.

M. Robinson: Elles existent déjà.

M. Basford: A l'heure actuelle, une partie du programme veut, exige une certaine organisation de ces petites sociétés. Mais certaines d'entre elles ne profitent pas des dispositions du bill. Certaines devront se retirer. Par exemple, si trois sociétés doivent s'amalgamer, se fusionner, cela deviendra une société beaucoup plus grande.

M. Robinson: Je me demandais si elles exploitent ce domaine à l'heure actuelle.

M. Basford: Oui.

M. Rynard: Monsieur le président, la plupart des gens, des membres du Comité, attendent depuis deux heures et demie. Ils veulent que ce soit six heures. Si nous devons surtout revenir à huit heures.

M. Émard: J'ai une question complémentaire. Dans la mesure, est-ce que l'on prévoit la possibilité d'accorder des permis de fabrication pour les produits pharmaceutiques?

M. Basford: D'accorder des permis de fabrication? Non, je...

M. Émard: Oui, un permis obligatoire pour fabriquer au Canada. Vous avez déjà cette possibilité, vous l'avez vous-même déclaré en Chambre.

M. Basford: Oui, mais nous changeons les dispositions au sujet des licences obligatoires et nous prévoyons également les licences temporaires. Et je me réjouis du fait, monsieur Émard, que vous ayez soulevé le point. Cela

[Text]

application will be dealt with quickly and expeditiously. But I am glad, Mr. Émard that you raised that point because that has been in the Act since 1923. So it is not such a violent Act as some people from Montreal allege.

Mr. Émard: I do not object to the old bill, Mr. Minister, but I certainly do object to this compulsory licensing for imports because I feel that this is dangerous. The rest of the bill seems fairly good, providing that your Department is willing to take the necessary measure to retain the quality of the drugs that we presently enjoy in Canada.

Mr. Basford: But to take away what you suggest leaves us really without a bill.

Mr. Émard: We will give you other means.

The Chairman: Gentlemen, is it the wish of the Committee that we adjourn until eight o'clock?

Mr. Basford: If Dr. Rynard would start now, I would see in which direction he was going and I could bone up over dinner.

Mr. Rynard: You will not need to worry about that, Mr. Minister.

The meeting is adjourned.

EVENING SETTING

• 2011

The Chairman: Ladies and gentlemen, I now see a quorum.

We are resuming consideration of Bill No. C-102, An Act to amend the Patent Act, the Trade Marks Act and the Food and Drugs Act. Dr. Rynard is first on the list, on Clause I, Licence under patent relating to food. Dr. Rynard?

Mr. Rynard: Mr. Chairman and colleagues, I was very interested in what we heard this afternoon, particularly dealing with the economics effect of this Bill. I think it was exceedingly well brought out by Mr. Rock and Mr. Robinson and two or three others who spoke. This creates immediately, from the answers of the Minister, the uncertainty that exists on this economic factor. In other words, there are many "ifs", "maybe's" or "I hope's". I feel, Mr. Chairman, that this is one place—and I am sure the Minister will agree with this—where neither the Minister nor his colleagues know all the answers and I am sure that he is anxious to bring this out. Therefore, this is one reason why I feel we must send this back to the Steering Committee on the question of witnesses.

[Interpretation]

figure à la loi depuis 1923. Alors ce n'est pas une loi aussi violente qu'on le laisse entendre.

M. Émard: Moi, personnellement, je ne m'oppose pas à l'ancienne loi, monsieur le ministre, mais je m'oppose à cette licence obligatoire en vue des importations. Pourvu que votre ministère soit prêt à prendre les dispositions requises pour s'assurer de la qualité des médicaments que nous recevons au Canada à l'heure actuelle.

M. Basford: Mais enlever ce que vous nous proposez d'enlever nous laisserait sans bill.

M. Émard: Vous aurez d'autres moyens.

Le président: Le comité veut-il s'ajourner maintenant, jusqu'à huit heures?

M. Basford: Si le D^r Rynard veut commencer maintenant, je connais le sens de ses questions.

M. Rynard: Ne vous en faites pas pour ça, monsieur le ministre.

La séance est levée.

SÉANCE DU SOIR

Le président: Mesdames et messieurs, nous avons le quorum.

Nous allons reprendre l'étude du Bill C-102, Loi modifiant la Loi sur les brevets, la Loi sur les marques de commerce et la Loi des aliments et drogues. M. Rynard est le premier qui a la parole, sur l'article 1—*Licence en vertu d'un brevet couvrant des aliments*.

M. Rynard: Monsieur le président, mes chers collègues, tout ce que nous avons entendu cet après-midi m'a vivement intéressé, en particulier ce qui avait trait à l'effet économique du Bill. Je crois que cela a été très bien expliqué par M. Rock et par M. Robertson, ainsi que par deux ou trois autres personnes qui ont pris la parole. On se rend compte immédiatement, d'après les réponses du ministre, de l'incertitude qui règne quant au facteur économique. En d'autres termes, il y a beaucoup de «si», de «peut-être» et de «j'espère». J'ai l'impression, et je ne suis pas certain que le ministre sera d'accord avec moi, que ceci est un domaine où ni le ministre, ni ses collègues ne connaissent toutes les réponses. Pour cette raison, je crois qu'il est essentiel que nous renvoyions au comité de direction la question des témoins.

[Texte]

I will enlarge on that a little more; that we do need somebody who can project it. I noticed the Minister quoted projected figures this afternoon from the Province of Alberta. I think we can bring accountants here from the Economic Council who can place before us this whole problem so that we can do the very best for the people of Canada. There is no question that all of us on this Committee are sincere: we all want cheaper drugs; we want them within certain qualifications that will protect the Canadian people.

In view of what happened this afternoon I suggest, Mr. Chairman, that this be sent back to the Steering Committee for it to use its wisdom in assessing what was brought up this afternoon.

We have not heard how the personnel and the facilities of the Food and Drug Directorate are going to be expanded; how many men are they going to require? What is the projected cost of all this? Are they going to be able and capable from the start of doing all the projected work that they are supposed to be able to do? I would like to hear from some of them as witnesses on this matter because this is one of the recommendations of the Harley Commission Report that personnel be provided. If I remember correctly, I know how wrong one can be sometimes in quoting figures, but somewhere it sticks in my mind that about 300 were to be added. I am subject to correction on this because it is only from memory of when I sat on that Committee.

• 2015

Then we also have to remember that the important aspects were the Boyd Report, the Hilliard Report and the report of this Committee itself.

All of us who sat on this Committee and have read the report, realize from the Boyd, the Hilliard and the Committee reports that we were concerned first with quality safety and then we had to consider the question of clinical efficiency. I, as a doctor, and I think the doctors who sat on this Committee, well realize that that is the all-important factor. We have had no-one come before this Committee to explain how this is going to be done and how this clinical efficiency is going to be tested, and this is paramount to the doctors writing prescriptions on those drugs.

You, Mr. Minister have stated that to make this work you had to have the co-operation of the members of the medical profession who will write the prescriptions. You have further

[Interprétation]

Je vais préciser un peu ma pensée: il nous faut quelqu'un qui puisse faire des prévisions exactes sur ce facteur économique. Je sais que le ministre a donné cet après-midi certains chiffres de prévisions de la province de l'Alberta. Je crois que nous pourrions faire comparaître ici des comptables du Conseil économique qui pourraient nous soumettre le problème dans sa totalité, ce qui nous permettrait d'agir dans le meilleur intérêt des Canadiens. Il ne fait aucun doute que tous, ici, nous sommes de bonne foi; tous, nous voulons des médicaments à meilleur marché, et nous voulons aussi des mesures qui protégeront les Canadiens.

Ainsi, monsieur le président, je propose, étant donné ce qui est arrivé cet après-midi, que l'on renvoie cela au comité de direction, afin qu'il puisse faire une évaluation des problèmes soulevés cet après-midi.

On ne nous a pas dit comment le personnel et les installations de la Direction des aliments et drogues allaient être augmentés. Combien de gens vont-ils recruter? Combien cela va-t-il coûter? Vont-ils pouvoir dès le début faire tout le travail prévu qu'ils sont censés pouvoir faire? J'aimerais entendre quelques témoignages là-dessus, car l'une des recommandations de la Commission Harley est que l'on fournisse du personnel. Si je me souviens bien, je sais que l'on peut faire erreur lorsqu'on cite des chiffres, il me semble qu'il était question d'environ 300 personnes de plus. Si je me trompe, qu'on me le dise, car je me souviens seulement de ces chiffres pour les avoir entendus lors d'une séance du Comité.

Et puis, il faut se rappeler aussi que les aspects importants étaient le rapport Boyd, le rapport Hilliard, et le rapport du présent Comité.

Tous ceux d'entre nous qui ont siégé à ce Comité et en ont lu le rapport se rendent compte, d'après les rapports Boyd et Hilliard et d'après celui de notre Comité, que nous nous préoccupons surtout de la sûreté des médicaments, et ensuite de leurs efficacité clinique. Moi-même, qui suis médecin, et les autres médecins de ce Comité, nous rendons bien compte que c'est là le facteur le plus important. Personne n'a comparu devant le Comité pour expliquer comment on pourrait assurer et mettre à l'épreuve cette efficacité clinique, qui est d'une importance capitale pour le médecin qui prescrit ces médicaments.

Vous avez dit, monsieur le ministre, que pour accomplir cela il vous fallait la collaboration du corps médical, des médecins qui vont rédiger ces ordonnances. Vous avez dit

[Text]

stated that you have to have the co-operation of the druggists, but you are a little bit hazy on how this is going to be done. At least, I am sure, the people who sat here this afternoon are a little bit hazy on how this is going to be carried out. We are sitting here as a committee for the Canadian people and I believe we have a right to know just what the projected ideas are in having this done.

As I said before, we are all in favour of cheaper drugs. I think every one of us wants those drugs to be clinically efficient because, while it may not happen for a long time, there are very few families that at some time or another would not be affected in one way or another by the clinical efficiency of what might be a life-saving drug, and I think this is a very important question.

To bring this point to a head, Mr. Chairman, I would like to suggest that the people who are competent to do this, the people who are dealing with it, in order to get their co-operation with the medical profession and the universities, that we ask the head of the pharmacy department of the University of Toronto or the University of Montreal to appear before this Committee and explain this matter to us.

Although I am a doctor, I would like to know a little bit more about it as well. Perhaps we could bring someone from the pharmacy department of the University of British Columbia. I am sure that would suit you, Mr. Minister. We could probably bring your friend, Dr. Parnowski, who I believe a few years back was with the Food and Drug Directorate. Am I correct in that statement?

An hon. Member: Yes.

Mr. Rynard: I think he would be an excellent man. It would probably satisfy you to have a man from B.C. I understand he is an able and capable man. These are suggestions that I would like to see the Steering Committee take into consideration.

I would now like to come to another point. I would like to know about the report of the Medical Research Council. This Committee has been set up, but time passes on and I wish to say that in looking over some of those figures I was struck by the fact that a lot of them are old now and getting out of date. They go back to 1964. We are living in a fast age and some of those figures have changed.

Mr. Basford: So that I can keep your remarks clearly in mind, what figures are you referring to?

Mr. Rynard: The figures that applied in the drug industry in 1964 would no more apply now than they would in the medical field. For

[Interpretation]

aussi qu'il vous faudrait la collaboration des pharmaciens, mais vous êtes un peu vague quant à la façon d'obtenir cette collaboration. Je suis certain, en tout cas, que les membres du Comité qui étaient ici cet après-midi n'ont pas très bien saisi comment la chose allait se faire.

Nous sommes tous en faveur de médicaments moins coûteux. Nous voulons qu'ils soient efficaces. Nous serons tous affectés, à un moment ou l'autre, par l'efficacité ou le manque d'efficacité en clinique des médicaments. Et je proposerais que les gens compétents s'occupent de la question et obtiennent la collaboration des universitaires, par exemple, de l'université de Toronto et de l'université de Montréal, pour les faire comparaître devant le Comité.

Bien que je sois médecin moi-même, j'aimerais en savoir un peu plus long. Nous pourrions faire venir un témoin de la faculté de pharmacie de l'université de la Colombie-Britannique, par exemple, ce qui vous fera plaisir, n'est-ce pas, monsieur le ministre? Nous pourrions inviter votre ami, le Dr Parnowski, autrefois de la Direction des aliments et drogues. Est-ce exact?

Une voix: Oui.

M. Rynard: Je crois que c'est l'homme qu'il nous faut. J'aimerais que le comité de direction prenne ces propositions en considération.

Je vais passer à un autre point, à savoir le rapport du Conseil de la recherche médicale. En examinant certains de ces chiffres, j'ai constaté que certains sont déjà dépassés. Certains datent de 1964; ces chiffres ont sans doute changé.

M. Basford: Quels sont les chiffres qui à votre avis ont changé?

M. Rynard: Les chiffres qui s'appliquaient en 1964 à l'industrie pharmaceutique, ne s'appliquent pas plus ici qu'en médecine.

[Texte]

instance we had a speaker here not so long ago from McGill University who said that every seven and a half years one half of your teaching could be thrown out the window. This is exactly what I am referring to. When we deal with statistics that are four years old we are getting a little bit out of date. I am not saying this is all wrong, but let us bring it up to date. This Committee will make its decision tomorrow when we finish with this hearing.

Mr. Basford: I do not want to interrupt and I am not a member of the Committee, but I would like to know which figures you are referring to.

• 2020

Mr. Rynard: I am referring to many, many of the figures. All you have to do is read over the report of the Harley Commission and you will see figures there that were taken from 1964. If you wish me to put them all on the record I can do so. I have the book here. However, I do not think this is the time or the place to do it because I wanted to speak in generalities tonight.

The last matter I was dwelling on was the report of the Medical Research Council of Canada. You were speaking about research this afternoon. I would like to know how much—in keeping with our scientific advancement—this research has gone ahead. What is the increase in the pharmaceutical field in research? This has not been presented to us.

I would then like to know what the resolution of the advisory committee was to the Minister. There are quite a few of those reports that I would like to have brought before this Committee.

This is a hypothetical question, Mr. Chairman, but it is something I would like to know. Suppose they develop a life-saving drug in the United States—perhaps a cancer-saving drug—and they say, “To heck with you, we are not coming over to Canada and take out a compulsory licence”. How are you going to get that drug? I believe that under the present regulations and under this bill you cannot do it, and I would like to hear from witnesses whether I am right or wrong on this. This is something that is of great import to the Canadian people. I wish to go on further and say that this has been done in the past.

Mr. Basford: I wonder, Mr. Chairman, if I could clarify my status. Mr. Rynard is asking a series of questions and I am not sure if I am expected to answer them as he goes along

[Interprétation]

Par exemple, un témoin de l'université McGill nous a dit que tous les sept ans et demi, la moitié de ce qui est enseigné devient désuet. Les données statistiques qui ont 4 ans et plus sont donc un peu dépassées. Je ne dis pas qu'elles sont fausses mais qu'il faudrait les mettre à jour. Le Comité devra prendre une décision demain lorsque son travail sera terminé.

M. Basford: Je ne veux pas interrompre, puisque je ne suis pas membre du Comité. Mais, de quels chiffres parlez-vous?

M. Rynard: Je parle des chiffres en général. Vous n'avez qu'à lire le rapport de la Commission Harley. Si vous voulez que je les verse tous au dossier, j'ai le livre ici, mais je ne crois pas que ce soit ni l'endroit ni le moment de le faire. Je préfère parler de façon générale.

Je crois que je pensais en particulier au rapport du Conseil de la recherche médicale au Canada. Vous parliez de la recherche, alors je me demandais dans quelle mesure la recherche médicale a suivi les progrès scientifiques. La recherche médicale dans le domaine des produits pharmaceutiques a-t-elle augmenté?

Puis, j'aimerais connaître la résolution que le comité consultatif a proposée au ministre. Il y a plusieurs autres rapports que j'aimerais que le Comité examine.

Monsieur le président, j'aimerais poser une question hypothétique. Mettons que l'on aurait mis au point un produit pharmaceutique miraculeux, contre le cancer par exemple, aux États-Unis et que l'on dise: «On n'exportera pas le médicament au Canada, car on nous imposera un permis obligatoire.» Comment allons-nous faire pour obtenir ce médicament? A mon avis, en vertu du présent règlement, on ne peut pas l'importer; j'aimerais qu'on entende des témoins pour me dire si j'ai tort ou non. C'est une question de la plus haute importance pour les Canadiens.

M. Basford: Monsieur le président, puis-je vous demander un éclaircissement. M. Rynard me pose une série de questions, je ne sais pas si je dois lui répondre au fur et à mesure. Si

[Text]

or afterwards. If I am to be allowed to answer them I would prefer they be asked one at a time.

Mr. Rynard: All right, I will ask you about the cancer-saving drug.

Mr. Basford: What was the question?

Mr. Rynard: If it was discovered that the firm that makes this drug in the United States did not want to take out a compulsory licence to market it in Canada under this bill, how does it get into Canada?

Mr. Basford: I presume it would be patented in the United States and therefore the process would be public property to anyone who wanted to search the United States Patent Office.

Mr. Rynard: Suppose they do not give it to you?

Mr. Basford: If they did not patent it in Canada anyone would be free to produce it in Canada. Subject to the regulations of the Food and Drug Act, anyone would be free to import it into Canada. If it were patented in Canada and the patent holder was neither importing nor producing it, someone would be entitled to apply for a compulsory licence to either import or manufacture it.

Mr. Rynard: Suppose there was not that much profit in it and they did not want to apply for a compulsory licence?

Mr. Basford: Someone would be free to import it.

Mr. Rynard: Then you would have to put in a regulation that this could be done.

Mr. Basford: They can do that now. I find it hard to believe, doctor, that if a cure for cancer were developed someone would not be interested in importing it and making it available to the Canadian public. If the Canadian pharmaceutical industry is not interested in making a cure for cancer available to the Canadian public, then we should do something far more than this bill provides.

Mr. Rynard: What you are saying in effect is that perhaps you should change some of those regulations; that somebody would take out a compulsory licence. As I see it that is what you would have to do to either manufacture or import it.

Mr. Basford: I am saying that the law as presently stated—and this has nothing to do with my amendment—would allow someone to import it if it were not patented in Canada, subject to the regulations of the Food and Drug Act.

[Interpretation]

je dois répondre je préférerais qu'il les pose une à la fois.

M. Rynard: D'accord, commençons par le médicament contre le cancer.

M. Basford: Quelle était la question?

M. Rynard: Si un médicament est mis au point aux États-Unis et que le fabricant ne veut pas délivrer de permis temporaire pour sa vente au Canada, comment peut-on l'importer?

M. Basford: Je suppose qu'il sera breveté aux États-Unis; il deviendrait alors propriété publique. Il faudrait aller à l'Office des brevets.

M. Rynard: Et si l'on ne vous le donne pas?

M. Basford: S'il n'est pas breveté au Canada, n'importe qui est libre de le produire au Canada. N'importe qui peut l'importer, sujet aux dispositions de la *Loi sur les aliments et drogues*. Et si le produit est breveté au Canada, et que le détenteur ne procède ni à l'importation ni à la fabrication, chacun aurait le droit de demander qu'un permis obligatoire soit émis.

M. Rynard: Et si le produit n'offre pas suffisamment de bénéfices pour intéresser qui que ce soit à demander ce permis obligatoire?

M. Basford: Quelqu'un serait libre de l'importer?

M. Rynard: Il faudrait donc introduire une disposition en ce sens.

M. Basford: Il est possible de le faire déjà. J'ai peine à croire, docteur Rynard, que, s'il y avait un remède pour le cancer, personne ne s'intéresserait à l'importer et le mettre à la disposition du public. Si l'industrie pharmaceutique ne s'intéressait pas à rendre disponible un remède pour le cancer, il faudrait faire quelque chose.

M. Rynard: Vous admettez donc qu'il faudrait changer de règlement, pour permettre à quelqu'un d'obtenir une licence obligatoire car je crois que c'est ça qu'il faudrait pour le fabriquer ou l'importer.

M. Basford: Je dis que la présente Loi permettrait d'importer le médicament au Canada s'il n'y était pas breveté.

[Texte]

Mr. Rynard: Yes, but I am talking about—

Mr. Basford: If it were patented in Canada, under my amendment it would allow someone to apply for a compulsory licence to manufacture it in Canada or to import it into Canada. If someone were to use their patent monopoly to prevent distribution of that cancer cure drug in Canada then, to go back to the statement I previously made, this bill should do far more than it is doing.

Mr. Rynard: I would possibly agree with you that public opinion and the Food and Drug Directorate would move to get this drug in.

• 2025

Mr. Basford: God help the drug industry if it were not prepared to move!

Mr. Rynard: I want to tell you, Mr. Minister, whether you know it or not, that it is a well known fact they have had drugs in the United States before we could get them here and they were using them. I could go on and name one. At one time we were making penicillin here. What happened at Valleyfield when they were making penicillin? Thiouracil is a drug that was first made in the United States and we had quite a problem getting it here. The Food and Drug Directorate will be able to tell me how long it took. We sent an order through the government and got it from New York. This was the first that was used. I remember bringing prontosil, from the United States, and that was away back. Sulfanilamide was the first product, then prontosil and then other ones followed.

In connection with these things we have to get into the field to find out exactly what they are doing. The Minister says certain things. Is he sure that this is the way it will be done? Is there anything in this bill that says it will be done that way? I think this is the question before us.

I think I must repeat that we are for cheaper drugs; we are for the safety of drugs; the quality of drugs, but as far as we in the medical profession are concerned the key pillar of all is that the drug is clinically efficient. Nothing else will satisfy the medical profession. They will not write prescriptions unless they know that drug will do the job it is supposed to do. One of the recommendation of the Harley Commission Report was that this circular was to be published once a month. I notice you have said every three months. I wonder if this will be a continuing process and it will go from three months to six months and finally it will possibly be published once a year, or something like that. This is a big problem.

[Interprétation]

M. Rynard: Oui, mais je parle...

M. Basford: Si le produit était breveté au Canada, aux termes de mon amendement, quelqu'un pourrait demander un permis temporaire pour le fabriquer ou pour l'importer au Canada. Si quelqu'un a recours au monopole de leur brevet pour en empêcher la distribution au Canada, il faudrait, comme je l'ai déjà dit, aller plus loin que ne le fait ce bill.

M. Rynard: Je suis d'accord que l'opinion publique ou la Direction générale des aliments et drogues feraient des pressions.

M. Basford: Si l'industrie pharmaceutique n'est pas prête à agir, je ne réponds pas d'elle.

M. Rynard: Il est bien connu que beaucoup de médicaments sont produits et distribués aux États-Unis avant qu'on les ait ici. Voyez ce qui est arrivé à Valleyfield, lorsque l'on a produit la pénicilline! La thiouracil a été d'abord produite aux États-Unis et nous avons eu toutes les difficultés du monde pour l'importer ici. La Direction des aliments et drogues pourrait peut-être me dire combien de temps il a fallu? Je me souviens d'avoir rapporté de la prontosil des États-Unis, il y a longtemps. La sulfomide puis la prontosil. Ce sont toutes des choses qui, à mon avis, nous forcent à entrer dans ce domaine pour savoir ce qui se passe. Le ministre a dit certaines choses. Est-il certain que les choses vont se passer ainsi? Je crois que c'est la question qui se pose.

Je dois répéter que nous sommes en faveur des médicaments moins chers, tout en étant sûrs et de bonne qualité. Dans la profession médicale, ce qui nous préoccupe surtout c'est l'efficacité en clinique du médicament, rien de moins ne saura satisfaire la profession médicale. Les médecins ne prépareront pas d'ordonnances à moins qu'ils soient certains de l'efficacité du médicament. La Commission Harley a recommandé que le bulletin soit publié une fois par mois. Vous avez dit tous les trois mois. Est-ce que ça sera un processus continué? Est-ce qu'on passera de trois mois à six mois? Peut-être qu'éventuellement le bulletin ne sera publié qu'une fois l'an.

[Text]

Mr. Basford: I would like to ask a question on a point of clarification. Where did I say it would be published every three months?

Mr. Rynard: I understood that this was so. Perhaps you did not say, and I am sorry if I said you did when you did not. Was it not the understanding here this afternoon there was going to be a publication every three months? If this is not so, then I am out of tune. I will ask the Chairman if it was not the feeling here that this was going to be published every three months.

Mr. Basford: I am sorry, Mr. Chairman, if I inadvertently misled the Committee by anything I said this afternoon. I do not recall saying anything that might have given that impression.

Mr. Rynard: I am just asking the Chairman if it was not the understanding that it was to be three months.

Mr. Basford: I do not think I really got into detail on this matter, but the intention is to publish the bulletin every month from next October.

Mr. Rynard: You are going to publish it every month?

Mr. Basford: Yes.

Mr. Rynard: Not every three months?

Mr. Basford: No, and I do not recall ever having said three months.

Mr. Rynard: I am sure there were people sitting around here this afternoon who heard three months. Maybe I am wrong.

Mr. Basford: In any event, doctor, if that was a misinterpretation it has been cleared up.

Mr. Rynard: If you are going to publish it every month, this is all to the good. When do we get the first publication?

Mr. Basford: October.

Mr. Rynard: October?

Mr. Basford: Yes. The great delay, of course, is because the Food and Drug Directorate wants to be terribly careful and conscientious in assuring that the information in that bulletin is correct and that it is the kind of bulletin which the medical profession can have confidence in and trust. This is not something—and you particularly, doctor, will appreciate this—that can be thrown together in a few weeks.

[Interpretation]

M. Basford: Puis-je demander un éclaircissement? Où ai-je dit que le bulletin serait publié tous les trois mois?

M. Rynard: Peut-être ne l'avez-vous pas dit, et je m'excuse, si vous ne l'avez pas dit, mais c'est ce que nous avons compris cet après-midi, que le bulletin serait publié tous les trois mois. Je m'en remets au président de décider si ce n'est pas ce que nous avions compris, que le bulletin serait publié tous les trois mois?

M. Basford: Je m'excuse, monsieur le président, si je vous ai donné cette impression.

M. Rynard: Je demande simplement au président si ce n'est pas l'impression que nous avions.

M. Basford: Je ne veux pas aller dans les détails, mais je crois qu'on a l'intention de publier tous les mois à partir d'octobre prochain.

M. Rynard: Alors vous allez publier le bulletin tous les mois?

M. Basford: Oui.

M. Rynard: Pas tous les trois mois.

M. Basford: Je ne me souviens pas d'avoir dit tous les trois mois.

M. Rynard: J'ai la certitude que certaines personnes ici ont entendu «tous les trois mois», cet après-midi.

M. Basford: De toute façon, il n'y a plus de malentendu maintenant.

M. Rynard: Alors si vous allez publier tous les mois, quand allons-nous le publier?

M. Basford: En octobre.

M. Rynard: Octobre?

M. Basford: Oui. Ce qui a retardé la publication c'est que la Direction des aliments et des drogues est consciencieuse et veut s'assurer que les renseignements publiés dans le bulletin sont exacts et que ce soit le genre de bulletin auquel la profession médicale peut faire confiance. Ce n'est pas le genre de chose que l'on puisse publier à la hâte, vous en conviendrez.

[Texte]

• 2030

Mr. Rynard: Yes. This is a process of education. It is all to the good and I would agree with this.

I would now like to come back to the clinical efficiency and the saving that is going to be made, and I think we have to be very careful in the economics of this that we do not wind up with a whole outlet of expenses that will cost the Canadian people more. According to the bulletin that was put out, the average price in 1956 was \$2.78. In 1967 it was \$3.57. The per capita expenditures in 1956 were \$6.85 and in 1967 the expenditures were \$11.35. The Saskatchewan figures showed that 40 per cent of all families had no expenditures at all, 66 per cent had expenditures of less than 20 per cent and 90 per cent had expenditures of less than 70 per cent.

The point I am trying to make here is that we have got to be very careful we do not overload, front-end load, and end up with nothing. Because what in effect you are saying this afternoon is that you are going to have duties on. In other words you are going to reduce the price but you are going to keep it up with those duties that would not let certain things in. You are taking a halfway measure, and I am wondering if you can go halfway down the cliff and still hang on and do a job.

That is why I wonder if we should not investigate this. As I said before, I would like to see it go back to the Steering Committee to bring the witnesses here who really know just what the situation is and can advise us and let us ask them the questions that are bothering us so that we will be able to know and come to the proper decision for the Canadian people.

The Chairman: Have you any other questions, Dr. Rynard? Any other questions, gentlemen?

Mr. Ritchie: Mr. Chairman, I was not here this afternoon; I got in late. I might say first of all that I represent a riding that could well do with having complete freedom of importation of drugs because other than a few PMU herds of horses we have no drug influence at all. Being an agricultural riding we export to areas where we could be expected to get our drugs from, such as Japan, Germany, and so on.

It seems to me very important to know what are the economic effects of this bill, and the power it gives to the drug licencing people to import drugs. If it does, will they export our manufacturing right out of the country? As I say, it would be in my interest

[Interprétation]

M. Rynard: J'en conviens puisqu'il s'agit d'un processus d'éducation. Je voudrais revenir à l'efficacité en clinique et l'épargne désirée. Il me semble qu'il faut être très prudent, qu'on ne se retrouve pas avec d'énormes dépenses qui coûteront énormément plus au peuple canadien. Le coût moyen en 1956, selon les bulletins, était \$2.78, contre \$3.57 en 1967. En 1956, les dépenses par habitant étaient de \$6.85 tandis que 10 ans plus tard elles étaient \$11.35. Les chiffres pour la Saskatchewan indiquent que 40 p. 100 des familles n'avaient aucune dépense et 66 p. 100 avaient des dépenses de moins de 20 p. 100, et 90 p. 100 avaient des dépenses de moins de 70 p. 100.

Ce que j'essaie d'établir c'est qu'il faut être très prudent, que les dépenses soient si fortes qu'on se retrouve avec rien. Vous dites que vous aller imposer des droits. Ce que vous allez faire, donc, c'est que vous maintiendrez le niveau de prix à cause de ces dépenses de douanes.

Voilà pourquoi je me demande si nous ne devrions pas étudier cette question de plus près. Je voudrais que la question puisse être renvoyée au comité directeur afin d'établir quelle est la situation au juste. Nous pourrions alors poser les questions qui nous inquiètent afin de prendre des décisions qui seront justes.

Le président: Y a-t-il d'autres questions D' Rynard? D'autres question D' Ritchie?

M. Ritchie: Monsieur le président, je n'étais pas ici cet après-midi. Conséquemment, je dois d'abord dire que je représente un comté où l'on voudrait une importation tout à fait libre parce que c'est un comté agricole et nous exportons de régions d'où nous nous attendons de recevoir des produits pharmaceutiques tel le Japon, l'Allemagne etc. Ce qui me semble très important, ce sont les conséquences économiques qui découleront de ce projet de loi. Quels sont les pouvoirs que ce projet de loi attribue aux autorités qui émettent les licences? Quelles seront les conséquences dans le comté que je représente, cela serait dans nos intérêts mais je ne sais pas si le pays en bénéficierait autant.

[Text]

and in the interest of the area I represent to do that. But, whether or not it would be in the interest of the country, I have certain reservations.

One drug company employs 320 research people; many of them are university people. If they were put out of business there would be no place for them in Canada. It is of some importance. As I see it, it depends on the issuer of licences what will happen to the drug industry. If they issue many licences, then it likely will be exported out of Canada. It might reduce the cost of manufacturing drugs somewhat, but there are many more drugs coming on the market. There are a lot of like drugs, which will probably increase the retail end because of the heavier stocks that will have to be carried.

Our drug industry is international. Most of our big drug companies are subsidiaries. If we are going to export, and make it so that our big drug companies make their drugs outside Canada and bring them in they will still make as much profit and maybe more. Even if the price is a little less, would it be doing much? The bill seems to be giving money towards the building up of a purely Canadian drug industry, largely apparently in the matter of like drugs.

This is of interest to me. Now, as I say, in a purely personal way it might be better if we manufactured no drugs in Canada, so far as my riding is concerned. But, it is an important thing.

The other thing is the clinical efficiencies. The people who prescribe drugs tend to be pretty conservative, with a small "c". If you make one mistake, it lasts forever. You become suspicious of drugs and you are careful not to prescribe. In prescribing I think the old motto "It is better to be safe than sorry", even if it costs more money, is very important. It is foremost in medical prescribing, particularly at the office level.

• 2035

I would like to point out too that this bill will presumably get more like drugs onto the market so that the increased competition can drive down the prices. However, the governments, for instance in the hospital field, are tending to move toward one drug. In the Province of Manitoba, for instance, the hospital people have only one tranquillizer that they are using this year. This is always available unless you are on a special drug which they can buy and bring in from outside. There are fifteen or a dozen tranquillizers on the market right now; what is the point of adding another two dozen if institutions over whole provinces are going to have only one

[Interpretation]

Il y a une compagnie de produits pharmaceutiques qui emploie 320 chercheurs. Si ces gens étaient sans emploi, ils ne trouveraient pas de poste ailleurs au Canada. Ainsi que je l'envisage, ceci dépend de l'autorité qui émet les licences obligatoires. Probablement, si l'on émet énormément de licences obligatoires, le coût de production des produits pharmaceutiques sera réduit probablement, mais notre propre industrie disparaîtra et il y aura un coût plus élevé au niveau des détaillants.

Nos entreprises de produits pharmaceutiques sont internationales. La plupart de nos entreprises sont des filiales de grandes maisons de l'étranger. Ces filiales continueront à réaliser les bénéfices qu'elles réalisent aujourd'hui même si le prix est réduit d'un peu. Ce projet de loi semble donner de l'argent aux fabricants de produits pharmaceutiques au Canada, surtout lorsqu'il s'agit de produits pharmaceutiques de peu de puissance.

Ceci m'intéresse énormément, ceci m'intéresse du point de vue personnel. Ce serait peut-être mieux que nous ne produisions pas des produits pharmaceutiques au Canada au moins en ce qui concerne mon comté. C'est une question importante.

L'autre question c'est l'efficacité en clinique. Les gens qui émettent des ordonnances sont d'habitude plutôt conservateurs. Si vous faites une erreur, l'erreur est une erreur dont l'effet continue à se perpétuer. Lorsque vous émettez une ordonnance, pensez au vieil adage: «Mieux vaut prévenir que guérir». Ceci est important au niveau du bureau du médecin.

Ce projet de loi présumément verra à ce que les prix des produits pharmaceutiques de puissance légère soient baissés. Mais les gouvernements, les hôpitaux semblent utiliser plutôt un produit pharmaceutique plutôt qu'une multiplicité de produits pharmaceutiques produisant le même effet. Par exemple, dans une province, il y a un hôpital qui ne sert que d'un tranquillisant plutôt que d'un grand nombre de tranquillisants. Il y a quinze ou vingt tranquillisants sur le marché. Pourquoi essayer de voir à ce qu'il y ait un plus grand nombre de tranquillisants de mis sur le marché? Ceci me semble illogique d'avoir plus de produits pharmaceutiques au niveau

[Texte]

drug. It seems to me inconsistent with the purpose of the bill to have more like drugs at the drugstore level, when in practice we are having fewer drugs at the institutional level.

Another point is the matter of compulsory licencing, which I think is of some importance. Compulsory licensing, I understand, has to be given at very low royalties. England, I understand, has this compulsory licencing, but the royalties are set at 20 to 30 to 100 times. If the royalties were set higher we would have more voluntary licencing. I think this would work where a foreign country had a patent on a drug in Canada but did not want to exploit the market. They might have no representative here. If the royalty was high enough, a Canadian manufacturer or drug company might take that up and exploit it.

Another thing about the introduction of new drugs, whether we like it or not nearly all the drugs in the world are going to be made and produced outside Canada; that is, new drugs. Will it be worthwhile for them to come into Canada? Most drugs are not automatically winners. Most drugs need long, hard promotion. Only once in a while, for instance when penicillin came along, is a drug an immediate hit. Most drugs hang around for years before they get wide acceptance, and they require a great deal of promotion by drug companies. In the giving of licences should this promotion cost be considered? I think this is a factor. If these promotion costs were considered we would probably get more voluntary licences and this, I think, would be to the good.

In the matter of safety, of course, so far as I can see, Food and Drug are not going to have clinical efficiency proven but will have the generic equivalent. This, of course, is a great bone of contention, but generally speaking those who prescribe tend to doubt generic equivalent and talk about clinical efficiency. Clinical efficiency is often their own experience. If it works well in one case, it will work well in another. The new safety features still do not have clinical efficiency, and yet they cannot because obviously to prove clinical efficiency requires an enormous cost and would be far more than all the savings we might make. So, we are back again to this, where it is. The best we can say is that Food and Drug will do the best they can.

I think in the matter of safety in drugs it is peculiarly important to be able to see the factory in which the drugs are made. I understand this is of considerable importance, more so than in most other things. A pill looks like a pill. It looks the same to the patient as to the doctor; it looks the same to

[Interprétation]

du pharmacien, et moins au niveau institutionnel.

Il y a aussi la question des licences obligatoires. Ceci est important. Il me semble qu'il faudrait donner des brevets à faible, à bas prix. C'est le cas en Angleterre, où les droits, sont de 20 à 30 p. 100. Cela s'appliquerait lorsqu'un pays étranger a un brevet sur un produit pharmaceutique au Canada mais ne veut pas l'exporter au Canada parce qu'il n'avait pas de représentant ici. Si les redevances étaient suffisamment élevées, le manufacturier canadien pourrait l'exploiter, l'utiliser.

On dit lorsque l'on veut introduire de nouveaux produits pharmaceutiques, la plupart des produits pharmaceutiques seront inventés au dehors du Canada. Est-ce que ça vaudrait la peine de les importer au Canada? La plupart de ces produits pharmaceutiques ne se vendent pas immédiatement. La pénicilline a été une exception. Il faut énormément de publicité pour que le public adopte ces produits pharmaceutiques. Est-ce que les coûts de la publicité doivent être pris en considération lorsqu'on émet les licences obligatoires? Il me semble que cela serait pour le mieux.

Dans la question de sécurité, les aliments et drogues ne verront pas à établir la sécurité en clinique mais l'équivalence générique. Il s'agit là d'une controverse mais ceux qui émettent des ordonnances mettent en question l'équivalence générique et parlent d'efficacité en clinique. Et souvent, ce qu'ils veulent dire par cette expression-là, c'est le résultat de leur expérience. Les nouveaux aspects de sécurité ne sont pas prouvés en clinique. L'efficacité à la suite d'expériences en clinique demande un énorme avertissement et nous perdriions toutes nos épargnes par ces expériences en clinique. Revenons donc au point de départ; les aliments et drogues feront de leur mieux naturellement.

Du point de vue de la sécurité, il est très important que l'on puisse voir l'entreprise où le produit pharmaceutique a été fabriqué. Ceci est d'une très grande importance. Une pilule a l'air d'une pilule et le médecin ne sait pas au juste quelle est la différence entre différentes pilules et cela est certainement vrai

[Text]

almost anybody. I think it is of great advantage to be able to have drugs manufactured from a safety point of view in Canadian factories where the drug inspector can go down and see what the premises are like, drop in unannounced and see if the factory is up to standard. We cannot do that if they are in Hungary or Japan or Hong Kong, although those countries have a fairly high level in many cases.

• 2040

About the periodic bulletin, well, I have a great deal of reservation about the value of that because there are already two on the market, put out by the drug people, which give wide information on drugs. When you come to saying what the prices will be, you would be accused of promoting drug A over drug B because it is cheaper. So then the drug B company comes back and says that drug A may be cheaper but ours tastes better, or something like that. There are many different factors that enter into drugs. I do not think the Food and Drug people should become involved in merchandising. I think to some extent they will be considered this way.

The efficiency of drugs is so debatable that it is very difficult to assess how good they are. I do not think this paper will be of any value. I was in England when they sent them around and the only time I ever saw the paper was when somebody said some iron drugs were cheaper than others and were just as good. It did not really mean very much. I am inclined to think it will not be of great value.

Those are a few of the points I would like answered. I would particularly like to know the economic effect of bringing in a large amount of drugs, and whether this would be good or not. It seems to me the bill may operate one against the other by having new Canadian drug firms, and yet we may tend to discourage them coming in, or discourage the ones that are already here and they will manufacture outside the country.

Finally, what about the new drugs coming along on the market? Will they be promoted? Generally speaking imitators will imitate only when a drug is being accepted widely. As stated, most drugs have slow acceptance. They are on the market for a long time before they get a large acceptance, and only after wide promotion. So if the foreign drug companies on whom we pretty well have to depend for new drugs are slow to bring this on, or if once they get it into the market they can dampen it down so it is not very attractive to the imitators, such as cutting down on detailing cutting back on literature, or just

[Interpretation]

de voir que les produits pharmaceutiques soient fabriqués dans des entreprises canadiennes où l'inspecteur des aliments et drogues peut aller visiter l'entreprise et décider si les locaux sont en conformité avec nos normes. Et l'inspecteur ne peut pas faire cela si l'entreprise est au Japon ou ailleurs.

Je me demande quelle sera la valeur du bulletin parce qu'il y a déjà des bulletins du genre qui sont émis par les aliments et drogues et où se trouvent énormément de renseignements. Lorsque vous posez la question: «quels en seront les prix?», il est question de donner plus de publicité à un produit pharmaceutique «A» qu'à un produit pharmaceutique «B» mais peut-être que l'un est moins cher que l'autre mais le deuxième a meilleur goût. Il y a énormément de facteurs qui entrent en ligne de compte. Je ne crois pas que le genre des aliments et drogues doive s'occuper de la mise en vente et dans certains cas, on risque d'envisager qui devrait le faire.

L'efficacité de ce service est sujet à controverse; c'est pourquoi il est très difficile d'évaluer à quel point ces services sont efficaces et je ne sais pas si ces documents ont la moindre valeur. J'étais en Angleterre lorsqu'on envoyait ce genre de documents et parfois, il était déclaré que certains médicaments étaient moins chers que d'autres et étaient tout aussi bons mais cela ne voulait pas dire grand-chose. Je ne pense pas que ce document aurait une très grande valeur.

Voilà quelques-unes des questions que je voulais poser. Je voudrais savoir quel est le facteur économique, quel sera l'effet de l'importation en grande quantité de médicaments. Il est possible que le bill fasse jouer l'un contre l'autre en créant de nouvelles sociétés pharmaceutiques canadiennes mais nous encouragerons peut-être celles qui sont déjà ici et nous leur ferons fabriquer d'autres produits.

Et qu'en est-il des nouveaux produits pharmaceutiques qui seront lancés sur le marché? Comment fera-t-on leur publicité? En général, les imitateurs n'imitent un produit qu'une fois qu'il est généralement accepté. La plupart des médicaments sont longtemps sur le marché avant d'être très largement acceptés et après une longue campagne de publicité. Donc, si les sociétés pharmaceutiques étrangères, celles sur lesquelles nous devons compter pour avoir de nouveaux médicaments, sont lentes à introduire leurs produits ou ne pourraient pas donner trop de détails pour que les imitateurs ne puissent pas les imiter,

[Texte]

not having the stock available, or keeping it in Food and Drug by reporting all adverse things that may happen to it, or even suspicions that may arise, then we would be doing ourselves a disservice. I am not qualified to say what effect this will have on the drug industry and whether we would export it or not. I would like to hear from people who would know.

Of course there are counterfeit drugs. They seem to be widespread in the United States, although apparently it is not very bad or prevalent in this country. Likely in the future under any law, whether this one is passed or not, we will have many more counterfeit drugs, because I think it is a lucrative field in which to make money. The more drugs we have on the market and the more like drugs we have on the market, I am sure the more counterfeiting and the easier counterfeiting there will be.

This is not a reason we should not have as many like drugs as we would consider useful to our drug business. However, I think we have to consider safety, and so on, and all in all with the high cost of distribution of all drugs in a country such as Canada with our widespread population, whether or not we will get the price of drugs down appreciably. After all, 50 per cent of the drugstore price is bound up in the druggist's price, on the average.

• 2045

As I stated before in the House, the prescription practices of doctors tend not to make them economy minded because a cheap drug is priced up due to the prescription practice of fee for service, and the more expensive drug tends to be priced down. Therefore, there is much less influence on a doctor to give a cheaper drug than there used to be when the pricing system at the retail level was 100 per cent markup. Those are all the comments I wish to make.

Mr. Basford: Mr. Chairman, I am under some difficulty because I am not a member of the Committee. I have already made a statement. I am not sure whether we are operating under the new rules or not, but I am really not used to a committee at which we all make speeches. I made my speech earlier in the day. I am here as a witness and am in the hands of the Committee. If people want to ask me or my officials questions or closely cross-examine us we are here to be cross-examined.

[Interprétation]

ou ne donnent pas suffisamment de documents, en faisant rapport aux «Aliments et drogues» de tous les effets néfastes des produits, alors, en fait, nous nous rendrions un bien mauvais service si nous faisons cela. Je voudrais avoir quelques réponses. Je ne suis certainement pas qualifié pour dire quels effets cela aura sur l'industrie des médicaments. Je ne sais pas si cela nous permettra d'exporter. Je voudrais que les gens informés me répondent.

Il y a des produits contrefaits, ils sont très répandus aux États-Unis, la situation n'est pas très grave ou très répandue au Canada; mais à l'avenir, quelle que soit la loi, il y aura certainement beaucoup plus de produits contrefaits car cela permettra aux gens de gagner de l'argent. Plus nous aurons de médicaments, plus nous aurons de contrefaçons, plus il sera facile de contrefaire les produits.

Il est évidemment parfaitement acceptable d'avoir autant de médicaments que cela est jugé nécessaire pour le pays. Mais il faut prévoir une certaine sécurité étant donné les coûts élevés de la distribution des produits pharmaceutiques au Canada dont la population est très éparpillée. La question est de savoir si nous ferons beaucoup baisser le prix des médicaments. Après tout, 50 p. 100 du prix d'un médicament sont le bénéfice du pharmacien.

Comme je l'ai déjà dit à la Chambre, le système en matière d'ordonnances ne pousse pas les médecins à penser à l'économie, car un produit pharmaceutique bon marché voit son prix augmenter, en raison de l'habitude de faire payer la préparation de l'ordonnance, tandis qu'on abaisse généralement le prix des médicaments coûteux. Donc, un médecin aura beaucoup moins tendance à prescrire un médicament bon marché qu'à l'époque où il y avait des marges bénéficiaires de l'ordre de 100 p. 100 au niveau de la vente de détail. Voilà tout ce que j'avais à dire.

M. Basford: Monsieur le président, j'éprouve quelques difficultés, car je ne fais pas partie du Comité. J'ai déjà fait une déclaration. Je ne sais pas si nous suivons le nouveau règlement, mais je n'ai vraiment pas l'habitude d'un comité où tout le monde fait des discours. J'ai déjà fait mon discours plus tôt. Je suis ici à titre de témoin, et je suis à la disposition du Comité. Si vous voulez me poser des questions ou poser des questions à mes fonctionnaires, et nous soumettre à un interrogatoire contradictoire, nous sommes ici pour vous répondre.

[Text]

The Chairman: May I point out, Mr. Ritchie, that most of your questions have been answered this afternoon and if you want to specify your questions, I am sure the Minister will have no objections to answering the same questions again. However, you will have to specify your questions.

Mr. Robinson: Mr. Chairman, may I ask a supplementary question related to the statement that was made by the honourable gentleman? He mentioned, or I believe it was Dr. Rynard, certain statistics in this Harley report about which we are not too concerned in some respects, but I was wondering since it only goes up to the year 1963, are additional statistics for the years 1964, 1965 and 1966 available or could they be made readily available?

Mr. Basford: After so many questions, I am not sure what statistics or figures the doctor was referring to, but if Dr. Rynard was referring to Appendix F of the Harley Committee which was inserted in the Harley Committee Report to support the proposition in the Harley Committee that prescription drugs in Canada were unduly high in price—that is Appendix F—that table was updated from the same sources of information for the speech in support of second reading given by my predecessor, the honourable John Turner, when he moved second reading in the House.

They were again updated for me in the speech I made in support of second reading in October, so Appendix F of the Harley Report which was used by the Harley Committee of which Dr. Rynard was a member to support the statement that drug prices in Canada were unduly high was updated as of last October, and there are comparable figures in comparable drugs and from the same source.

Now, I am not sure what figures you want updated, but those are the figures we updated and they are updated.

Mr. Robinson: I was wondering, Mr. Chairman, if the trend was basically the same. If the trend is the same, there would not appear to be any requirement for obtaining additional statistics.

Mr. Basford: The information we have is that in terms of price there has been no significant change and no significant trend from the figures of the Harley Committee, Appen-

[Interpretation]

Le président: Permettez-moi de vous faire remarquer, monsieur Ritchie, que la plupart de vos questions ont reçu des réponses cet après-midi. Si vous voulez préciser vos questions, je suis certain que le ministre n'hésitera pas à vous répondre à nouveau. Mais il faudra que vous précisiez vos questions.

M. Robinson: Monsieur le président, j'ai une question supplémentaire à la suite de la déclaration de l'honorable député. Il a mentionné—ou peut-être était-ce M. Rynard—certaines données statistiques du rapport Harley qui ne nous importaient pas beaucoup à certains égards, mais je me demandais, étant donné que ces chiffres n'allaient que jusqu'à l'année 1963, s'il y avait des données supplémentaires pour les années 1964, 1965 et 1966, ou si l'on pourrait se les procurer facilement.

M. Basford: Après toutes ces questions, je ne sais plus très bien quels sont les chiffres ou les données statistiques dont parlait le docteur. Cependant, si le docteur Rynard parlait de l'Annexe F du rapport du Comité Harley, c'est-à-dire du tableau figurant au rapport à l'appui des affirmations du Comité Harley selon lesquelles les médicaments prescrits sur ordonnance au Canada étaient anormalement coûteux, il s'agit de l'Annexe F, et ce tableau a été mis à jour à partir des mêmes sources de renseignements que pour le discours en faveur d'une deuxième lecture de mon prédécesseur, l'honorable John Turner, lorsqu'il avait proposé la deuxième lecture à la Chambre.

Ces chiffres ont été de nouveau mis à jour pour moi, pour le discours que j'ai fait en faveur d'une deuxième lecture en octobre. Donc, les chiffres donnés à l'Annexe F du rapport Harley, et dont s'était servi le Comité Harley, dont faisait partie le docteur Rynard, pour prouver que les prix des médicaments étaient anormalement élevés au Canada, ont été mis à jour en octobre dernier, et ce sont des chiffres comparables, pour des médicaments comparables venant des mêmes sources. Je ne sais pas quels chiffres vous voulez voir mis à jour, mais ces chiffres-là sont ceux que nous avons mis à jour, et ce sont les chiffres actuels.

M. Robinson: Monsieur le président, je me demandais si la tendance était toujours la même. Si la tendance est la même, il ne sera pas nécessaire d'obtenir des données statistiques supplémentaires.

M. Basford: D'après les renseignements que nous avons en ce qui concerne les prix, il n'y a pas eu de changement significatif ni de tendance significative depuis les chiffres que

[Texte]

dix F, and the same table that has been updated to October, 1968.

The Chairman: Are there any other questions? Do you have any specific questions, Dr. Ritchie?

Mr. Ritchie: Mr. Chairman, I do not know to whom to address this question. Is there any projected figures of the cost of the new safety measures and the directorate in Europe, and are you having one in the Orient too?

Mr. Basford: As Mr. Gendron said in the House on Friday, January 17, speaking on behalf of his Minister, for the present fiscal year—and I do not want to get too involved in the affairs of my colleague's department, the Department of National Health and Welfare, and the Food and Drug Directorate—11 positions have been authorized and filled in the Food and Drug Directorate and another 22 authorized.

I do not have the Estimates in front of me and I cannot give you the figures of what that additional establishment costs. We could have the figures very quickly for you.

• 2050

Mr. Ritchie: What types of people are involved? That is, are they clerks and so on or only university or pharmaceutical people?

Mr. Basford: I do not know, Mr. Chairman, whether Dr. Chapman is ready to answer this question.

Dr. R. A. Chapman (Director General, Food and Drug Directorate, Department of National Health and Welfare): Mr. Chairman, with regard to resources, as the Minister has indicated we were provided with 11 additional positions for the monitoring of drugs in the fiscal year 1968-69, and 22 additional man-years were provided specifically for this purpose for the fiscal year 1969-70. Those would be available as of April 1, 1969.

This is in addition to the over-all increase in the projected total man-years for the Food and Drug Directorate. As of December 31 the projected man-years for the next fiscal year permit an increase of approximately 30 per cent—30 per cent—which, in my opinion as head of that organization, will provide us with the resources that we can absorb and fully utilize in this area, as well as the other areas of our responsibility.

[Interprétation]

nous avons eus dans l'Annexe F du rapport Harley et le même tableau, remis à jour en octobre 1968.

Le président: Est-ce qu'il y a d'autres questions? Avez-vous des questions précises à poser, M. Ritchie?

M. Ritchie: Monsieur le président, je ne sais pas à qui s'adresse cette question. Est-ce qu'on a fait des projections en ce qui concerne le coût des nouvelles mesures de sécurité et de la direction en Europe, et y en a-t-il une en Orient également?

M. Basford: Comme l'a dit M. Gendron à la Chambre le vendredi 17 janvier, lorsqu'il parlait au nom de son ministre, pour l'année financière en cours—et je ne veux pas me mêler trop des affaires du ministère de mon collègue, le ministre de la Santé nationale et du Bien-être social, et la Direction des aliments et drogues—11 postes ont été autorisés et remplis, dans la Direction des aliments et drogues, et 22 autres postes ont été autorisés. Je n'ai pas le Budget sous la main, et je ne peux pas vous dire combien coûte ce personnel supplémentaire, mais nous pourrions vous fournir ces chiffres très rapidement.

M. Ritchie: Quels sont ces gens? Est-ce qu'il s'agit d'employés de bureau, etc., ou seulement d'universitaires et de spécialistes en pharmacie?

M. Basford: Je ne sais pas, monsieur le président, si M. Chapman pourrait répondre à cette question.

Dr. R. A. Chapman (directeur général, Direction des aliments et drogues, ministère de la Santé nationale et du Bien-être social): Monsieur le président, en ce qui concerne les ressources, comme l'a dit le ministre, on nous a donné 11 postes supplémentaires pour l'administration des drogues pour l'année financière 1968-1969, et 22 années-homme supplémentaires ont été accordées dans ce but précis pour l'année 1969-1970. Nous pourrions en disposer à partir du 1^{er} avril 1969.

Cela vient en plus de l'augmentation générale du nombre total projeté d'années-homme pour la Direction des aliments et drogues. À partir du 31 décembre, le nombre projeté d'années-homme pour la prochaine année financière permet une augmentation d'environ 30 p. 100. Ce qui, à mon avis, en tant que chef de cette organisation, nous fournira les ressources que nous pouvons absorber et utiliser entièrement dans ce domaine, ainsi que dans les autres domaines dont nous sommes chargés.

[Text]

Mr. Ritchie: What is the projected cost of the Food and Drug Directorate including your increase?

Dr. Chapman: I should point out that these are projected figures only and, of course, as you and everybody recognizes, these must be approved by Parliament. However, these are the projected figures. The projected total estimates for the Food and Drug Directorate for 1969-70 would be \$11,698,500.

Mr. Basford: I do not want to lobby on behalf of the Department of National Health and Welfare, but I assume by the concern for safety you will have no trouble getting your estimates approved.

Mr. Saltsman: May I have that figure again?

Mr. Ritchie: Have you any trouble getting the personnel?

The Chairman: Gentlemen, Dr. Ritchie has the floor. Is that a supplementary?

Mr. Saltsman: I was just wondering whether I could have that figure repeated—the total expenditure.

Dr. Chapman: It is \$11,698,500.

Mr. Saltsman: This seems to represent about one-quarter of the expenditure of the drug industry for marketing. Now, what we are talking about here is whether four times as much money should be spent on huckstering drugs as on investigating their safety, all nicely deductible.

Mr. Basford: Of course, the submission by the government is, first, that we are spending sufficient money, or will be, on examining the safety of drugs, and our submission is that there is too much spent on huckstering and that is the purpose of the Bill. We hope that the amount might be reduced as a result of the competition being created by this bill.

Mr. Saltsman: Appendix G of the Harley report shows figures of approximately \$44 million spent as marketing expenses of 41 companies.

Mr. Basford: Yes it is our submission, as I was saying this afternoon when people were concerned about the future of the drug industry, that that \$44 million represents a rather comfortable cushion against which competition can operate, and we hope to develop more competitive conditions in the

[Interpretation]

M. Ritchie: Quelle est la projection du coût de la Direction des aliments et drogues, en tenant compte de cette augmentation?

Dr. Chapman: Notez bien que ces chiffres ne sont que des projections, et que, comme vous le savez et comme tout le monde le sait, ils doivent être approuvés par le Parlement. Mais voici la projection des chiffres. La projection du budget total de la Direction des aliments et drogues pour l'année 1969-1970 serait de \$11,698,500.

M. Basford: Je ne veux pas chercher à influencer la Chambre en faveur de la Direction des aliments et drogues, mais je suppose que vous n'aurez aucune difficulté à faire approuver votre budget, étant donné le souci que l'on a de la sécurité.

M. Saltsman: Pourriez-vous me redonner ce chiffre?

M. Ritchie: Avez-vous des difficultés à obtenir le personnel nécessaire?

Le président: Messieurs, M. Ritchie a la parole. Est-ce une question supplémentaire?

M. Saltsman: Je me demandais simplement si l'on pourrait me redonner le chiffre total des dépenses.

Dr. Chapman: 11,698,500 dollars.

M. Saltsman: C'est environ un quart des dépenses de l'industrie pharmaceutique pour la mise en vente. La question ici est de savoir si l'on doit dépenser quatre fois plus d'argent pour vendre les médicaments, que l'on peut déduire des impôts, que pour vérifier leur sécurité.

M. Basford: La position du gouvernement est celle-ci: nous dépensons, ou nous dépense-rions, suffisamment d'argent pour nous assurer de la sécurité des médicaments; et à notre avis, on dépense trop d'argent pour revendre les drogues—et c'est là l'objet du Bill. Nous espérons que le Bill, en encourageant la concurrence, va faire baisser le prix de revente des médicaments.

M. Saltsman: A l'Annexe G du rapport Harley, on donne un chiffre d'environ 44 millions de dollars dépensés par 41 sociétés pour la commercialisation.

M. Basford: A notre avis—et comme je le disais cet après-midi lorsqu'on se souciait de l'avenir de l'industrie pharmaceutique—ces 44 millions représentent une marge très confortable pour permettre à la concurrence de jouer, et nous espérons développer la concurrence dans l'industrie. Ce secteur de l'indus-

[Texte]

industry. The part of the industry that some members are so concerned about is spending \$44 million on promotion as you point out, Mr. Saltzman, and they could well reduce that and remain competitive.

• 2055

The Chairman: Dr. Ritchie has the floor. Dr. Chapman, are you through?

Dr. Chapman: Yes; those are the comments I had to make.

Mr. Émard: I have a supplementary. How does \$11 million compare with the income tax that the government gets from the pharmaceutical industry?

Mr. Basford: I do not have figures in front of me showing corporate tax revenue from the drug industry. I am, quite frankly, not sure whether those figures are available. I do not know whether the Department of National Revenue breaks those sorts of figures down as to industry groups.

Dr. Chapman: Mr. Chairman, I probably should point out, of course, that this budget I have mentioned covers all our activities and includes foods as well as drugs.

Mr. Ritchie: Mr. Chairman, may I ask whether the laboratory is included in the projected costs? I believe a considerable number of new machines, and so on is being purchased. Is that included?

Dr. Chapman: Yes, Mr. Chairman, it is. We are planning over the next fiscal year to develop as far as we can automated methods for the assay of drugs in order that we can increase the number of drugs we can assay and thus increase the possibility of picking up any drugs on the Canadian market that might not be up to potency or up to standards.

Mr. Ritchie: This includes your European operation. Are you operating in the Orient or do you intend to operate in the Orient?

Dr. Chapman: No, sir, we do not. We propose to have a senior officer of our Directorate stationed in London. This officer would operate out of London, maintaining contact with ministries of health and drug control agencies in the countries from which we are importing drugs. Through our drug notification requirements, we now have a complete

[Interprétation]

trie qui soulève tellement d'inquiétude chez certains députés—dépense 44 millions de dollars en publicité—comme vous le faites remarquer, monsieur Saltzman—et il pourrait très bien réduire ce montant et soutenir malgré tout la concurrence.

Le président: C'est M. Ritchie qui a la parole. Avez-vous terminé, docteur Chapman?

Dr Chapman: Oui. C'est tout ce que j'avais à dire.

M. Émard: Une question supplémentaire. Quel est le rapport proportionnel entre ce chiffre de 11 millions de dollars et le montant d'impôts que touche le gouvernement de l'industrie pharmaceutique?

M. Basford: Je n'ai pas ici le chiffre des recettes de l'impôt sur les sociétés provenant de l'industrie pharmaceutique. A vrai dire, je ne sais pas si ces chiffres sont disponibles. J'ignore si le ministère du Revenu national fait la ventilation de ces chiffres par groupes d'industries.

Dr Chapman: Monsieur le président, je devrais faire remarquer que, bien entendu, le budget dont j'ai parlé couvre toutes nos activités, c'est-à-dire aussi bien les aliments que les médicaments.

M. Ritchie: Monsieur le président, puis-je demander si, dans la projection des coûts, on a inclus le laboratoire? Est-ce que cela comprend toutes les nouvelles machines, etc., que vous achetez à l'heure actuelle?

Dr Chapman: Oui, monsieur le président. Nous avons l'intention, au cours de la prochaine année financière, de développer dans toute la mesure du possible les méthodes automatisées pour l'essai des médicaments, ce qui nous permettra d'évaluer un plus grand nombre de médicaments, et, donc, augmentera nos chances d'éliminer du marché canadien tout médicament qui ne serait pas assez efficace ou ne serait pas conforme aux normes établies.

M. Ritchie: Cela inclut vos travaux en Europe. Est-ce que vous opérez aussi, ou avez l'intention d'opérer, en Orient?

Dr Chapman: Non, monsieur. Nous nous proposons d'avoir un fonctionnaire supérieur de notre Direction à Londres. Il travaillera de Londres, et restera en contact avec le ministère de la Santé et les organismes de réglementation des médicaments des divers pays desquels nous importons des médicaments. Grâce à l'obligation de signaler tout médica-

[Text]

list of all the drugs imported into Canada and the companies from which these products are imported.

We have already contacted the health authorities in the European countries, and we were very gratified with the response that we got. They have offered to co-operate with us in all cases, and to assist us in monitoring particularly the manufacturing facilities and controls in the factories in which these imported drugs would be produced.

Mr. Ritchie: I believe Dr. Chapman would be the one to ask about this. I understand that if this bill goes through, anyone will be able to sit down and write to any manufacturer in any foreign country and get say, tetracycline from Hungary, get a certificate and bring that into this country, assuming you will issue him a licence to do so. Is that so?

Dr. Chapman: Mr. Chairman, I should like to point out that as of May of this year two regulations were adopted that I think would put a stop to the sort of thing you suggest if the quality of this product were in question in any way. These read:

C.01.055. No person shall import into Canada for sale a drug in dosage form unless the person seeking to import the drug has available in Canada information and evidence that the conditions prescribed in section C.01.052.

And this is the section relating to Manufacturing Facilities and Controls

have been met in respect of that drug and at the Director's request furnishes to him such information and evidence.

Therefore, at the present time if an importer of a drug does not have that information and evidence available in Canada, he is in violation of this regulation. He must actually have it here and it must be available on request. Of course, our European representative would be able to check out the information that might be presented to us, and this is certainly one of the tasks that will be assigned to that officer. Furthermore,

C.01.056. No person who imports a drug in dosage form into Canada shall sell any lot or batch of that drug unless

(a) each lot or batch of the drug in dosage form has been tested in Canada by an acceptable method to ensure identi-

[Interpretation]

ment, nous avons maintenant une liste complète de tous les médicaments importés au Canada et des sociétés qui exportent ces médicaments.

Nous avons déjà établi des contacts avec les autorités sanitaires des pays européens, et nous avons été très satisfaits de leur réaction. Elles nous ont offert de collaborer avec nous dans tous les cas, et de nous aider à étudier les installations de fabrication et de contrôle des usines où sont produits les médicaments que nous importons.

M. Ritchie: Je pense que ma question devrait s'adresser au docteur Chapman. Si je comprends bien, si ce Bill est adopté, n'importe qui pourra écrire à un fabricant d'un pays étranger et obtenir, par exemple, de la tétracycline de Hongrie, obtenir un certificat, et faire venir ce médicament au Canada à condition que vous émettiez à la personne en question un permis pour le faire. Est-ce exact?

Dr. Chapman: Monsieur le président, j'aimerais vous signaler qu'à partir du mois de mai de cette année, deux règlements qui ont été adoptés vont mettre fin à la chose dont vous parlez, s'il y avait le moindre doute quant à la qualité du médicament. On y dit:

Aucune personne n'importera au Canada aux fins de mise en vente, une drogue sous sa forme posologique à moins de posséder au Canada des précisions et des preuves démontrant que, en ce qui regarde ladite preuve, les conditions de fabrication décrites à l'article C. 01. 052...

Et voici la section relative aux installations et au contrôle de la fabrication:

...ont été observées, et que, à la demande du directeur, elle lui fournisse ces précisions et ces preuves.

Donc, à l'heure actuelle, si l'importateur d'un médicament n'a pas au Canada les précisions et les preuves voulues, il est en contravention du règlement. Il doit les avoir ici, et elles doivent être disponibles sur demande. Bien sûr, notre représentant en Europe pourrait vérifier les renseignements que l'on nous présenterait, et ce sera certainement l'une des tâches qu'on va lui imposer. De plus, on dit, à l'article C. 01. 056:

Aucune personne qui importe au Canada une drogue sous sa forme posologique ne vendra aucun lot de cette drogue, à moins que

(a) chaque lot de cette drogue sous sa forme posologique ait subi des épreuves

[Texte]

ty, potency and purity for its recommended use; or

(b) evidence is available in Canada, satisfactory to the Director, that each lot or batch of the drug in dosage form has been adequately tested in the country of origin.

I might explain this qualification in the last subparagraph that I read. We felt there would be instances, for example a drug imported from the United States from the Parke Davis and Company plant in Detroit, where a certificate of analysis from that plant would be sufficient and we would not require that that batch be tested or that all the tests would need to be run on that batch. I would certainly feel that the company importing it into Canada would wish to run an identity test at least but it might not be necessary for them to run all the tests, to repeat all the tests. But if we are not familiar with that company, we are certainly going to insist that each lot or batch of the drug in dosage form be adequately tested in this country, in Canada.

Mr. Ritchie: Then, Mr. Chairman, anybody can import a drug and sell it so long as the material he imports meets your recommendation and you give him a licence to do that. Or have you any power not to give a licence? And as drugs come up to standard, would you be almost automatically bound to give anyone a licence?

Dr. Chapman: I should point out, Mr. Chairman, that we cannot issue licences except in the case of the biologics. This is the only group of drugs for which we have the authority under the Food and Drugs Act and Regulations to issue licences, so there is no question of granting a licence for the type of drugs that we have been discussing as far as the Food and Drug Directorate is concerned.

Mr. Rock: A supplementary question. What action would your Department take if, after an imported drug had passed its tests, it were found out perhaps two or three years later that its potency was not up to par, and this drug had been purchased in Europe, had gone through an importer and a distributor, then to the retail outlet? How would you then remove it from the market after this legislation had gone through? Will we have a large influx of imported drugs in the future?

Dr. Chapman: I would assume that under these circumstances there would be a Canadian distributor that would be responsible for

[Interprétation]

au Canada, d'après une méthode acceptable, assurant son identité, son activité et sa pureté selon l'usage recommandé; ou

(b) soit disponible au Canada, à la satisfaction du Directeur, la preuve que chaque lot de la drogue sous sa forme posologique a subi les épreuves reconnues dans son pays d'origine.

Je pourrais expliquer ce dernier paragraphe. Nous avons estimé qu'il y aurait des cas, par exemple celui d'un médicament importé des États-Unis, de l'usine *Parke Davis and Company* à Détroit, où un certificat d'analyse de cette usine suffirait et où nous n'aurions pas à essayer ce lot de médicaments ou à le soumettre à toutes les analyses. Je crois que la société qui importe ce médicament au Canada voudrait au moins faire un test d'identité, mais il ne serait peut-être pas essentiel qu'elle refasse tous les tests. Mais si nous ne connaissons pas la société en question, nous allons assurément exiger que chaque lot du médicament sous sa forme posologique soit essayé de façon complète au Canada.

M. Ritchie: Donc, monsieur le président, n'importe qui peut importer un médicament et le vendre pourvu que le produit qu'il importe satisfasse vos exigences et que vous accordez à la personne un permis pour ce faire. Ou avez-vous le pouvoir de refuser un permis? Si les médicaments satisfont vos normes, êtes-vous presque automatiquement tenus d'accorder un permis à tout requérant?

Dr Chapman: Je devrais préciser, monsieur le président, que nous ne pouvons donner de permis que dans le cas des médicaments biologiques. C'est le seul groupe de médicaments pour lequel nous puissions, en vertu de la Loi et des règlements des aliments et drogues, accorder des permis. Nous ne pouvons accorder de permis pour le genre de drogues dont nous avons parlé.

M. Rock: Une question complémentaire. Quelles mesures prendrait votre ministère si, après qu'un médicament importé eût subi les tests, on découvrait, peut-être deux ou trois ans plus tard, que le médicament n'était pas assez fort, et que ce médicament eût été acheté en Europe, eût passé par un importateur et un vendeur de gros et eût ensuite été vendu au détail? Comment pourriez-vous alors le retirer du marché, une fois cette loi adoptée. Allons-nous à l'avenir importer beaucoup de médicaments.

Dr Chapman: Je suppose que dans ce cas il y aurait un vendeur de gros au Canada qui serait responsable du médicament en ques-

[Text]

that drug. However, if this were not the case, or if we did not feel that this particular company was capable of withdrawing that drug from the market and it represented a hazard to health, then we would issue a general warning to the general public and to all pharmacists and physicians that this particular drug was not up to potency and might represent a hazard to health. At the same time we would have our inspectors, who are stationed all across Canada, visit all outlets where this drug might be found, and they would pick it up and seize the drug.

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Mr. Basford: You procedures, Doctor, would not vary from the situation now.

Dr. Chapman: That is correct.

Mr. Rock: You mention a specific drug. I am sorry I meant a lot or a batch. In other words, if something was wrong with only that batch or that lot, not all the drug, how would you remove it from the shelves of the druggist?

Dr. Chapman: Mr. Chairman, this product of course would be required to carry a lot number, and when we issue a general recall we also give the lot number and request that that lot not be used. If for any reason there was a problem with that lot number, we would simply issue a general recall and recall all of that drug on the market.

Mr. Rock: Would it be the same as at present?

Dr. Chapman: Yes. The procedure would be exactly the same as the one we now employ.

The Chairman: Mr. Foster, a supplementary?

Mr. Foster: My supplementary is along the same lines, Dr. Chapman. Dr. Rynard has mentioned his concern about the clinical trials. As far as your Department is concerned, if this Bill goes into effect the procedures will be identical to what is taking place now, will they not? Except that you will have a larger number of applications for approval.

Dr. Chapman: Yes, Mr. Chairman, this is correct. Now, if I might, I would like to quote a paragraph or two from the report of the Task Force on Prescription Drugs. This is the second interim report and recommendations, August 30, 1968, to the Office of the Secretary, U.S. Department of Health Education,

[Interpretation]

tion. Toutefois, s'il n'y en avait pas, ou si nous estimions que la société en question ne pût pas retirer ce médicament du marché, et qu'il représentât une menace pour la santé, nous émettrions un avis au grand public, à tous les pharmaciens et à tous les médecins pour les avertir que ce médicament n'était pas assez fort et pourrait représenter un risque pour la santé. En même temps, nous demanderions à nos inspecteurs dans tout le Canada d'inspecter tous les détaillants où le médicament pourrait être vendu, et ils en prendraient possession et le confisqueraient.

M. Basford: Votre façon de procéder, docteur, serait la même qu'à l'heure actuelle.

Dr. Chapman: C'est exact.

M. Rock: Mais vous parlez d'un médicament précis. Non, pardon, d'un «lot» précis d'un médicament. Autrement dit, si seul ce lot-là était défectueux, et non le médicament lui-même, comment pourriez-vous retirer des étalages de pharmacie ce lot en particulier?

Dr. Chapman: Monsieur le président, le produit devrait, bien entendu, avoir un numéro de série, et, lorsque nous émettons un avis de rappel, nous donnons aussi le numéro du lot et nous demandons que ce lot ne soit pas utilisé. Si par hasard il y avait des difficultés avec le numéro du lot, nous émettrions simplement un rappel général, pour retirer tous les lots de ce médicament du marché.

M. Rock: Serait-ce le même procédé qu'à l'heure actuelle?

Dr. Chapman: Oui. La façon de procéder serait la même que celle que nous utilisons à l'heure actuelle.

Le président: Une question supplémentaire, monsieur Foster?

M. Foster: Ma question supplémentaire est du même ordre, monsieur le président. Le Dr. Rynard a exprimé son souci des tests cliniques. Pour ce qui est de votre Ministère, si le Bill est adopté, la façon de procéder sera la même qu'à l'heure actuelle, n'est-ce pas? La seule différence sera que vous aurez un nombre beaucoup plus considérable de demandes à approuver.

Dr. Chapman: Oui, monsieur le président, c'est exact. J'aimerais maintenant vous citer un paragraphe ou deux du rapport du groupe d'étude sur les médicaments prescrits sur ordonnance. Il s'agit du deuxième rapport intérimaire et des recommandations, en date du 30 août 1968, au bureau du secrétaire du

[Texte]

and Welfare, Washington D.C. Now, of course, the government and the government department responsible for the quality of drugs in the United States are having exactly the same sort of problem in relation to clinical equivalency and therapeutic effectiveness of drugs as we are having in Canada. And there is a section here relating to drug quality. It reads:

During the past several years, the clinical equivalency of generic name products has been the center of particularly heated controversy.

This issue may be presented as follows:

—Given two drug products containing essentially the same amount of the same active ingredient—that is, two chemical equivalents—will they give essentially the same clinical effects?

...

The Task Force has found, however, that lack of clinical equivalency among chemical equivalents meeting all official standards...

And this is important.

...meeting all official standards has been grossly exaggerated as a major hazard to the public health. Where low-cost chemical equivalents have been employed—in foreign drug programs, in leading American hospitals, in State welfare programs, in Veterans Administration and Public Health Service hospitals, and in American military operations—instances of clinical nonequivalency have seldom been reported, and few of these have had significant therapeutic consequences.

Our experience in this country is very much the same, and we are doing everything we possibly can to develop methods whereby we can determine the biological equivalency based on the availability in the blood stream of drugs administered to humans and relate as far as possible this biological availability to chemical and physical properties of the drug, in order that we can apply these tests to a large number of drugs which in turn will give us an indication of their biological availability, and certainly in practically all instances, an indication of their therapeutic effectiveness.

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Mr. Rynard: A supplementary question, Mr. Chairman. How many people, or how many of your staff are doing this now, Dr. Chapman?

[Interprétation]

ministère américain de la santé, de l'éducation et du bien-être, à Washington (D.C.) Évidemment, le gouvernement et le ministère chargés de veiller à la qualité des médicaments aux États-Unis ont exactement les mêmes problèmes que nous, au Canada, en ce qui concerne les équivalences cliniques et l'efficacité thérapeutique des médicaments.

Il y a une section du rapport qui a trait à la qualité des médicaments. On y dit que:

Au cours des dernières années, les équivalences cliniques des médicaments à nom générique ont fait l'objet de violentes controverses. La question peut se présenter ainsi: deux produits pharmaceutiques qui contiennent à très peu de choses près la même quantité des mêmes ingrédients actifs, c'est-à-dire deux équivalents chimiques, ont-ils à peu de choses près les mêmes effets cliniques? Toutefois, le groupe d'étude a découvert que le manque d'équivalence clinique dans les équivalents chimiques qui satisfont à toutes les normes officielles...

Je dis bien, et cela est important.

... qui satisfont à toutes les normes officielles a été grandement exagéré comme présentant un risque majeur pour la santé publique. Là où l'on a employé des équivalents chimiques peu coûteux, dans des programmes pharmaceutiques à l'étranger, dans de grands hôpitaux américains, dans des programmes nationaux de bien-être, dans les hôpitaux de l'administration des anciens combattants et dans ceux du service de la santé publique, et dans les opérations militaires américaines, on a rarement rapporté des cas de non-équivalence clinique, et, des rares cas signalés, peu ont eu des conséquences thérapeutiques importantes.

Nous faisons tout notre possible pour mettre au point des méthodes qui nous permette de déterminer l'équivalence biologique fondée sur la présence dans le sang de produits chimiques administrés aux humains et se font très bien entre les produits chimiques et les médicaments pour que nous puissions appliquer à un grand nombre de médicaments à qui nous devons une indication de leur disponibilité biologique et pratiquement dans tous les cas, nous donneront un indice de leur efficacité thérapeutique.

M. Rynard: Quel est l'effectif de votre personnel assigné présentement à ce travail, docteur Chapman?

[Text]

Dr. Chapman: Mr. Chairman, I would have to check this out.

Mr. Rynard: Could we have this by tomorrow?

Dr. Chapman: Yes, I would be pleased to give you a precise figure tomorrow.

Mr. Monteith: Mr. Chairman, I wonder if I could ask a supplementary?

The Chairman: Mr. Monteith.

Mr. Monteith: Dr. Chapman gave the figure for 1969-70 as \$11,698,500, I think, for Food and Drug. What was the figure, for argument's sake, in 1967-68?

Mr. Rock: Could I interject a little? This \$11 million is the increase, the added amount, is it not?

Dr. Chapman: That is the total amount.

Mr. Rock: For the whole of Canada?

Dr. Chapman: Yes.

Mr. Rock: What was the increase, then?

Dr. Chapman: The actual expenditure in 1967-68 was \$8,191,300. The forecast expenditures for 1968-69 are \$9,163,000. The figure for 1968-69 is distorted to the extent that there has been a transfer of funds and personnel to the Department of Consumer and Corporate Affairs in order that that Department might take on responsibility for economic fraud in regard to the labelling of foods, and economic fraud relating to the composition of foods. So the figure of \$9,163,000 is slightly out of line. But these are the figures that are forecast at the moment.

The Chairman: Mr. Ritchie.

Mr. Ritchie: Mr. Chairman, is the Food and Drug Directorate intending to keep new drugs for the statutory five years in the new drug category?

Dr. Chapman: Mr. Chairman, the answer to the question is no, we are not. However, we have found by experience that it normally requires about five years before there is a sufficient quantity being sold on the Canadian market, and sold for a sufficient length of time to establish the effectiveness and the safety of that drug for its recommended use. Furthermore, in most instances it requires about five years from the time that a drug first appears on the market for the appear-

[Interpretation]

M. Chapman: Il me faudrait vérifier monsieur le président.

M. Rynard: Pourriez-vous nous donner un chiffre demain?

M. Chapman: Oui, demain je vous donnerai les chiffres précis.

M. Monteith: J'ai une question supplémentaire.

Le président: Monsieur Monteith?

M. Monteith: Monsieur le président, le docteur Chapman nous a donné un chiffre pour 1969-1970 de \$11,698,500 pour le Directeurat des aliments et des drogues. Quels étaient les chiffres comparatifs pour 1967-1968.

M. Rock: Il s'agit des augmentations?

M. Chapman: Non, c'est le montant total.

M. Rock: Le montant global pour tout le Canada?

M. Chapman: Oui.

M. Rock: Que représente l'augmentation dans ce cas-là?

M. Chapman: Les dépenses réelles en 1967-1968 étaient de \$8,191,300. La projection pour les dépenses de 1968-1969 sont de \$9,163,000. Le chiffre pour 1968-1969 est déformé dans la mesure où il y a eu un transfert de fonds et de personnel au ministère de la Consommation des Corporations, afin que ce ministère puisse prendre en charge les activités frauduleuses au sujet des étiquetages et de la fabrication des denrées alimentaires. Donc le chiffre de \$9,163,000 n'est pas tout à fait juste. Mais ce sont les chiffres de la projection à l'heure actuelle.

Le président: Monsieur Ritchie.

M. Ritchie: Monsieur le président, est-ce que la Direction des aliments et des drogues a l'intention de garder les nouveaux médicaments pendant une période de 5 ans dans la catégorie des médicaments nouveaux?

M. Chapman: Non. Nous avons découvert par expérience que normalement il faut à peu près 5 ans avant d'avoir une quantité assez considérable vendue sur le marché canadien afin d'établir l'efficacité et la sécurité du médicament qui vous a été recommandé. De plus, dans la plupart des cas, il faut à peu près 5 ans du moment où le médicament apparaît pour la première fois sur le marché jusqu'à ce que paraisse la première monographie dans un bulletin officiel.

[Texte]

ance of the first monograph in an official compendium. We note that new side reactions, possibly contra-indications, continue to show up over a period of approximately five years, depending on the volume of the drug. Under these circumstances and taking all these factors into consideration, it has been our experience that a drug has not been released from new-drug status in less than five years.

Mr. Ritchie: Do you think a mandatory five-year, period and perhaps longer, of course, if you people felt it should be, would help in promoting new drugs, that is, having companies bring forward their new drugs, if they were assured of five years by statute rather than at the whim of the sovereign as at present described whether you turn it out of a new drug into an old drug status?

• 2115

Dr. Chapman: Mr. Chairman, I really think that question is beyond my area of competence. I do not know whether or not such a mandatory requirement would increase the flow of new drugs or not. I would think not because it has been the present experience that the company that develops a new drug usually has the market for at least five years. Therefore, making that mandatory I would not think would make any significant difference.

Mr. Ritchie: Mr. Chairman, in this new drug do you have any companies, or in your experience does anybody promote side reactions, so that you will keep it in the new drug category for as long as possible; in other words, keep out people making the same drug, or you people issuing a compulsory licence once it is an old drug?

Dr. Chapman: Mr. Chairman, this is a difficult question to answer. We do find, if a competitive product arrives on the market, that we are likely to hear of a number of side reactions of this competitive product allegedly due to some inferior qualities of that particular drug. However, I would not like to say that any company would go to the trouble of indicating undesirable side reactions just for the purpose of keeping it in new drug status. No, I would not think so.

Mr. Ritchie: Mr. Chairman, I have a lot more questions but if any other members wish to ask questions I do not wish to monopolize the time and I would like to ask them later.

The Chairman: Do you have a supplementary Dr. Rynard?

Mr. Rynard: I would like to ask a supplementary of Dr. Chapman. Take for instance a

[Interprétation]

Nous notons que les nouveaux effets secondaires, parfois des contre-indications, continuent à se manifester pendant une période d'à peu près 5 ans, selon la dose. Donc, à la vue de toutes ces circonstances, nous avons trouvé qu'un médicament ne peut pas être ôté de cette catégorie avant 5 ans.

M. Ritchie: S'il faut cette période mandataire de 5 ans, et peut-être plus longtemps, est-ce que cela n'aiderait pas à la promotion de nouveaux médicaments s'ils étaient assurés d'une période de 5 ans par statut, plutôt qu'à discrétion comme présentement.

M. Chapman: Monsieur le président, c'est une question à laquelle je ne puis répondre; elle va au-delà de ma compétence. Je ne sais pas si une exigence statutaire comme celle-là augmenterait l'afflux des nouveaux médicaments. Je ne crois pas, parce que, quand une société met au point un nouveau médicament a habituellement le marché pendant cinq ans. Je ne crois donc pas qu'en cas d'obligation il y ait beaucoup de différence.

M. Ritchie: Monsieur le président, quant à ce nouveau médicament, aura-t-il des pressions pour le maintenir aussi longtemps que possible dans sa catégorie? En d'autres termes, pour empêcher d'autres sociétés de fabriquer le même médicament ou pour ne délivrer une licence obligatoire qu'une fois le médicament devenu plus ancien?

M. Chapman: Monsieur le président, c'est une question à laquelle il est difficile de répondre. Nous trouvons que lorsqu'un produit concurrentiel arrive sur le marché, nous entendons toutes sortes de réactions aux produits et toutes sortes d'allégations sont faites quant à la qualité inférieure du médicament en question. Je ne voudrais pas dire cependant qu'une société agisse ainsi uniquement pour garder le médicament dans sa catégorie de nouveau médicament.

M. Ritchie: J'ai une foule d'autres questions, mais si d'autres veulent en poser, je ne veux pas monopoliser le temps, alors je poserai ma question plus tard.

Le président: Complémentaire, docteur Rynard?

Mr. Rynard: Prenez un médicament produit aux États-Unis, et supposons que la compa-

[Text]

drug that is made in the United States and they have got a licence here. I am thinking now of chloromycetin. There is a case where the quality and efficacy and everything was supposedly tried out; that was after the patent had run out on chloromycetin. I have forgotten the number of manufacturers who applied and made this drug, and yet I believe that while they satisfied them on the quality in all the tests they had, that the Food and Drug Administration in the United States had to recall them all but the original makers of that drug chloromycetin. I am wondering, Dr. Chapman, if the same thing could not happen here under the situation we will have in importing drugs, because you no doubt took cognizance of the tests over there and took their tests and qualifications over here and accepted it in the sale here in Canada of those drugs that were sold as chloramphenicol.

Dr. Chapman: Mr. Chairman, Dr. Rynard has picked on the single drug where there has been a demonstrated lack of clinical equivalence in a drug which appeared to meet all the chemical and physical tests that had been applied to it. In this particular case it was due to the crystal size of the active ingredient of the chloramphenicol itself and it was not until other products had been on the market for several years that there did appear to be a difference in the clinical effectiveness of this particular product.

We investigated this. We found that blood levels on several of these products were definitely lower than they were on the original product, the chloromycetin, and two manufacturers were requested in Canada to remove their products from the market and they did so.

We are assuming that the product was not clinically effective. Obviously the blood level was lower after a specified period of time. It might have been that the blood level was maintained over a longer period of time and, therefore, it might also have been clinically effective. As you well know, Dr. Rynard, this is the classical drug for the treatment of typhoid fever and in a situation like this you do not wish to take any chances on a product of that type.

• 2120

Mr. Rynard: Thank you very much for that answer, Dr. Chapman. While it is not a common instance, at all—I am quite willing to admit that; I was over there and saw some of those results—yet this could happen under the present bill; this could give you a real problem. I quite agree with you it is not so likely to happen, but it could happen. Is there any protection that we could devise on this?

[Interpretation]

gnie ait une licence au Canada, la chloromycétine, par exemple. Or, bien que les essais aient été satisfaisants et que des licences aient été délivrées, il a fallu, aux États-Unis, les retirer toutes sauf aux premiers fabricants de ce produit. La même chose ne pourrait-elle pas arriver ici, pour le produit vendu sous l'appellation de chloramphenicol?

M. Chapman: Le docteur Rynard a parlé du cas unique d'un médicament où il y a eu un manque d'équivalence clinique dans un médicament qui semblait remplir toutes les conditions chimiques et biologiques qu'on lui demandait. C'était par suite du cristal de l'ingrédient actif. Et ce ne fut qu'après que le produit a été sur le marché pendant nombre d'années qu'on a découvert qu'il y avait une différence entre l'efficacité en clinique de ce produit en particulier.

Nous avons enquêté et nous avons découvert que les niveaux sanguins de certains de ces produits étaient moindres que dans le produit original de la chloromycétine. Deux fabricants ont dû retirer leurs produits du marché.

Nous supposons que le produit n'était pas cliniquement efficace. Le niveau sanguin était inférieur après une période de temps. Il se peut que le niveau sanguin soit maintenu pendant une durée plus longue et dans ce cas, il aurait peut-être été efficace en clinique, mais comme vous le savez, docteur Rynard, c'est un médicament classique pour le traitement de la thyphoïde, on ne peut pas prendre de risque dans des cas semblables. Merci.

M. Rynard: Merci, beaucoup docteur Chapman. Ceci pourrait se passer selon les termes des projets de Loi que nous étudions. Je suis d'accord que ce n'est pas comme cela que cela se passe mais cela peut se passer.

[Texte]

Mr. Basford: I would like to point out before Dr. Chapman answers that, that the situation you refer to, Dr. Rynard, occurred under conditions long before this bill that I am dealing with arose.

Mr. Rynard: Mr. Chairman, I am quite well aware of that and Dr. Chapman is too.

Mr. Basford: I do not want you to suggest that what happened was the cause of this bill or its contemplation.

Mr. Rynard: No, no.

Mr. Basford: The condition you refer to—I do not want to trespass on Dr. Chapman's area—could happen regardless of this bill.

Mr. Rynard: No, Mr. Chairman, the thing I am sure Dr. Chapman is concerned with and I, as a doctor, and everybody is concerned with, is that we have as few of those as possible happen and this is why we are bringing this point up: not that it happened two years ago, but it could happen today. That is the point.

Mr. Basford: I am just trying to avoid the imputations that it has happened or will happen because of this bill which I think is a gross misrepresentation of the purposes of this bill.

Mr. Rynard: Mr. Chairman, if there is any imputation on that I am sure that Dr. Chapman did not grasp it and neither did I.

Dr. Chapman: Mr. Chairman, if I can just comment. We are faced, as the Minister, Mr. Basford, has pointed out, with similar problems. I would point out, however, that I have already indicated that as of May of last year we did adopt these additional regulations which give us considerably more authority. In Bill C-102, we have very positive authority now to govern, regulate or prohibit:

5. (a) the importation into Canada of any drug or class of drugs manufactured outside Canada, or

We can govern, regulate or prohibit:

5. (b) the distribution or sale in Canada—of any drug or class of drugs manufactured outside Canada, as the Governor in Council deems necessary for the protection of the public in relation to the safety and quality of any such drug or class of drugs.

[Interprétation]

M. Basford: Je voudrais souligner, avant que le docteur Chapman réponde, que cela a eu lieu avant que ce projet de loi ne fût présenté.

M. Rynard: Je suis au courant de cela, et le docteur Chapman également.

M. Basford: Je ne veux pas laisser entendre que ce qui est arrivé était la cause du présent bill, directe ou indirecte.

M. Rynard: Non, non.

M. Basford: La situation que vous évoquez... je ne veux pas empiéter sur le domaine de M. Chapman... pourrait arriver indépendamment de cela.

M. Rynard: Non, monsieur le président, ce qui nous préoccupe tous, c'est l'éventualité de ces faits. Je soulève le point non parce que l'incident est arrivé il y a deux ans, mais parce qu'il pourrait se répéter.

M. Basford: Je ne voudrais pas que l'on conclue que cela pourrait se passer à cause de l'adoption de ce projet de Loi.

M. Rynard: Monsieur le président, s'il y a une imputation, je ne crois pas que le docteur Chapman l'ait saisie, moi non plus d'ailleurs.

M. Chapman: Monsieur le président, je suis prêt à faire un commentaire. Comme le ministre, monsieur Basford, l'a souligné je veux indiquer que depuis mai de l'an dernier nous avons mis en vigueur ces règlements qui nous donnaient beaucoup plus de pouvoir et sur le nouveau projet de Loi, le Bill C-102, celui que nous étudions aujourd'hui, nous obtenons une autorité pour gouverner, réglementer ou interdire:

5. a) l'importation au Canada d'une drogue ou catégorie de drogues fabriquée ailleurs qu'au Canada, ou

nous pouvons gouverner, réglementer ou interdire:

5. b) la distribution ou la vente au Canada, ... d'une drogue ou catégorie de drogues fabriquée ailleurs qu'au Canada, que le gouverneur en conseil estime nécessaire en vue de la protection du public en ce qui concerne l'innocuité et la qualité d'une telle drogue ou catégorie de drogues.

[Text]

This is additional authority that we now have which should improve our capacity to monitor such cases.

• 2125

Mr. Rynard: I appreciate that answer, Mr. Chairman. I also feel, though, if the same thing came up again with the same drug would you act in the same way under the present bill?

Mr. Basford: He would have more power to act under the present bill than he had before.

Mr. Rynard: Mr. Chairman, I am addressing this question to Dr. Chapman because it is a medical problem.

Mr. Basford: It sounded to me like you were requesting a legal interpretation of the bill.

Dr. Chapman: The answer is, as Mr. Basford has indicated, that we would have, in addition to our present authority, additional authority which is incorporated in this bill.

Mr. Rynard: Mr. Chairman, another supplementary question. How long would it take to get around to that point because you have the say as to whether or not the drug comes in.

Mr. Basford: Pass the bill and he will have the power.

Mr. Rynard: I would like Dr. Chapman to answer that.

Dr. Chapman: Mr. Chairman, we are continually improving our capacity to monitor the importation of drugs. We are working very closely of course with the Customs officials so that the invoices for drugs are drawn to our attention. We have an opportunity to sample those drugs, and, as far as our resources will permit, to examine them in the laboratory.

Mr. Rynard: Mr. Chairman, I wonder if I could just ask Dr. Chapman another question and state that I have a great deal of confidence in him and his Department and how they run it. I am sure that he will do the best with the funds that are provided and things that he gets to work with. I am wondering if tomorrow he could bring this information along with the information with respect to the number of people who are going to be engaged; where those tests are made and how they can be done and in what places he does them. In other words, where do we get those tests done? Are they done here in Ottawa or are they done in hospitals, and where? You can answer tomorrow.

[Interpretation]

Ce sont des pouvoirs additionnels qui devraient nous permettre un contrôle plus efficace.

M. Rynard: Oui, mais si la situation se répétait, agiriez-vous de même?

M. Basford: Le bill actuel donnerait plus de pouvoir.

M. Rynard: Monsieur le président, je pose cette question au docteur Chapman parce que c'est un problème médical.

M. Basford: Il me semblait que vous demandiez une interprétation juridique du projet de Loi.

M. Chapman: Oui, nos pouvoirs seraient supérieurs.

M. Rynard: Il faut que vous disiez comment l'on permet que le produit soit importé.

M. Basford: Adoptez le Bill et il aura le pouvoir.

M. Rynard: J'aimerais que le docteur Chapman réponde à cette question.

M. Chapman: Monsieur le président, nous améliorons continuellement nos services en vue de mieux contrôler l'importation des produits pharmaceutiques. Nous travaillons de concert avec les fonctionnaires de la douane et lorsque les importations se font, nous prenons un échantillon des médicaments et nous les examinons le mieux possible.

M. Rynard: Je voudrais poser une autre questions au D^r Chapman. J'ai énormément de confiance en lui. Je suis certain qu'il fera du mieux qu'il pourra. J'aimerais lui demander ceci: combien de gens seront employés à ces expériences en clinique, à ces épreuves? Où se feront ces épreuves? Ici, à Ottawa, ou dans des hôpitaux? Vous pouvez m'y répondre demain, ce sera très bien demain.

[Texte]

The Chairman: Not tomorrow, doctor, on Thursday at 11 o'clock.

Mr. Rynard: On Thursday. Thank you, very much. Thank you, Mr. Chairman.

The Chairman: Mr. Foster.

Mr. Foster: I have several questions here. First of all I would like to inquire if we are going to have the Minister of National Health and Welfare and the Minister of Industry before this Committee, Mr. Chairman?

The Chairman: You would have to ask your representative on the steering committee.

Mr. Foster: There is no plan at this time to call them?

The Chairman: No.

Mr. Foster: What percentage of the drugs used in Canada are patent drugs? I understand this bill is only going to have an effect on the price of drugs that are patented.

Mr. Basford: It is a bill that deals with amending the Patent Act. I do not know that we have figures on the number of drugs on the market that are patented and upon which the patents have expired.

Mr. Foster: Is it only going to have an effect on the drugs that are patented?

Mr. Basford: Yes, because principally the experience generally has been that when the patent on a drug expires the price has markedly decreased. I think this was pointed out in the Harley Committee, and it certainly has been pointed out elsewhere.

Mr. Foster: Are we dealing with half of the drug market?

Mr. Basford: I am really not in a position to say.

Mr. Foster: I would like to have a rough estimate of what percentage of the market we are hoping to influence by this bill. Perhaps these figures could be obtained.

Mr. Basford: We will give that some thought. To come up with a precise answer would involve a tremendous amount of research because we would have to first determine all of the prescription drugs on the market, which is considerable, and then make a search of the Patent Office to determine which ones were still patented.

[Interprétation]

Le président: Pas demain, docteur, jeudi, à 11h.

M. Rynard: D'accord. Merci.

Le président: Monsieur Foster.

M. Foster: J'ai plusieurs questions à poser. D'abord, je voudrais demander si le ministre de la Santé nationale et du Bien-être social viendra comparaître devant le Comité?

Le président: Il faut que vous le demandiez à votre représentant au comité directeur.

M. Foster: Donc, vous n'avez pas de projet pour le faire comparaître.

Le président: Non.

M. Foster: Quel pourcentage de médicaments utilisés au Canada sont des spécialités pharmaceutiques? Je crois comprendre que le seul effet de ce bill, c'est d'agir sur les prix de ces spécialités.

M. Basford: C'est un projet de loi qui a trait à la *Loi des brevets* et ses amendements. Je ne sais pas si nous avons des chiffres quant au nombre de médicaments brevetés et la date d'expiration de leurs brevets.

M. Foster: L'influence ne s'exercera que sur les spécialités pharmaceutiques?

M. Basford: Oui, l'expérience démontre que, lorsque le brevet vient à échéance, le prix du produit est fortement diminué. Ceci fut indiqué au Comité Harley.

M. Foster: Ne discutons-nous que de la moitié du marché des produits pharmaceutiques?

M. Basford: Je ne peux pas répondre à cette question-là.

M. Foster: Je voudrais une évaluation du pourcentage du marché que l'on essaie de contrôler. Peut-être pourriez-vous obtenir quelques chiffres?

M. Basford: Nous l'étudierons. Je ne sais pas si nous pouvons répondre de façon très précise à cette question. Il faudrait énormément de recherches, évidemment. Il nous faudrait décider combien de médicaments sont en vente et c'est énorme. Ensuite, il faudrait étudier la *Loi des brevets* pour voir combien de ces médicaments sont brevetés.

[Text]

Mr. Foster: I think it would be worthwhile for the Committee's benefit to know this, if it is possible to secure it.

I would like to have some clarification on this business of patents. I presume we will continue to patent drugs in Canada. How soon after patent is received can the Commissioner of Patents issue a licence for someone else to go ahead?

Mr. Basford: Once a patent is granted, someone else is entitled immediately to apply for a compulsory licence. We do, however, state that if this is a patent on what is a new drug, which it would be, that the effects, not of the Patent Act but of the Food and Drug Regulations, and the economic effects of them would be certainly to discourage anyone applying for a compulsory licence in the vast majority of cases while something were still a new drug, for the reasons that it would not, in the vast majority of cases, in our submission, be economically feasible for someone to try and manufacture a new drug under a compulsory licence because the compulsory licence holder would also have to meet all of the requirements of the Food and Drug Act and regulations for a new drug. It would have to go through the clinical testing and so on, which we feel, because of economics, would discourage someone applying while something was of new drug status.

Mr. Foster: If a drug showed a lot of promise they might still go through all the difficult and expensive clinical trials to try to beat the original patent owner to the punch, as it were.

• 2130

Mr. Basford: The could not beat him to the punch. The patent owner would be ahead and could not be beaten to the punch in any way unless he stopped production and gave up.

We feel that the costs of getting out of new drug status are sufficiently high to discourage someone applying for a compulsory licence while a drug is under new drug status. There is no absolute guarantee, but we feel that in the vast majority of cases the economics would work against that happening.

Mr. Foster: My next question is more of an observation. With relatively low-cost drugs which are still prescription drugs—something that costs \$1 even though it may be reduced to \$0.75—if the pharmacists' fee is \$2 for handling the prescription we really have not accomplished too much. The pharmacists' fee is much higher than the cost of the drug and even though it may be reduced 25 per cent

[Interpretation]

M. Foster: Je pense que cela aiderait beaucoup le Comité que de savoir ces renseignements. Je voudrais un éclaircissement au sujet de la question des brevets. Est-ce que nous continuerons à breveter des médicaments au Canada? Et quel délai d'expiration y a-t-il après qu'un brevet a été émis, avant que le Commissaire des brevets puisse émettre une licence qui permette à quelqu'un d'autre de fabriquer ce produit?

M. Basford: S'il s'agit d'un brevet sur médicaments tout à fait nouveaux, les règlements de l'administration des aliments et drogues et les conséquences économiques décourageraient n'importe qui à demander une licence obligatoire. Dans la grande majorité des cas, il ne serait pas sage, du point de vue économique, pour un fabricant, d'essayer de fabriquer un médicament neuf sur licence obligatoire, parce qu'il faudrait qu'il obéisse à tous les règlements de la Loi sur les aliments et drogues, etc. Et ceci les découragerait du point de vue économique.

M. Foster: Il me semble qu'il pourrait peut-être envisager ces obstacles pour essayer de produire le médicament nouveau, avant que celui qui avait obtenu le brevet en premier lieu ne le lance sur le marché.

M. Basford: Il n'y a aucune façon de gagner cette course-là avec le premier détenteur de brevet. Nous sommes d'avis que les coûts que représente la sortie d'un médicament neuf, à titre de médicament accepté, sont tellement grands que cela nous fournit un genre de garantie. Dans la plupart des cas, les circonstances économiques protègent le public.

M. Foster: Je voudrais formuler une observation qui a trait aux médicaments prescrits, mais à bas prix; je pense que cela coûte un dollar, et même si on le réduit à .75c, si l'honoraire des pharmaciens est de \$2 pour remplir l'ordonnance, l'honoraire est beaucoup plus élevé que n'est le coût du médicament? Cela n'est pas beaucoup.

[Texte]

we have not actually helped the person who is paying for the prescription.

Mr. Basford: To some extent your observation is very germane, Mr. Foster, and, as I said this afternoon—and we do not expect miracles—that is why we are concerned with the provinces in dealing with the retail side of the market.

The question you have asked has involved within it the argument that some of the manufacturers have made, that because their price is only a certain percentage of the prescription dollar we should leave them alone. Whereas I think the attitude must be—and this certainly was the attitude of the Harley Committee—that you attack this issue from all fronts.

If you can reduce the manufacturer's price a little; if you can change the distribution system and make it more efficient; if you can change some of the retailing practices; and if you can have slightly different instruction in the universities, as the Harley Committee pointed out, then by attacking the question of high drug prices from all sides you end up with some positive results.

But simply because the manufacturer's price does not represent the whole of the prescription dollar does not seem to me a reason for not doing anything about the manufacturers.

Mr. Foster: I was interested in the figure that 15 per cent of the drugs were manufactured in Canada. Is that 15 per cent of the companies, or 15 per cent of the dollar volume of drugs sold in Canada.

Mr. Basford: I think you are referring to the figure that 85 per cent of the drugs made into dosage forms in Canada are made of fine chemicals that have been imported.

The majority of the major pharmaceutical companies in Canada do not make the chemicals in Canada. They import up to 85 per cent of them. Then they put them into dosage forms in Canada.

There is now a group, mainly members of the Pharmaceutical Manufacturers Association of Canada, who are importing 85 per cent of their fine chemicals and processing them into dosage forms in Canada. Really what this bill is saying is that that exclusive little club should be broken up and a few others should be able to import fine chemicals, and, if they wish, to put them in dosage form in Canada.

[Interprétation]

M. Basford: Cela est très juste. Voilà pourquoi j'ai dit cet après-midi que nous ne pouvons accomplir des miracles, mais nous voulons négocier avec les provinces et les pharmaciens au niveau de la vente au détail. Certains pensent que le prix du fabricant ne représente qu'un pourcentage du médicament prescrit. On devrait laisser la question de côté. Voilà ce qui disent certains. Mais, nous essayons d'aborder le problème sous plusieurs aspects.

Vous pouvez changer le système de distribution; vous pouvez avoir une efficacité accrue du système de distribution; vous pouvez suivre des normes différentes d'une université; vous pouvez attaquer la question des prix de plusieurs points de vue et vous obtiendrez des propositions concrètes.

Mais parce que le prix du fabricant ne représente pas le dollar d'ordonnance dans son entier, ce n'est pas une raison pour abandonner le projet de loi.

M. Foster: Non. J'étais intéressé au fait que 15 p. 100 des médicaments étaient manufacturés au Canada. Est-ce 15 p. 100 par dollar dépensé par ordonnance ou 15 p. 100 des entreprises pharmaceutiques?

M. Basford: Je pense que vous parlez du fait que 85 p. 100 des médicaments mis en marché sous forme de dose sont fabriqués de produits chimiques qui ont été importés. La plupart des compagnies de produits pharmaceutiques importent les produits chimiques qu'elles utilisent pour ces produits et mettent ces produits pharmaceutiques sous forme de dose.

Il y a donc ce groupement-là, qui comprend surtout les fabricants de produits pharmaceutiques, qui importe les produits chimiques et réduit les produits chimiques en pilules et forme des doses. Tout ce que nous disons, c'est que d'autres devraient pouvoir importer ces produits chimiques.

[Text]

Mr. Foster: We do not know how much of this 85 per cent actually relates to patented drugs, though?

Mr. Basford: No, we do not.

Mr. Foster: That is the only part that will be affected. I have one further question for Dr. Chapman. When people apply to have a drug licensed in Canada does your Department normally do any clinical trials or testing, or is it a matter of their carrying out the clinical testing and trials and submitting the findings to your department for approval?

• 2135

Dr. Chapman: Mr. Chairman, I assume that Mr. Foster is referring to a new drug?

Mr. Foster: Yes.

Dr. Chapman: A new drug is not licensed, but a notice of compliance is issued after a complete and satisfactory submission has been made to the Food and Drug Directorate and it has been evaluated by the Food and Drug Directorate and found to be complete. This then permits the sale of that product on the Canadian market.

We do not have facilities for clinical testing. However, we have a strong drug advisory bureau which is manned by physicians, pharmacologists, biochemists, chemists, pharmacists, as well as support staff, who review the data submitted by the company very carefully indeed. If they are not completely satisfied with the data they request that the company carry out additional clinical tests.

One of the requirements of a company is that it notify us of all the clinical investigators who are carrying out clinical tests on this drug.

Mr. Foster: And these have to be reputable people in a university or a research institute?

Dr. Chapman: They are referred to as qualified investigator. I must admit, however, that a precise definition of that term is sometimes difficult. However, it is true that these are reputable physicians, many of them in medical schools.

Mr. Foster: What is the procedure relative to a new drug coming in from Pakistan, for example, or some country where it can be produced more cheaply? Do you still have the same submission? Do you check it, or do you actually do tests?

Dr. Chapman: I am afraid that a drug coming in from Pakistan, with the clinical testing

[Interpretation]

M. Foster: Nous ne savons pas combien de ces 85 p. 100 comprend des médicaments brevetés?

M. Basford: Non, nous ne le savons pas.

M. Foster: Voilà, c'est la partie unique qui sera affectée. J'ai une autre question pour le Dr. Chapman. Si on demande un brevet pour un produit pharmaceutique, est-ce que vous faites des épreuves en clinique vous-mêmes ou est-ce qu'on le fait dans notre ministère, ou est-ce qu'ils font leur expérience eux-mêmes en clinique et vous soumettent les résultats, soumettent les résultats à votre ministère?

M. Chapman: Monsieur Foster, parlez-vous d'un médicament nouveau?

M. Foster: Oui.

M. Chapman: Un nouveau produit n'est pas sous licence, mais un avis est émis et, à la suite d'une soumission concrète et détaillée, les Aliments et Drogues étudient cette évaluation. Quant aux épreuves en clinique, nous n'en faisons pas, mais nous avons un Bureau consultatif sur les médicaments, où se trouvent des médecins, des pharmacologues, des biochimistes, des chimistes, des pharmaciens et notre propre personnel et ils examinent les données soumises par les entreprises, et s'ils ne sont pas tout à fait satisfaits des données, ils demandent que l'entreprise fasse d'autres expériences en clinique.

L'entreprise doit nous faire connaître tous les chimistes qui font des expériences avec ces médicaments.

M. Foster: Ce sont des gens dans des universités ou des instituts de recherche?

M. Chapman: Ce sont des chercheurs qui sont tout à fait qualifiés. Mais la définition exacte est souvent difficile à établir. Mais c'est vrai que ce sont des médecins de réputation, la plupart d'entre eux venant des facultés de médecine.

M. Foster: Et, que faites-vous avec un médicament nouveau, qui vient du Pakistan où on le produit à bas prix? Est-ce que vous suivez la même procédure? Vous acceptez la soumission ou est-ce que vous faites des épreuves?

M. Chapman: Un médicament qui nous arriverait du Pakistan, après y avoir subi des

[Texte]

carried out there, would never receive a notice of compliance, because we would just have no way of checking the clinical testing. We would not know the reputation of the clinical investigators involved, now would we be able to visit them. Therefore, to clear the product they would have to carry out clinical testing in Canada, so that we would be aware of the calibre of the qualified investigators, would know the institutions in which they were working, and have the opportunity to visit them, if necessary.

Mr. Foster: That completes my questions.

Mr. Ritchie: Mr. Chairman, I wish to ask a question on the granting of compulsory licensing. Among the panel is there a particular expert in this field?

Mr. Basford: I will try to answer the questions. If I cannot I will refer them to someone else.

I should have informed you earlier, Mr. Chairman, and apologized for the absence today of Mr. Laidlaw, the Commissioner of Patents. He will be here for future hearings. He had to go to a meeting in Montreal today.

In his absence I will do my best, Mr. Ritchie.

Mr. Ritchie: My question was somewhat technical. If he is going to be here it would only be repetition. I will ask another one.

Is it correct that it is not the drug that is patented but only the process?

Mr. Basford: That is right.

Mr. Ritchie: Therefore the drug can always be made if another way can be found to make it, and that process can be patented?

Mr. Basford: Generally it is a process patent. If someone can develop a completely different process and end up with the same result they can generally obtain a patent. They could use that other process. That, however, is a rather general statement.

Mr. Ritchie: Drug company "A" can develop it by frying it and drug company "B" gets a patent by grilling it, and virtually they arrive at the same conclusion. It is a different process.

Mr. Basford: I am not sure that the drug industry would like the analogy of baking and frying, but it is language that we both understand. Yes.

[Interprétation]

épreuves, ne serait pas accepté car nous n'aurions aucun moyen de vérifier les données. Nous ne saurions pas quelle était la réputation des chercheurs; nous ne pourrions pas visiter les laboratoires où l'on aurait réalisé l'expérience. Donc, pour voir à ce que le produit soit mis en marché, il faudrait qu'il y ait des expériences faites au Canada où nous sommes au courant des qualifications des chercheurs, parce que nous connaissons les instituts où les expériences sont réalisées.

M. Foster: Mes questions sont terminées.

M. Ritchie: Monsieur le président, au sujet des licences obligatoires, je voudrais poser quelques questions. Est-ce qu'il y a quelqu'un, ici, qui s'occupe des licences obligatoires?

M. Basford: Je vais essayer de répondre aux questions. Si je ne sais pas les réponses, je demanderai aux fonctionnaires ici présents de répondre. Le Commissaire des brevets n'est pas ici; il sera présent pour les autres séances. Il a dû aller à Montréal et il n'a pu venir ici aujourd'hui. Je ferai de mon mieux pour répondre à vos questions.

M. Ritchie: Je pense donc que mes questions sont de caractère technique. Si je dois les poser au Commissaire des brevets, je préfère qu'il y réponde. On n'émet aucun brevet pour un médicament, ce n'est que le procédé qui est breveté, n'est-ce pas?

M. Basford: En effet.

M. Ritchie: Donc, le médicament peut toujours être fabriqué, si on peut trouver un autre procédé pour le fabriquer, on émet alors un brevet.

M. Basford: En général, c'est un procédé breveté, et si quelqu'un peut mettre au point un procédé différent et arriver au même résultat, généralement, on peut alors obtenir un brevet.

M. Ritchie: La compagnie pharmaceutique «A» y arrive grâce à des recherches, la compagnie «B» en demi-temps. Il s'agit de cuire et de frire.

M. Basford: Je ne sais pas si l'industrie pharmaceutique aimerait les mots «cuire et frire», mais au moins nous nous comprenons.

[Text]

• 2140

Mr. Ritchie: I have a question or two on the matter of promotion. Was it \$44 million that was spent in 1968 on promotion by drug companies?

Mr. Basford: To what year does appendix G relate?

Mr. Ritchie: I really wish to discuss promotion, its cost and how much it should be.

Bearing in mind that surveys show that doctors obtain about 90 per cent of their information on new drugs from detailmen and glossy literature, and also that the drug industry has made a great effort to put detailmen on the road and to send out the glossy literature, what percentage should be spent on promotion?

Should it be limited by legislation to a percentage of total sales, as suggested by certain people? Would the Minister care to comment in a general way?

Mr. Basford: I have so far resisted any urge to intrude to that extent in a private operation. But I have also said that we would be grateful for any ideas.

If you think we should pass legislation, and if it is the position of your party that there should be a limit on promotional expenses, I would be grateful to have that expression of opinion.

Mr. Rock: We should withdraw this bill rather than go in that loaded direction.

Mr. Ritchie: It has been suggested that promotion is high.

Mr. Basford: Our position is that we hope that this bill will result in the industry having to be more competitive and economize and reduce its promotional expenditures. We hope for a limitation of wasteful expenditure by the operation of market forces rather than by regulation.

Mr. Ritchie: As keeping a drug before the physician's eyes depends on detailing might not this increase promotion? Once a drug company has established its product might it not spend more money on promotion to prevent competition?

Mr. Basford: If they did, with the competition that I hope will result from this bill I think their prices would be so high as to be totally not-competitive and they would soon be out of business.

Mr. Saltzman: May I ask a supplementary question?

[Interpretation]

M. Ritchie: En ce qui concerne la publicité on y a consacré 44 millions de dollars en 1968, n'est-ce pas?

M. Basford: A quelle année remonte l'appendice «G»?

M. Ritchie: En fait, ce que je voudrais, c'est discuter la publicité, les coûts et de combien ils devraient être.

Sans oublier que les recherches montrent que les médecins obtiennent environ 90 p. 100 de leurs renseignements sur les produits pharmaceutiques des voyageurs de commerce et des brochures sur papier glacé, et que l'industrie pharmaceutique a également des voyageurs de commerce et des brochures sur papier glacé, est-ce qu'on devrait limiter la publicité, est-ce qu'on devrait limiter les dépenses pour les produits pharmaceutiques? Est-ce que le ministre a quelque chose à dire là-dessus?

M. Basford: On a résisté à toute tentative pour manipuler dans une telle mesure le fonctionnement des compagnies de produits pharmaceutiques, mais nous sommes ouverts à toutes les suggestions. Si votre parti est prêt à proposer un tel bill pour limiter la publicité, je suis tout à fait prêt à entendre ce que votre parti a à dire à ce sujet.

M. Rock: Nous devrions plutôt retirer le présent projet de loi.

M. Ritchie: On a laissé entendre que les frais de publicité sont élevés.

M. Basford: Nous espérons que ce bill rendra l'industrie plus concurrentielle et qu'elle devra réduire ses frais de publicité. Nous espérons que la limitation du gaspillage sera obtenue par l'utilisation des forces du marché plutôt que par réglementation.

M. Ritchie: Est-ce que cela ne risque pas d'augmenter la promotion, car, une fois que les compagnies pharmaceutiques auront lancé leur produit pour se maintenir face à la concurrence, n'auront-elles pas dépensé davantage d'argent pour la promotion?

M. Basford: Je pense que, si elles le faisaient avec la concurrence qui découlera de ce bill, leurs prix seront tellement élevés qu'ils ne seront plus du tout concurrentiels et qu'elles feront faillite.

M. Saltzman: J'ai une question supplémentaire.

[Texte]

The Chairman: Mr. Saltzman?

Mr. Saltzman: Is not the bulletin that is going to be sent to the medical profession an attempt to provide to the medical profession information that is now being provided by the detailman? In other words, is it an attempt to find a better way of providing information to the medical profession?

Mr. Basford: Yes, it is; and of course if the bulletin measures up to what we all hope for it might be that some doctors will rely solely on the bulletin and feel that they do not have to see the detailman. Of course, he will then not have to put in an expense account for that visit and the cost to the drug company will be reduced.

Mr. Monteith: I have a further supplementary, simply to the effect that the government is not proposing to take over this \$44 million promotional expenses and spend it on pamphleteers.

Mr. Basford: It is not, but if it meant that the doctors were getting accurate and full and complete and factual information, it might be \$44 million very well spent.

The Chairman: Gentlemen, are there any other questions?

Mr. Basford: Dr. Chapman wanted to add to this.

Dr. Chapman: Mr. Chairman, the figure of \$44 million has been given as the amount spent on promotional material by the drug industry. I might indicate that the proposed cost of the promotion by the government in the publication of this information bulletin to physicians is estimated at \$400,000.

• 2145

Mr. Ritchie: Dr. Chapman, in what form will this bulletin be? In one month will it be involved in one drug, or a class of drugs, say antibiotics?

Dr. Chapman: Mr. Chairman, the details have not been completely worked out, but we have had a task force working on it now for several months, planning the bulletin. We believe that we now have an editor, but we will have to put hire pharmacologists, biochemists, analysts and support staff in order to publish it.

But to reply to your question, in some instances it may well be a particular drug. We might take phenylbutazone as an example where there are approximately 20 differ-

[Interprétation]

Le président: Monsieur Saltzman.

Mr. Saltzman: Est-ce que l'on n'essaiera pas de fournir des renseignements aux médecins par l'intermédiaire de la documentation plutôt que par les voyageurs de commerce?

M. Basford: Nous espérons que ce sera l'effet du bulletin. Nous espérons que les médecins se baseront uniquement sur le bulletin. Ils n'auront plus besoin de voir le voyageur de commerce et il ne pourra plus présenter de comptes de dépenses élevés pour cette visite, et le prix des médicaments sera réduit.

M. Monteith: Question supplémentaire. Le gouvernement ne propose pas de reprendre ces \$44,000,000 de dépenses de publicité pour publier ses documents?

M. Basford: Non, mais j'ai l'impression que ces \$44,000,000 seraient fort bien utilisés s'ils permettaient de bien renseigner, de renseigner complètement les médecins.

Le président: D'autres questions?

M. Basford: M. Chapman, je crois, voulait poser une question.

M. Chapman: Monsieur le président, les chiffres de \$44,000,000 ont été mentionnés. Ce montant représente la somme dépensée pour la publicité par l'industrie pharmaceutique. Le coût proposé de la publicité faite par le gouvernement, est estimé à \$400,000 pour les bulletins qui seront envoyés aux médecins.

M. Ritchie: Dans quelle forme ce bulletin sera-t-il publié? Est-ce que ce bulletin, en un mois, traitera d'un médicament ou d'une catégorie de médicaments, comme par exemple les antibiotiques?

M. Chapman: Monsieur le président, les détails n'ont pas été complètement définis mais un groupe étudie la question depuis plusieurs mois. Il travaille à la préparation du bulletin. Nous avons maintenant un rédacteur mais nous devons avoir du personnel de soutien administratif ainsi que des spécialistes pour rédiger le bulletin, tels que des pharmaciens, des chimistes, etc. . .

Pour répondre à votre question, plus précisément, il se peut que, dans un cas, on parle d'une drogue en particulier. Par exemple, il y a environ 20 produits pharmaceutiques à base

[Text]

ent products of phenylbutazone on the Canadian market. We would have analysed very carefully all of those products, and we would publish the comparative data on that particular group of products. It is anticipated that the cost figures will be supplied by the Department of Consumer and Corporate Affairs and these would be included in the publication as well. In addition to this we would be publishing monographs on new drugs as these become available on the market, and I would anticipate that there might be one or two monographs on a new drug, giving complete factual scientific information on that particular drug.

Mr. Ritchie: Mr. Chairman, I would like to ask Dr. Chapman, does he really think doctors will read this?

Dr. Chapman: To save themselves from the detailmen they might.

Mr. Ritchie: Detailmen are good fellows. They bring the gossip.

Mrs. MacInnis (Vancouver-Kingsway): I would just like to ask one question. It arises from the Minister's statement that he thinks that the drug prices should be fought on all fronts, the battle to bring down the price of drugs. I think that he also spoke of his willingness to be given suggestions and think and plan ahead. What I would like to ask him is, in view of the fact that he has said from the beginning that we do not expect miracles from this, that it is only one of a number of measures required, would he be willing to initiate a feasibility study as to the possibility of having some type of Crown corporation set up which would act as a yardstick, which would enable us to have some kind of idea as to how drugs could be produced, the cost of producing drugs and distributing them and getting them around to the public?

I would like to suggest that this sort of thing is being done in other countries, either publicly or through co-operatives or some type of thing, and it seems to me that there is a great deal of guessing about the cost of promotion and whether that will go up or down, and other matters. I would just like to ask him whether he would not consider the idea of a feasibility study to consider a pilot plant or a yardstick plant for distributing a limited number, or making and distributing a limited number of prescription drugs as a yardstick to see what could be done?

Mr. Basford: I think I have really gone as far as I should go for the moment by saying...

[Interpretation]

de phenylbutazone sur le marché. Nous allons étudier chacun de ces 20 produits et donner toutes les caractéristiques pertinentes de ces produits. C'est le ministère de la Consommation et des Corporations qui assumera les frais de cette analyse. En dehors de cela, nous publierons des monographies sur les nouveaux médicaments, à mesure que ceux-ci seront mis sur le marché. Et, je pense qu'il y aura une ou deux monographies sur une nouvelle drogue donnant toutes les données scientifiques sur cette dernière.

M. Ritchie: Monsieur le président, je voudrais demander au D^r Chapman s'il pense vraiment que les médecins liront ce bulletin?

M. Chapman: Pour se sauver des voyageurs de commerce, peut-être.

M. Ritchie: Les voyageurs de commerce sont des types sympathiques. Ils connaissent tous les cancans.

Mme MacInnis (Vancouver-Kingsway): J'aimerais poser une seule question. D'après sa déclaration, il semble que le Ministre pense que les prix des médicaments doivent être combattus sur tous les fronts pour faire baisser le prix des médicaments. Il a également parlé du fait qu'il était prêt à recevoir les suggestions pour l'avenir. Je voudrais lui poser la question suivante. Étant donné qu'il a dit, depuis le début, qu'il n'espère pas que cette mesure législative permettra d'arriver à des miracles, c'est là seulement une des mesures nécessaires. Le Ministre serait-il prêt à étudier la possibilité d'avoir une société de la Couronne dont la tâche serait d'évaluer les médicaments, qui nous permettrait de savoir comment des médicaments pourraient être produits, et quel en serait le coût de production, de distribution de vente au détail?

Je pense que ce genre d'organisme existe dans d'autres pays, sous une forme ou sous une autre. Et, il me semble on parle beaucoup d'une façon abstraite des frais de publicité, de leur augmentation et de leur diminution. Et, j'aimerais demander au Ministre s'il n'envisage pas de faire une étude des possibilités vis-à-vis d'une usine pilote qui fabriquerait un certain nombre de médicaments, qui les vendraient et les distribueraient pour voir ce qui pourrait être fait.

M. Basford: Je suis allé aussi loin que je le puis, pour l'instant...

[Texte]

Mrs. MacInnis (Vancouver-Kingsway): This is not at the moment. May I just explain? I do not want you to get me wrong. I am thinking of planning ahead. We are talking about planning. Obviously this bill is not going to last for all time, and there is going to have to be some other legislation and you cannot plan unless you look a little ahead of this bill. So it is in that light that I am asking the question.

• 2150

Mr. Basford: Yes, but I think what I said today, I think for the moment I should not go any further. This is part of a program. I am concerned that the Patent Act be amended to allow compulsory licences and to allow greater competitive conditions in the industry. I am not foreclosing any ideas or suggestions. I do not think that I will go any further. I have explained to the presidents of some companies who have come to see me that if I were the president of a drug manufacturing company I would want to make sure that this bill worked.

Mrs. MacInnis (Vancouver-Kingsway): You are the Minister in charge of protecting consumers. You are not the president of a drug company.

Mr. Basford: You may analyse my statement a little later tonight to see what it means.

The Chairman: Have you a supplementary, a statement, or a question?

Mr. Robinson: Mr. Chairman, I have just one question. The Harley report has been mentioned so much by so many people that I am wondering if the Minister is prepared to tell us to what extent the recommendations have been implemented in this proposed bill, and if there are recommendations yet that would be carried out as a result of the bill's implementation?

Mr. Basford: I have a statement on this, Mr. Robinson. It is not in the most easily analysed form. I wonder if I could defer my answer until Thursday and give you a statement on the rundown on the 23 recommendations and a breakdown of who they refer to, because as I say some refer to what should go on at the universities, for example. I will give you a breakdown of who they have been directed to and what has happened.

Mr. Robinson: I would be agreeable to this, Mr. Chairman. The reason I thought it was necessary is because this report is quite renowned, shall we say, and I think every-

[Interprétation]

Mme MacInnis (Vancouver-Kingsway): Je ne parle pas de maintenant. Comprenez-moi bien. Je parle de l'avenir. Nous parlons de l'avenir, n'est-ce pas? Il est évident que ce bill ne va pas durer éternellement. Il faudra adopter d'autres mesures législatives et il nous faut regarder un tout petit peu plus loin que ce bill. Voilà pourquoi je pose cette question. C'est dans ce contexte que je pose cette question.

M. Basford: J'ai dit tout ce que j'avais à dire aujourd'hui. Je ne pense pas pouvoir aller plus loin pour l'instant. Cela est un élément d'un programme. La *Loi des Brevets* va être modifiée pour prévoir des permis obligatoires, pour mieux ouvrir la concurrence à l'intérieur de cette industrie. Je suis parfaitement ouvert à toute suggestion, à toute idée nouvelle. Je ne crois pas que j'irai plus loin que cela, cependant. J'ai expliqué aux présidents de certaines compagnies, qui sont venus me voir, que je voulais m'assurer que ce bill fonctionnerait.

Mme MacInnis (Vancouver-Kingsway): Monsieur le président, le ministre est chargé de protéger les consommateurs, il n'est pas président d'une société pharmaceutique.

M. Basford: Vous pourrez peut-être analyser ma déclaration un peu plus tard.

Le président: Supplémentaire?

M. Robinson: Une question, monsieur le président. Le rapport Harley a été très souvent cité par un grand nombre de gens et je me demande si le Ministre est prêt à nous dire dans quelles mesures les recommandations ont été suivies dans ce projet de loi et s'il y a cependant des recommandations qui seront rejetées lorsque le bill sera mis en vigueur.

M. Basford: J'ai une déclaration à ce sujet, monsieur Robinson. Elle n'est pas très facile à analyser. Puis-je remettre ma réponse à jeudi et alors vous donner une déclaration se rapportant aux 23 recommandations et vous dire à quoi elles se rapportent, car certaines se rapportent à ce qui se passe dans les universités, par exemple. Je vous donnerai une idée générale des gens à qui elles s'adressaient, et de ce qu'il en est advenu.

M. Robinson: Je suis d'accord, monsieur le président. Ce rapport est très connu et tout le monde se demande dans quelles mesures il sera appliqué. C'est la base de nos conclusions

[Text]

body is wondering to what extent it is going to be implemented. And I think this is the basis of our findings over a period of years, and it is very important to all concerned. I will look forward to this information.

Mr. Basford: I anticipated this question and had a statement prepared which is not, as I say, most easily analysed because it refers to recommendation 1 and recommendation 5, et cetera, so I would like to have it redone, which I think you would find more convenient.

Mr. Robinson: I agree.

The Chairman: Mr. Émard.

M. Émard: Monsieur le président, à la suite de ce que j'ai dit, cet après-midi, au sujet de l'importance des usines de produits pharmaceutiques dans le Québec, pourrais-je vous fournir quelques chiffres très courts, extraits d'un rapport publié par l'Association Canadienne des Fabricants en Pharmacie, et qui a été présenté au Comité du Bien-être de la province de Québec. Je n'ai que six points à énumérer.

Cette projection est basée sur des données fournies par 37 compagnies.

LES VENTES

Compagnies ayant leur siège social au Québec: \$114,947,000.

Compagnies ayant leur siège social en Ontario: \$60,203,000.

IMMOBILISATIONS—TERRAINS—ÉDIFICES—MACHINERIES

Compagnies ayant leur siège social au Québec: \$62,500,000.

Compagnies ayant leur siège social en Ontario: \$29,000,000.

RECHERCHES ET DÉVELOPPEMENTS

Compagnies ayant leur siège social au Québec: \$12,433,750.

Compagnies ayant leur siège social en Ontario: \$1,650,350.

Mr. Basford: I have received the figures. I would like to analyse them, which I do not have an opportunity of doing right off the top of my head.

M. Émard: Mais, on a semblé dire cet après-midi, monsieur le ministre, que les compagnies étaient réparties à peu près également entre le Québec et l'Ontario. Je voudrais montrer par ces chiffres que l'importance des compagnies de produits pharmaceutiques du Québec est beaucoup plus grande, et donc que les effets économiques seront beaucoup plus grands dans le Québec;

[Interpretation]

depuis un certain nombre d'années et il est important pour tous les intéressés.

M. Basford: Je prévoyais cette question et j'ai préparé une déclaration qui n'est pas très facilement analysable, car elle vous renvoie aux recommandations 1 et 5 etc. Je voudrais donc la refaire et je pense que nous pourrions la lire à un moment plus adéquat.

M. Robinson: Je suis d'accord.

Le président: Monsieur Émard.

Mr. Émard: Mr. Chairman, after what I said this afternoon concerning the importance of pharmaceutical firms in Quebec, I wonder whether I could give you a few figures from a report which was published by the Pharmaceutical Manufacturers Association of Canada. This was presented at the Welfare Committee of Quebec. I have 6 items that I want to mention. This projection is based on data given by 37 firms.

SALES

Firms having their headquarters in Quebec, \$114,947,000.

Firms having their headquarters in Ontario, \$60,203,000.

REAL ESTATE—LAND—BUILDINGS—EQUIPMENTS

Firms with their headquarters in Quebec, \$62,500,000.

Firms with their headquarters in Ontario, \$29,000,000.

RESEARCH AND DEVELOPMENT

Firms having their headquarters in Quebec, \$12,433,750.

Firms with their headquarters in Ontario, \$1,650,350.

M. Basford: Eh bien, j'ai reçu les chiffres et je voudrais les analyser. Je n'ai pas la possibilité de le faire immédiatement...

Mr. Émard: Mr. Minister, this afternoon the impression was given that these firms were more or less equally divided between Ontario and Quebec. I just wanted to prove with these figures that the importance of Quebec pharmaceutical firms is much larger and that, therefore the economic impact would be much greater in Quebec. In fact, everything connected with this bill will have far more

[Texte]

en fait, tout ce qui a rapport à ce bill-là aura des répercussions beaucoup plus importantes pour le Québec que pour l'Ontario.

• 2155

Mr. Basford: Yes, I do not dispute, Mr. Émard, the importance of the drug industry to the Province of Quebec. You and I differ as to the effect of this bill on this industry, and I suppose we must agree to differ. But all the information and the advice in the analysis I can get is that it is not going to have the effect on the drug industry in Quebec that you allege it will, and I take it that your position is that there will be widespread unemployment in Quebec as a result of this bill. Well, I categorically deny that allegation.

Mr. Émard: As we say in English, time will tell.

The Chairman: Mr. Rock, have you a supplementary?

Mr. Rock: I have a supplementary. The minister, in saying that, forgets. He should remember what he said before, and that was that this bill will break up this exclusive club and, of course, this exclusive club is the internationally owned companies in Canada. But I believe we must remember here that this supposed exclusive international club does employ 10,000 people, of which 2,500 are graduated from university. And they support also 25,000 other people who provide services, and actually with this legislation you are breaking up this exclusive club.

I do not think anyone here said that it is going to bring in a lot of unemployment, but it will definitely make a lot of people lose their jobs if they do not expand.

What I am concerned about, Mr. Minister, is the fact that somehow this Committee may decide not to allow the industry to be heard, to bring this type of information to bear here, this type of information for instance, such as, did any of these industries have plans for expansion in the future, and because of this bill will they now expand or does the home base tell them now that we can export into your country we do not have to expand in Canada anymore. This is future jobs. It is these things, I think, that we are concerned about Mr. Minister. I would like to have some comments on that.

Mr. Basford: We are breaking up this exclusive club, or I hope that we are, by destroying the exclusiveness, by creating more members, and providing to Canadian compa-

[Interprétation]

important repercussions for Quebec than Ontario.

M. Basford: Je suis d'accord, monsieur Émard, en ce qui concerne l'importance de l'industrie pharmaceutique dans le Québec. Mais, nous ne sommes pas d'accord en ce qui concerne les répercussions de ce projet de loi. Nous sommes donc d'accord sur le fait que nous n'avons pas la même opinion. D'après toutes les analyses, les études qui ont été faites, je ne pense pas qu'il aura l'effet que vous pensez sur l'industrie pharmaceutique au Québec. D'après vous, il y aura un grand développement du chômage. Et, je ne suis absolument pas d'accord, je m'oppose catégoriquement à cette idée.

M. Émard: Comme on dit en anglais: «Time will tell».

Le président: Une question supplémentaire, monsieur Rock.

M. Rock: Le ministre devrait se souvenir de ce qu'il a dit avant, c'est-à-dire que ce bill brisera ce club exclusif de sociétés internationales installé au Canada. Ce soi-disant club international emploie 10,000 personnes dont une grande partie sont des diplômés d'universités. Elle emploie 25,000 autres personnes qui assurent des services. Et, en fait, si avec ce bill, si vous brisez ce club exclusif, je crois que personne ici dit que cela entraînera du chômage, mais, c'est un fait que beaucoup de gens perdront leur emploi si ces industries ne se développent pas.

Il y a une chose qui me préoccupe, monsieur le ministre. D'une façon ou d'une autre, ce Comité pourrait décider de ne pas autoriser l'industrie d'être entendue pour nous fournir toutes les données, comme celle concernant les projets de développement de ces industries. Et, avec l'introduction de ce bill, est-ce qu'elles se développeront? Ou bien, peut-être que ces compagnies, une fois qu'elles pourront importer au Canada, le feront et ne se développeront plus au Canada. Ceci concerne des emplois futurs. Si ce sont les choses qui nous préoccupent, monsieur le ministre, j'aimerais avoir votre opinion à ce sujet.

M. Basford: Nous brisons ce club exclusif. J'espère le faire et nous détruirons cette exclusivité en faisant participer plus de membres. Et, nous donnerons la possibilité à des

[Text]

nies an opportunity to compete and to grow and to develop their facilities in Canada. And I suggest that many of them will be located in Quebec, and so we are creating and giving opportunity to new members in Quebec and new employment in the Province of Quebec.

Mr. Rock: By importing drugs.

M. Émard: Monsieur le ministre, quand les compagnies canadiennes sont en difficulté, elles sont vendues aux Américains.

Le président: Monsieur Émard, une question supplémentaire?

M. Émard: Excusez-moi j'ai une question supplémentaire, monsieur le président.

Mr. Basford: We do not know. They will only export if their price on the international market is competitive. One of the PMAC members testified in front of the Harley Committee that he saw no great prospects for export in any event, because the international firms have facilities located throughout the world and he did not see much prospect for exporting in competition with the same company's facilities in other countries, for example.

There is one major company in Canada that has a very large export business, Ayherst, McKenna & Harrison, that I would anticipate will continue. Ayherst is one of the few major companies in Canada that has a large development in Canada and spends a good deal on research and I compliment them for it; I did in my speech to the House. They have an export business and I see no reason why that will change.

I was approached by a small firm the other day that saw in this Bill opportunities for them to export. Whether, in fact, that is realized or not will depend on the price of their product, but apart from a few major exceptions there is no great export from Canada at the moment. The present firms, except as I have mentioned, do not do much exporting.

• 2200

The Chairman: A supplementary, Mr. Ritchie?

Mr. Ritchie: The Minister implied that studies have been made of the economic results of this Bill. Will the Committee have those available or will some of these be made available to us?

Mr. Basford: I am not sure where I implied that—simply on the basis of the advice that we receive and the analysis that was made by the Restrictive Trade Practices Commission

[Interpretation]

sociétés canadiennes de prendre place sur le marché et de se développer au Canada. Et, je suis certain que beaucoup de ces sociétés seront créées au Québec. Donc, nous créerons ainsi des nouvelles possibilités d'emploi au Québec.

M. Rock: En important des produits pharmaceutiques...

Mr. Émard: Mr. Minister, when Canadian firms are in trouble they are sold to the Americans.

The Chairman: Do you have a supplementary, Mr. Émard?

Mr. Émard: Excuse me, Mr. Chairman, I have a supplementary question.

M. Basford: Nous ne savons pas. Elles n'exporteront qui si leur prix sur le marché international est concurrentiel. Un membre de l'Association canadienne des producteurs de produits pharmaceutiques a témoigné au Comité Harley qu'il voyait peu de possibilités d'exportation, car les sociétés internationales ont des filiales dans le monde entier. Il y a une compagnie importante au Canada qui fait beaucoup d'exportations, c'est la Société Ayherst, McKenna & Harrison qui, je pense, continuera à exporter. C'est une des seules grosses compagnies canadiennes en grande expansion. Elle consacre de fortes sommes à la recherche et je l'en félicite. Cette compagnie exporte, je ne vois pas du tout pourquoi sa situation changerait.

Une petite entreprise s'est mise en rapport avec moi récemment. Elle pensait que ce bill lui permettrait de se lancer dans l'exportation. Cela dépendra de leur produit évidemment. Mais à quelques rares exceptions importantes, il n'y a pas beaucoup d'exportations au Canada pour l'instant. Les sociétés actuelles ne font pas beaucoup d'exportation.

Le président: Monsieur Ritchie.

Mr. Ritchie: Question supplémentaire. Est-ce que le ministre a laissé entendre que des études ont été faites au sujet des résultats économiques de ce bill? Est-ce que le comité aura les résultats de ces études à sa disposition?

M. Basford: Je ne suis pas certain d'avoir laissé entendre cela. Je me base sur les conseils qui nous sont fournis et sur les analyses qui ont été faites par la Commission Harley

[Texte]

and the Hall Royal Commission and the Harley Committee, the advice of my officials, the advice of the Department of Industry, Trade and Commerce. I am not aware of any independent studies.

Mr. Ritchie: Will we have an opportunity to hear witnesses that might tell us what effect this will have on the makeup and the pattern of the economics of the drug industry?

The Chairman: Mr. Foster, another supplementary?

Mr. Foster: My question is basically the same as Mr. Ritchie's. As a member of this Committee I would like to have some statistics on the drug industry, the number of companies and the number of workers they employ and the number of dollars involved, and then perhaps someone from the Department of Industry to give us their assessment of the impact of this Bill on the industry and then, on the basis of both these statistical figures and the people from the Department of Industry, we can decide whether we should call representatives from the industry.

I am sure we could line them up half way down to Sparks Street if we were to extend an open invitation, but I think without some statistics we do not know the amount of money involved nor the number of people. I think it would be very useful for Committee members to have this information.

M. Émard: Monsieur le président, avez-vous l'intention de poursuivre les discussions?

Le président: J'allais justement en parler. Avez-vous autre chose à dire M. Émard?

Mr. Rock: I want to continue from that remark. While he said to have people from that Department, also of concern, I think, should be the Department of Labour, Department of Manpower and Immigration, Department of National Revenue and the Department of Finance. These Departments also are directly or indirectly concerned and I think they should also appear here so we can find out from Manpower the economic effect this Bill may have—also the Department of Labour.

All the advice, the Minister said, was received just from the Department of Industry—nothing else—from the Food and Drug Directorate of their own department—that was it. Then there is not available, in front of any one of you people here, the information he has on file from the industry. I asked for this to be tabled and no decision has been made on this by you members. Of course, I am not a member here.

[Interprétation]

et la Commission des pratiques restrictives du commerce, sur l'avis de mes fonctionnaires et du ministère de l'Industrie et du Commerce. Je ne connais aucune étude indépendante qui ait été faite.

M. Ritchie: Nous avons la possibilité ici d'entendre des témoins afin de déterminer l'effet de ce bill sur la situation économique de l'industrie en question.

Le président: M. Foster.

M. Foster: Ma question est en fait la même que celle de M. Ritchie. En tant que membre du comité, j'aimerais avoir des données statistiques sur les sociétés pharmaceutiques, leur production, le nombre d'employés, leurs chiffres d'affaires. Peut-être que quelqu'un du ministère de l'Industrie pourrait alors évaluer les répercussions du bill sur l'industrie. En se basant sur ces chiffres statistiques et l'opinion du ministère de l'Industrie, nous pourrions décider s'il y a lieu de convoquer des représentants de l'Industrie.

Si nous lançons une invitation ouverte, je suis certain qu'ils feraient la queue jusqu'à la rue Sparks. Je ne sais pas quelles sont les sommes en jeu ni le nombre de personnes. Il serait très utile pour le comité de disposer de ces données.

Mr. Émard: Mr. Chairman, do you intend to go on with the discussion?

The Chairman: I was just going to say something on this. Do you have something to add, Mr. Émard?

M. Rock: Je voudrais continuer la série de questions. Je pense que nous devrions avoir des gens du ministère du Travail, de la Main-d'œuvre et de l'Immigration, du Revenu national, et des Finances. Ces ministères sont intéressés directement ou indirectement à la question. Ils devraient comparaître pour que le ministère de la Main-d'œuvre nous dise quels sont les problèmes économiques soulevés par ce bill, de même que le ministère du Travail.

Le ministre nous a dit qu'il avait reçu uniquement des renseignements du ministère de l'Industrie et de la Direction des aliments et drogues de son ministère, et rien d'autre. Nous n'avons pas les renseignements qu'il a reçus de l'industrie elle-même et je demande que ces renseignements soient déposés. Aucune décision n'a été prise, pour l'instant, par les membres, dont je ne suis malheureusement pas.

[Text]

Mr. Basford: The Committee is free to call whoever it wants. That is a decision for the Committee, but I would like to explain that ministers and departments do not go firing off—and we now have 29 ministers—in 29 different directions with 29 different bills without reference to other departments. This is a government measure which received the approval of the government.

It has been approved in Cabinet in which all the departments you mentioned are represented, all of whom have had their input into the Cabinet decision and all of whom have been a part of the decision to introduce, first, Bill C-190 and now this one. We do not all operate in complete isolation; I want to make that quite clear. This is a government measure, a government decision in which the Minister of Industry, the Minister of National Health and Welfare and the Minister of Labour have participated.

Mr. Rynard: Mr. Chairman, I would like to ask a supplementary question. Is the Minister intimating that they had the same Cabinet solidarity as they had on defence?

Mr. Robinson: Mr. Chairman, I wonder whether this would not be a good time to stop for the night. We are going to be meeting again on Thursday.

• 2205

Mr. Basford: I thought perhaps if we stayed another half hour we might pass it, or something.

Mr. Rock: A decision has not been made yet as to whether to call the other witnesses, and there is supposed to be a discussion on this after...

Mr. Robinson: Mr. Chairman, I understand we will be having another meeting, probably Thursday morning, on procedure and agenda when this can be discussed.

The Chairman: There has been a resolution in that regard. We said, according to the steering committee, that no witnesses will be called because the subject was fully covered in the previous session and unless valid arguments are given that there is brand new evidence the Committee should not hear any new witnesses.

If you have any valid argument you could pass it on to the Chairman. The Chairman will pass it on to the steering committee and we will study this matter. We have representatives of all parties in the steering committee.

[Interpretation]

M. Basford: Le comité peut appeler qui il veut de comparaître. C'est au comité d'en décider mais je voudrais expliquer que les ministres et les ministères ne débâtèrent pas à tort et à travers. Nous avons actuellement 29 ministres avec 29 directions différentes et 29 bills différents qui sont sans rapports entre eux. C'est une mesure du gouvernement qui a été approuvée au Cabinet et tous les ministères que vous avez mentionnés y sont représentés. Ils participent tous aux décisions du Cabinet, et, donc, à celle d'introduire le bill C-190 et celui-ci. Nous ne fonctionnons pas de façon complètement isolée. C'est une décision du gouvernement à laquelle les ministères de l'Industrie, de la Santé nationale et du Bien-être social, et du Travail ont participé.

M. Rynard: Monsieur le président, je voudrais poser une question supplémentaire. Est-ce que le ministre veut dire qu'il a eu la même solidarité au sein du Cabinet qu'en matière de défense nationale?

M. Robinson: Nous nous réunissons de nouveau jeudi; il serait peut-être bon de lever la séance?

M. Basford: Si vous me donniez une demi-heure, on pourrait peut-être en finir.

M. Rock: Nous n'avons pas encore décidé si nous allons appeler des témoins.

M. Robinson: Nous avons encore une séance jeudi matin pour étudier la procédure et l'ordre du jour, et on pourra alors discuter cette question.

Le président: Il y a eu une résolution à ce sujet. Le comité directeur a décidé de ne pas convoquer de témoin parce que le sujet a été couvert entièrement lors de la séance antérieure. Si vous avez des arguments valables pour convoquer de nouveaux témoins, vous pourriez les présenter au président qui les communiquera au comité directeur qui prendra une décision. Tous les partis politiques sont représentés au comité directeur. La journée a été longue et fatigante. J'espère que ceux qui n'ont pas eu la possibilité de lire le rapport Harley profitent de la nuit pour le lire avant demain matin. La séance est levée jusqu'à jeudi matin à 11 heures.

[Texte]

This resolution has been passed. It has been a very long and inspiring day and I hope during the remainder of the night those who did not have a chance to read the Harley report will do so before tomorrow morning.

The meeting is adjourned until Thursday at 11 a.m.

Mr. Rock: One moment, Mr. Chairman. I disagree with what you just stated because you said that we would discuss this after and now you are changing it—about the arguments. I have some arguments here and I was not able to give them; I had to stick with certain things as others did. These arguments were not really established here as a part of the agenda, as to whether you will or will not pass this on to your steering committee and study it, but now you are saying to write to you. This is completely unfair and dictatorial.

The Chairman: Write to me or let me know so I can pass it on.

Mr. Rock: I would dare not do that. It is the members here that decide, not the Chairman.

[Interprétation]

M. Rock: Monsieur le président, j'avais des arguments à présenter que je ne pourrai pas inscrire à l'ordre du jour, et ne seront pas transmis au comité directeur. Vous nous dites maintenant de vous écrire. Je trouve votre attitude injuste et dictatoriale.

Le président: Écrivez-moi ou mettez-vous en rapport avec moi d'une façon ou d'une autre, de façon à ce que je puisse les communiquer.

M. Rock: Je n'oserais pas. Ce sont les membres qui doivent décider ici, et non pas le président.

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First Session
Twenty-eighth Parliament, 1968-69

Première session de la
vingt-huitième législature, 1968-1969

STANDING COMMITTEE

COMITÉ PERMANENT

ON

DE LA

HEALTH, WELFARE AND
SOCIAL AFFAIRS

SANTÉ, DU BIEN-ÊTRE SOCIAL
ET DES AFFAIRES SOCIALES

Chairman

M. Gaston Isabelle

Président

MINUTES OF PROCEEDINGS
AND EVIDENCE

PROCÈS-VERBAUX ET
TÉMOIGNAGES

No. 12

THURSDAY, JANUARY 30, 1969

LE JEUDI 30 JANVIER 1969

Respecting

Concernant

BILL C-102,

Le BILL C-102,

An Act to amend the Patent Act, the Trade
Marks Act and the Food and Drugs Act.

Loi modifiant la Loi sur les brevets, la Loi
sur les marques de commerce et la Loi
des aliments et drogues.

Appearing:

A comparu:

Minister of Consumer and Corporate Affairs

Hon. Stanley Ronald Basford

Ministre de la Consommation
et des Corporations

WITNESSES—TÉMOINS

(See Minutes of Proceedings)

(Voir Procès-verbaux)

L'IMPRIMEUR DE LA REINE, OTTAWA, 1969
THE QUEEN'S PRINTER, OTTAWA, 1969

STANDING COMMITTEE ON
HEALTH, WELFARE AND SOCIAL
AFFAIRS

COMITÉ PERMANENT DE
LA SANTÉ, DU BIEN-ÊTRE SOCIAL
ET DES AFFAIRES SOCIALES

Chairman
Vice-Chairman

M. Gaston Isabelle
Mr. Steve Otto

Président
Vice-président

and Messrs.
et Messieurs

Forget,
Fortin,
Foster,
Francis,
Gendron,
Godin,

Guilbault,
Haidasz,
Howe,
Mrs. Macinnis (Mme),
Monteith,
Perrault,

Ritchie,
Robinson,
Rynard,
Saltsman,
Thomas (*Maisonneuve*),
Yewchuk.—(20).

(Quorum 11)

La secrétaire du Comité:
Gabrielle Savard
Clerk of the Committee.

Pursuant to S.O. 65(4) (b)

Conformément à l'article 65(4) b) du
Règlement

*Replaced Mr. Yanakis on January 30.

*Remplace M. Yanakis le 30 janvier.

*Replaced Mr. McBride on January 30.

*Remplace M. McBride le 30 janvier.

MINUTES OF PROCEEDINGS

THURSDAY, January 30, 1969
(14)

(Text)

The Standing Committee on Health, Welfare and Social Affairs met this day at 11.15 o'clock a.m., the Chairman, Mr. Gaston Isabelle, presiding.

Members present: Mrs. MacInnis, and Messrs. Forget, Foster, Gendron, Godin, Guilbault, Haidasz, Howe, Isabelle, Monteith, Otto, Ritchie, Robinson, Rynard, Saltsman, Thomas (*Maisonneuve*)—(16).

Other Members present: Messrs. Emard and Rock.

Appearing: The Honourable Stanley Ronald Basford, Minister of Consumer and Corporate Affairs. *Witnesses: From the Department of Consumer and Corporate Affairs:* Messrs. J. F. Grandy, Deputy Minister; D. H. W. Henry, Q.C., Director of Investigation and Research, Combines Investigation Act; R. M. Davidson, Director, Merger and Monopoly Division; and F. N. MacLeod, Legal Division, Combines Investigation Act; A. M. Laidlaw, Commissioner of Patents; And *From the Food and Drug Directorate, Department of National Health and Welfare:* Dr. R. A. Chapman, Director General; Mr. M. G. Allmark, Assistant Director General (Drugs).

The Committee resumed consideration of Bill C-102, An Act to amend the Patent Act, the Trade Marks Act and the Food and Drugs Act.

Dr. R. A. Chapman read a statement in response to questions by Dr. Rynard.

The Hon. Minister of Consumer and Corporate Affairs tabled Notes on the Implementation of the recommendations of the Special Committee of the House of Commons on Drug Costs and Prices (The Farley Committee); a copy of this document was distributed to the Members; the

PROCÈS-VERBAL

Le JEUDI 30 janvier 1969
(14)

(Texte)

Le Comité permanent de la Santé, du Bien-être social et des Affaires sociales se réunit aujourd'hui à 11 h. 15 du matin, sous la présidence de M. Gaston Isabelle.

Présents: M^{me} MacInnis, MM. Forget, Foster, Gendron, Godin, Guilbault, Haidasz, Howe, Isabelle, Monteith, Otto, Ritchie, Robinson, Rynard, Saltsman, Thomas (*Maisonneuve*)—(16).

Autres députés présents: MM. Émard et Rock.

Aussi présent: L'hon. Ronald Stanley Basford, Ministre de la Consommation et des Corporations. *Témoins: du Ministère de la Consommation et des Corporations:* MM. J. F. Grandy, sous-ministre; D. H. W. Henry, Q.C., directeur des enquêtes sur les coalitions; R. M. Davidson, directeur, division des fusions et monopoles; F. N. MacLeod, division du contentieux (Loi relative aux enquêtes sur les coalitions); A. M. Laidlaw, Commissaire des Brevets. *De la Direction des Aliments et Drogues, Ministère de la Santé Nationale et du Bien-être social:* Dr. R. A. Chapman, directeur général; M. M. G. Allmark, directeur général adjoint (Drogues).

Le Comité reprend l'étude du Bill C-102, Loi modifiant la Loi sur les brevets, la Loi sur les marques de commerce et la Loi des aliments et drogues.

Le Docteur Chapman fournit des réponses aux questions posées par le Dr. Rynard à une réunion précédente.

Le Ministre de la Consommation et des Corporations dépose des Notes sur la mise en application des recommandations du Comité spécial de la Chambre des communes sur le coût et les prix des médicaments (Comité Harley); un exemplaire de ce document est distribué aux députés. Le

Minister read a short statement relating to Manufacturers of Pharmaceuticals and Medicines.

Mr. Howe moved, seconded by Mr. Monteith, that the resolution passed by the Committee on January 16, 1969 be amended by adding, after the word "meetings" the following: "at which all parties in the House are represented".

After debate thereon, by unanimous consent the motion was allowed to stand until the Chairman discuss the matter further with the Procedure Committee.

The Chairman drew the Members' attention to a telegram received from three Vancouver Doctors expressing willingness to testify before the Committee on Bill C-102.

Agreed,—That this matter be referred to the Subcommittee on Agenda and Procedure for consideration.

The Chairman read a letter received from l'Association Canadienne des Fabricants en Pharmacie withdrawing their request to be heard.

The Minister tabled a publication dated October 1967 of the Manufacturing and Primary Industries Division of the Dominion Bureau of Statistics entitled "Manufacturers of Pharmaceuticals and Medicines 1965—Annual Census of Manufacturers".

Mr. Davidson supplied further information on statistics.

And the questioning continuing, at 1.00 o'clock p.m., the Committee adjourned until 3.30 o'clock p.m. this day.

AFTERNOON SITTING (15)

The Committee reconvened at 3.45 o'clock p.m. The Chairman, Mr. Gaston Isabelle, presided.

Members present: Mrs. MacInnis, and Messrs. Forget, Fortin, Foster, Francis, Gendron, Guilbault, Haidasz, Howe, Isabelle, Monteith, Perrault, Ritchie, Robinson, Rynard, Saltsman, Thomas (*Maison-neuve*)—(17).

Ministre lit un court exposé se rapportant aux manufacturiers de produits pharmaceutiques et de médicaments.

M. Howe propose, appuyé par M. Monteith, que la résolution adoptée par le Comité le 16 janvier 1969 soit modifiée en ajoutant, après le mot «réunions», les mots suivants: «auxquelles tous les partis de la Chambre sont représentés».

Après discussion, du consentement unanime, la motion est réservée pour permettre au Président de consulter le Comité de la Procédure à ce sujet.

Le Président attire l'attention des membres du Comité sur un dépêche reçue de trois médecins de Vancouver qui sont disposés à venir comparaître devant le Comité au sujet du Bill C-102.

Il est convenu,—Que cette question soit déferée au Sous-comité du programme et de la procédure pour étude.

Le Président fait lecture de la lettre reçue de l'Association Canadienne des Fabricants en Pharmacie qui retire sa demande du 27 janvier de se faire entendre.

Le Ministre dépose une brochure de mois d'octobre 1967, publiée par la division des Industries manufacturière et primaire du Bureau fédéral de la Statistique intitulée «*Manufacturers of Pharmaceuticals and Medicine 1965—Annual Census of Manufactures*».

M. Davidson donne de plus amples renseignements touchant les statistiques.

L'interrogatoire se continuant, à 1 heure de l'après-midi le Comité s'ajourne à 3 h 30 cet après-midi.

SÉANCE DE L'APRÈS-MIDI (15)

Le Comité se réunit de nouveau à 3 h 45 de l'après-midi, sous la présidence de M. Gaston Isabelle.

Présents: M^{me} MacInnis, MM. Forge, Fortin, Foster, Francis, Gendron, Guilbault, Haidasz, Howe, Isabelle, Monteith, Perrault, Ritchie, Robinson, Rynard, Saltsman, Thomas (*Maison-neuve*)—(17).

Other Members present: Messrs. Emard and Rock.

In attendance: Same as at morning sitting.

The Committee resumed consideration of Bill C-102, An Act to amend the Patent Act, The Trade Marks Act and the Food and Drugs Act.

The Chairman and Dr. Chapman supplied information asked for at the morning sitting.

The Members questioned the Minister and his officials.

Mr. Guilbault moved, seconded by Mr. Forget, that the Committee start immediately the clause by clause discussion of Bill C-102, in accordance with the new rules of procedure relating to Standing Committees of the House of Commons.

After debate thereon, the Motion was resolved in the affirmative. YEAS 11, NAYS 5.

On Clause 1

The Minister, Mr. Laidlaw and Dr. Chapman answered questions of the Members.

Clause 1 carried.

At 6.15 o'clock p.m. the Committee adjourned at 11.00 o'clock a.m. Tuesday, February 4, 1969.

Autres députés présents: MM. Emard et Rock.

Aussi présents: Les mêmes qu'à la séance du matin.

Le Comité reprend l'étude du Bill C-102, Loi modifiant la Loi sur les brevets, la Loi sur les marques de commerce et la Loi des aliments et drogues.

Le Président et le Docteur Chapman fournissent des renseignements demandés à la séance du matin.

Les députés interrogent le Ministre et les hauts fonctionnaires qui l'accompagnent.

M. Guilbault propose, appuyé par M. Forget, que le Comité entreprenne immédiatement l'étude article par article du Bill C-102, suivant les nouveaux Règlements de procédure ayant trait aux comités permanents de la Chambre des communes.

Après discussion la motion est résolue dans l'affirmative comme suit: POUR: 11; CONTRE: 5.

A l'article 1

Le Ministre, M. Laidlaw et le docteur Chapman répondent aux questions des députés.

L'article 1 est adopté.

A 6 h. 15 du soir le Comité s'ajourne à 11 heures du matin le mardi 4 février.

*La secrétaire du comité,
Gabrielle Savard,
Clerk of the Committee.*

[Text]

EVIDENCE

(Recorded by Electronic Apparatus)

Thursday, January 30, 1969

The Chairman: Gentlemen, I now see a quorum. Before we start the meeting, I think the Minister has a supplementary statement to make, so I would ask the Minister to make it now.

Mr. Howe: On a point of order, Mr. Chairman.

The Chairman: Mr. Howe.

Mr. Howe: Could I draw to the Committee's attention the resolution that was passed on Thursday, January 16, which I think should be amended. The resolution reads: Resolved

That the Chairman be authorized to hold meetings to receive and authorize the printing of evidence when a quorum is not present

I would like to see defined the type of meeting that is to be held because after all the Chairman could have a meeting with himself and approve these minutes. I would like to make an amendment to that resolution, Mr. Chairman, inserting "at which all parties in the House are represented" after the word "meetings"

I understand that in some of the other committees there has been some controversy about this particular question and I think that would clarify it. There might be a time when we would not have so thoughtful and considerate a chairman as we have today who might put something over on us. I think we should define the kind of meeting proposed.

The Chairman: I think we will have to refer to the rules, Mr. Howe. I personally have no objection to your amendment, but if you want to do it correctly, the way it should be done, you need a new motion.

• 1115

Mr. Howe: You cannot amend a motion that has already been passed? Well, then, I move that the Chairman be authorized to hold meetings at which all parties in the House are represented to receive and authorize the printing of evidence when a quorum is not present. That inserts the words that I am suggesting into the motion.

[Interpretation]

TÉMOIGNAGES

(Enregistrement électronique)

[Interprétation]

Le président: Messieurs, nous avons le quorum, je crois. Avant de procéder, je crois que le ministre a une déclaration supplémentaire à faire. Je lui demanderai donc de la faire dès maintenant.

M. Howe: J'en appelle au Règlement, monsieur le président.

Le président: Monsieur Howe.

M. Howe: Je signale au Comité qu'il faudrait modifier la résolution adoptée le jeudi 16 janvier et qui se lit comme suit:

il est décidé que le président soit autorisé à tenir des réunions pour entendre les témoignages et à en autoriser la publication en l'absence d'un quorum.

Ce type de réunion, il faudrait le faire approuver, car le président pourrait approuver lui-même ces comptes rendus. Je voudrais faire une modification, un amendement: après le mot «réunion» qu'on ajoute: «que toutes les parties de la Chambre soient représentées».

Je crois comprendre qu'il y a eu un certain nombre de controverses dans d'autres comités à ce sujet. Je voudrais tirer au clair cette question, de telle sorte qu'on n'aura peut-être pas à consulter le président comme on doit le faire maintenant. Je crois qu'il faudrait définir cette question à cette réunion-ci.

Le président: Je crois qu'il faudrait revenir au Règlement, monsieur Howe. Personnellement, je ne m'oppose pas à votre motion, mais vous devrez en présenter une autre.

M. Howe: On ne peut pas modifier une proposition déjà adoptée? Je propose donc que le président soit autorisé à tenir des réunions, lorsque tous les partis sont représentés, pour entendre les témoignages et à en autoriser la publication en l'absence d'un quorum. Il faudrait insérer les mots que j'ai proposés dans la motion.

[Text]

The Chairman: May I suggest that you write it down and I will read it. Could we pass on to something else in the meantime? Mr. Saltzman, on a point of order.

Mr. Saltzman: I wish to speak to the point of order raised, but if you are going to pass on to the Minister's statement at this time, I will wait until later.

The Chairman: We will wait until Mr. Howe has written it down.

Mr. Saltzman: Then we are going to proceed with this point of order, are we, Mr. Chairman?

The Chairman: We could proceed with the Minister. Is it agreed that we hear the Minister now?

Mr. Émard: On this point of order, sir, before it goes any further, I wonder if the gentleman would not mind inserting, instead of "all parties of the House being present," that "at least three parties of the House." Sometimes you will find that among the smaller parties there are no representatives here and this could be used as an argument for stopping the meeting.

Mr. Saltzman: Mr. Chairman, since a debate has started on this, the point that I would like to make is that it surely must be the responsibility of all parties, when notified that a meeting is to take place, to have representation here. The Committee cannot be held responsible for the absence of members. The assumption is that parties know that there is a meeting and it is their responsibility to ensure that there is representation here. If this amendment is accepted there is just the possibility of perhaps an unofficial boycott simply by a number of parties absenting themselves from committee meetings and the work of the committee might not be able to proceed. I think there is a responsibility upon all parties to ensure that they have membership here, and I do not see how exceptions can be made.

The Chairman: I think Mr. Saltzman has a good point.

Mr. Monteith: Mr. Chairman, there is a point here, of course. These meetings, as I understand it, are to be made formal providing there is not a quorum. If there is a quorum, then all parties do not have to be represented anyhow. This is only in the case of where there is not a quorum.

The Chairman: That is right.

Shall we proceed, gentlemen, with the Minister's statement?

[Interpretation]

Le président: Pourquoi ne l'écrivez-vous pas et je lirai votre motion. Entre-temps, pouvez-vous nous passer à autre chose? Monsieur Saltzman.

M. Saltzman: Un rappel au Règlement, mais si vous voulez passer à la déclaration du ministre à ce moment-ci, je suis d'accord.

Le président: Alors nous attendrons jusqu'à ce que M. Howe l'ait écrite.

M. Saltzman: Puis nous passerons au rappel au Règlement, n'est-ce pas monsieur le président?

Le président: On peut poursuivre. Êtes-vous d'accord que nous ayons la déclaration du ministre dès maintenant?

M. Émard: Avant d'aller plus loin, je me demande si, au lieu de: «tous les partis sont représentés» on ne pourrait pas ajouter plutôt: «les trois partis de la Chambre». Parfois les petits partis n'ont pas de représentants ici et on peut utiliser cela comme un argument pour arrêter la réunion.

M. Saltzman: Le point que je voudrais soulever c'est que tous les partis soient avertis des réunions de telle sorte qu'ils soient représentés ici. Le Comité ne peut pas être tenu responsable s'ils sont absents. On présume qu'ils savent qu'il y a une séance et c'est à eux de s'assurer qu'ils y sont représentés. Si cette modification est acceptée, il y a donc possibilité qu'un certain nombre de membres s'absentent des réunions du Comité et le Comité ne pourra donc pas commencer ses séances. Tous les partis doivent voir à ce que les membres soient présents ici et je ne vois pas pourquoi on pourrait faire des exceptions à ce sujet.

Le président: Je pense que M. Saltzman a un bon argument.

M. Monteith: Je crois savoir que ces réunions doivent être officielles pourvu qu'il y ait un quorum. Alors, s'il y a un quorum, les partis n'ont pas à être tous présents ici. Il faut donc qu'il y ait quorum.

Le président: En effet. Messieurs, est-ce que le ministre peut faire sa déclaration?

[Texte]

Hon. Stanley Ronald Basford (Minister of Consumer and Corporate Affairs): I would like first to ask Dr. Chapman to reply in further detail to some questions that were asked Tuesday night by Dr. Rynard, I believe.

Dr. R. A. Chapman (Director General, Food and Drug Directorate, Department of National Health and Welfare): Mr. Chairman, before doing so, I would like to make a correction in the figures I gave to the Committee at its last sitting. My financial unit has drawn to my attention that the figure that I gave you of proposed estimates for the Food and Drug Directorate for 1969-70 of \$11,698,500 was short by approximately \$300,000 and did not include the latest revision. The correct figure should have been \$11,982,500. I apologize to the Committee for this error.

Mr. Chairman, in regard to the questions asked by Dr. Rynard, I believe that the first one related to the number of man-years assigned to drug research in the Food and Drug Directorate, with particular emphasis on methods to determine drug availability. For the fiscal year 1969-70, for research on drug availability there are 6 man-years in the professional category, 12 man-years in the support category, a total of 18. For all drug research, 50 in the professional category, 54 in the support category, a total of 104; giving a total man-years of 122.

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I should also point out that we have been assigned funds for research on contract. Funds for drug availability, \$47,000; total contract funds for drug research, \$75,000.

The second question related to the laboratories in which the analyses are carried out for the routine monitoring of drug quality. The routine analyses of drugs for quality and safety are carried out in Regional Laboratories located in Halifax, Montreal, Toronto, Winnipeg and Vancouver. In addition to this I should point out that there are 24 District Offices located across Canada in principal cities other than those mentioned, where Inspectors are located who are responsible for obtaining the necessary samples. The following man-years, excluding Management and Administrative support personnel for 1969-70 involved in quality control inspection, import surveillance, labelling and advertising review and general drug surveillance and education are as follows:

Laboratory—57 man-years; Inspection—76 man-years; Total 133 man-years.

[Interprétation]

M. Stanley Ronald Basford (ministre de la Consommation et des Corporations): Je voudrais d'abord demander au Dr. Chapman de répondre en détail à certaines questions qui ont été posées mardi soir par M. Rynard.

Dr. R. A. Chapman (directeur général, Direction des aliments et drogues, ministère de la Santé nationale et du Bien-être social): Monsieur le président, j'aimerais d'abord apporter une petite correction aux chiffres que je vous ai donnés lors de la dernière séance. Ma section des finances a porté à mon attention le fait que les prévisions de \$11,698,500 de la Direction des aliments et drogues pour 1969-70, ne tiennent pas compte des 300 millions de dollars des prévisions révisées. Il aurait donc fallu dire \$11,982,500. Je m'excuse auprès du Comité pour cette erreur.

Monsieur le président, au sujet des questions posées par le docteur Rynard, je crois qu'il s'agissait d'abord du nombre d'années-hommes consacrées à la recherche par la Direction des aliments et drogues au sujet des méthodes pour déterminer la sécurité des médicaments. Pour l'année financière 1969-1970, on prévoit 6 années-hommes dans la catégorie professionnelle, 12 années-hommes dans la catégorie de soutien, soit un total de 18. Pour toutes les recherches sur les médicaments, on prévoit 50 années-hommes dans la catégorie professionnelle, 54 dans la catégorie de soutien, soit un total de 104, et un grand total de 122.

Je signalerai, en plus, qu'on a affecté des fonds pour la recherche aux termes de contrats; pour le total des fonds, des contrats de recherches, il y a 75 millions de dollars.

La deuxième question porte sur les laboratoires où s'effectue le contrôle de routine des médicaments. Ce contrôle est fait dans les laboratoires régionaux d'Halifax, de Montréal, de Toronto, de Winnipeg et de Vancouver. En plus de cela, je signalerai qu'il y a 24 bureaux de district qui se trouvent dans toutes les parties du Canada, dans d'autres villes que celles que j'ai mentionnées. Des inspecteurs sont responsables d'obtenir les échantillons nécessaires. Quant aux années-hommes, à l'exclusion du personnel de gestion et d'administration pour 1969-1970, en ce qui concerne l'inspection du contrôle de la qualité, la surveillance des importations, l'étiquetage et la publicité, il y avait 57 années-hommes pour les laboratoires, 76 années-hommes pour l'inspection, soit un total de 133 années-hommes.

[Text]

It might also be of interest to the Committee to know that plans have been finalized to present workshops in both Toronto and Montreal early in 1969 with the objective of informing smaller manufacturers of their obligations under existing legislation concerning adequate manufacturing facilities and quality control procedures. We have also prepared two guides. One is a general guide to drug manufacturers and the second is aimed specifically at importers of drugs. The second would be entitled "Imported Drug, Manufacturing Facilities and Controls." This would be an outline of our requirements in this area.

The Committee might also be interested to know that the Food and Drug Directorate is organizing a symposium on the physiological equivalence of drug dosage which will be held in Ottawa on June 26-27, 1969. Speakers at this symposium will include outstanding authorities—in some instances world authorities from the Netherlands, the United Kingdom, the United States and Canada.

Thank you very much, Mr. Chairman.

Mr. Basford: Mr. Chairman, I have a short statement to make on employment figures about which I was asked the other day. I had some information with me, I have since put it together in a better form and would like to give it to the Committee, if I may.

The latest report published by the Dominion Bureau of Statistics on the pharmaceuticals and medicines industry relates to the year 1965. For statistical purposes the industry covers the operations of establishments primarily engaged in manufacturing drugs and medicines, but this includes also proprietary medicines and veterinary medicines. Therefore the figures I give will include more firms than will be covered by Bill No. C-102. Preliminary figures in some cases, and I will give those figures also, are available for 1966 and I will note them after the confirmed figure of the 1965 report.

• 1125

The total number of establishments in the industry is reported as 162, with preliminary figures for 1966 of 165. The total value of shipments of goods of own manufacture is given as \$238 million, with a preliminary figure of \$269 million. A total of 46 firms each had value of shipments amounting to more than \$1 million and, of these, 17 had value of shipments over \$5 million. Fifty firms employed more than 50 people and, of these, 14 employed more than 200 people.

The total number of employees in the whole industry was—and this is 1965—11,137,

[Interpretation]

Le Comité aurait intérêt à savoir qu'on a mis au point des plans pour que les ateliers de Toronto et de Montréal informent, au début de 1969, les petits fabricants de leurs obligations, aux termes de l'actuelle législation sur les installations de fabrication et les procédés de contrôle de qualité. Nous avons aussi rédigé deux guides, l'un plus général destiné aux fabricants de produits pharmaceutiques, l'autre plus particulier, aux importateurs de ces produits, et intitulé «Importation de produits pharmaceutiques, installations et contrôles de fabrication.» On aurait ainsi une esquisse de nos exigences en ce domaine.

Le Comité aurait en outre intérêt à savoir que la Direction des aliments et des drogues organise un symposium sur l'équivalence physiologique du dosage des médicaments, prévu à Ottawa les 26-27 juin 1969. Les orateurs y comprendront un bon nombre de personnalités du Royaume-Uni, des États-Unis et de la France.

Merci beaucoup, monsieur le président

M. Basford: J'avais certains renseignements. Je les ai réunis. Vous me permettez de les donner tout de suite au Comité.

Le dernier rapport publié par le bureau de la Statistique sur la fabrication des drogues et des produits médicaux remonte à 1965. Aux fins de la statistique, nous comprenons les établissements qui fabriquent surtout des drogues. Cela s'applique aux spécialités pharmaceutiques et à la médecine vétérinaire. Les chiffres que je vais vous donner comprennent plus d'entreprises que n'en couvre le bill C-102. Dans certains cas, je vais vous donner des figures préliminaires, provisoires. Dans le cas de 1966, j'ai aussi les chiffres confirmés de 1966.

Le nombre total des établissements dans l'industrie est de 162. Les chiffres provisoires pour 1966 donnent 165. L'expédition de marchandises de fabrication intérieure est de 238 millions contre 269 millions (chiffre préliminaire). 46 entreprises avaient des expéditions de plus de \$1 million chacune et parmi celles-ci, 17 avaient des expéditions de \$5 millions. 50 employaient plus de 50 personnes et 14 employaient plus de 200 personnes.

Le nombre total d'employés dans l'industrie en 1965 était de 11,137 (les chiffres provisoires

[Texte]

with a preliminary figure for 1966 of 11,649. Manufacturing employment was distributed among six provinces. There was a total of 2,662 production and related workers in Ontario; 1,716 in the province of Quebec; 31 in British Columbia, and others (the numbers of which are kept confidential to meet the secrecy requirements of the Statistics Act) in Nova Scotia, Manitoba and Alberta.

Mr. Rynard: Could the Minister table that document or have copies of it distributed?

Mr. Basford: I would be happy to table it. If we have copies I will see that you get one.

I was also asked the proportion of prescription drugs which are patented and since this was a very difficult question to answer precisely I would like to add to the remarks I made on Tuesday.

A recent survey made by the Pharmaceutical Manufacturers' Association of Canada showed that of the 263 most frequently prescribed drugs 156 of them or 59.3 per cent were patented. Slightly over half of the 263 most frequently prescribed drugs were therefore patented and would be affected by this act.

That is all I have, Mr. Chairman.

The Chairman: Thank you very much, Mr. Basford.

Lady and gentlemen, we are now going to proceed with the motion moved by Mr. Howe and seconded by Mr. Monteith, that the resolution passed by the Committee on January 16, 1969 be amended by adding after the word "meetings" the words "at which all parties in the House are represented." The resolution will then read: That the Chairman be authorized to hold meetings at which all parties in the House of Commons are represented to receive and authorize the printing of evidence when a quorum is not present.

Mrs. MacInnis (Vancouver-Kingsway): Mr. Chairman, before you put the motion I would like to make it abundantly clear—even if it is necessary to put it in there—that no vote shall be taken without a quorum.

The Chairman: That is covered in Standing Orders.

Mr. Howe: This just means that every party is represented when the minutes are approved. It does not define a quorum as such.

The Chairman: That is to prevent the Chairman from holding meetings by himself.

[Interprétation]

pour 1966 sont de 11,649). L'emploi dans les fabriques était réparti entre 6 provinces. Il y avait 2,662 employés en Ontario, 1716 dans la province de Québec, 31 en Colombie-Britannique et d'autres (dont le nombre a été gardé secret en vertu de la Loi sur la statistique), en Nouvelle-Écosse, au Manitoba et en Alberta.

M. Rynard: Si vous me permettez, le ministre a-t-il des exemplaires de cela que l'on pourrait distribuer parce que nous—Est-ce qu'il y a des exemplaires disponibles?

M. Basford: Je ferai déposer le document. Si possible, je vous en ferai tenir un exemplaire.

On m'a aussi demandé le nombre des spécialités pharmaceutiques. J'aimerais ajouter aux remarques que j'ai faites à ce moment-là ceci: une enquête récente faite par l'Association des manufacturiers du Canada a indiqué que sur les 263 drogues le plus fréquemment prescrites, 156, soit 59.3 p. 100, étaient des médicaments brevetés. C'est-à-dire, presque la moitié des 263 médicaments les plus souvent prescrits.

Le président: Monsieur le ministre, madame, messieurs, avant de continuer notre travail, nous allons parler de la motion présentée par M. Howe et appuyée par M. Monteith, visant à amender en ajoutant après le mot «meeting» un bout de phrase en anglais: at which all the parties in the House are represented que le président soit autorisé à tenir des réunions, où tous les partis de la Chambre des Communes sont représentés, à recevoir et autoriser l'impression des témoignages même lorsque le quorum n'est pas atteint.

Mme MacInnis (Vancouver-Kingsway): J'aimerais préciser qu'il ne pourrait y avoir aucun vote de pris sans quorum.

Le président: Ceci est compris dans le Règlement.

M. Howe: Tout ce que l'on veut dire c'est que tous les partis doivent être représentés.

Le président: ... Pour empêcher le président de siéger tout seul.

[Text]

• 1130

M. Émard: Monsieur le président, qu'arriverait-il si nous avions quorum mais qu'un parti ne soit pas représenté ici?

Le président: Cela ne change rien.

M. Émard: Cela ne change rien?

M. Thomas (Maisonnette): Monsieur le président, d'après ce que j'ai compris à la suite de la lecture de la motion de M. Howe, il semble insister que tous les partis soient représentés à ce moment-là?

Le président: Certainement.

M. Thomas: Alors vous dites que cela ne change rien.

Le président: Non, car s'il y a suffisamment de membres pour former un quorum, nous l'avons donc à ce moment-là.

M. Thomas (Maisonnette): Alors le quorum est la chose importante, il n'est pas question de tous les partis?

Le président: C'est cela.

M. Thomas (Maisonnette): D'accord.

The Chairman: Are you all in favour?

Mr. Otto: Oh, no, Mr. Chairman. You will have to ask who is in favour and who is not in favour.

The Chairman: All in favour?

Some hon. Members: Of what?

The Chairman: All in favour of the resolution I read? Shall I read it again?

Mr. Otto: Mr. Chairman, does this then mean that if any of the parties want to avoid the meetings if there is not a quorum they can just fail to attend and then there is no meeting. Is that the meaning of that motion?

Mr. Howe: Mr. Chairman, could I interject. This is a meeting to approve the minutes. It is not a regular meeting of the Committee, but in case the regular meeting had wound up without a quorum and the minutes could not be approved without a quorum, then the Chairman can call a meeting at which all the parties of the House are represented, and at that meeting they can approve the minutes.

Mr. Otto: I think the new rules cover that. We can print all the minutes even if we do not have a quorum. The only thing we cannot

[Interpretation]

Mr. Émard: Mr. Chairman, what would happen if we do have a quorum, but if one party is not represented here?

The Chairman: This does not change anything.

Mr. Émard: That does not change anything?

Mr. Thomas (Maisonnette): Mr. Chairman, from what I have understood from the reading of the motion of Mr. Howe, he seems to insist that all parties should be represented on such occasions.

The Chairman: Certainly.

Mr. Thomas (Maisonnette): Thus, you say it does not change anything.

The Chairman: No, because if there are enough members to form a quorum, we have what is needed.

Mr. Thomas (Maisonnette): Therefore, the quorum is the important thing, and it is not a question of having all parties represented.

The Chairman: That's right.

Mr. Thomas (Maisonnette): I agree.

Le président: Tout le monde est en faveur?

M. Otto: Non, monsieur le président, il faut demander qui est pour et qui est contre.

Le président: Tous les pour?

Des voix: Pour quoi?

Le président: La résolution que je viens de lire. Dois-je la relire?

M. Otto: Est-ce que cela veut dire que si un des partis désire empêcher la séance il lui suffit de faire défaut?

M. Howe: C'est une séance pour approuver les comptes rendus. Ce n'est pas une réunion ordinaire. Si les séances régulières n'ont pas le quorum, et que l'on ne puisse ainsi approuver les comptes rendus, le président peut appeler une séance où tous les partis soient représentés, et à ce moment-là on peut procéder.

M. Otto: Les nouvelles règles y pourvoient. Nous pouvons faire imprimer les comptes rendus même sans quorum. La seule chose

[Texte]

do is vote. What is the purpose of approving minutes ...

Mr. Howe: You see, this resolution said "that the Chairman be authorized to hold meetings to receive and authorize the printing of evidence when a quorum is not present." I felt that to approve the minutes each party in the House should have a representative on that group.

Mr. Otto: Then what you are doing is changing the rules, because the rules definitely state that even if there is no quorum, when a meeting is called the evidence which is taken may be printed and the meeting is a valid meeting, it is a regular meeting. The only thing is that you cannot vote at meetings where there are no quorums. You now want to add an additional part to our rules to the effect that all parties must be represented. If we are going to do that, then I think we should bring it before the Procedure and Organization Committee and have the rules amended in that way.

The Chairman: Mr. Otto, I will read the Standing Orders on meetings without quorums:

65. (7) The presence of a quorum shall be required whenever a vote, resolution or other decision is taken by a standing or a special committee, provided that any such committee, by resolution thereof, may authorize the chairman to hold meetings to receive and authorize the printing of evidence when a quorum is not present.

I do not think we have to have a resolution.

Mr. Otto: Mr. Chairman, when it stated that the meeting may be held and the evidence taken and printed, and so on, I do not think it meant to go any further than exactly that. It would presume the normal resolution that the evidence be taken and printed. I do not see how we can add a condition which was not anticipated or even considered by the Committee. I for one would be against that because at times we are going to find ourselves in a position where we want to take evidence, where there is not a quorum and where no vote is expected, and we may be prevented from so doing by one party not attending. That is what your resolution says.

Mr. Howe: No, no, this is not correct. This is to define the attendance at the special meeting which the Chairman calls to authorize the printing of evidence.

Mr. Otto: Do you mean the steering committee?

[Interprétation]

impossible, c'est voter. A quoi sert d'approuver les comptes rendus...

M. Howe: La présente résolution permet au président de continuer la séance, d'entendre des témoignages même si on n'a pas le quorum. Je pensais que, pour approuver les comptes rendus des comités, il faudrait que tous les partis de la Chambre soient représentés.

M. Otto: Ce que vous faites alors, c'est changer les règlements car les règlements disent clairement que s'il n'y a pas de quorum lorsque la séance est appelée à l'ordre, on peut publier les témoignages au compte rendu et la séance est valable. Sauf qu'à une telle séance, on ne peut pas voter. Et vous, vous voulez qu'on ajoute au règlement la condition que tous les partis soient représentés. Il faudrait alors que ça passe au sous-comité de la procédure et de l'organisation.

Le président: Voici le règlement concernant les réunions sans un quorum:

65(7) La présence d'un quorum est nécessaire lorsqu'un comité permanent ou spécial est appelé à se prononcer sur un crédit, une résolution ou une autre décision; toutefois, ces comités peuvent par une résolution, autoriser le président à tenir des réunions pour entendre les témoignages et à en autoriser la publication en l'absence d'un quorum.

Je ne crois pas que la résolution soit nécessaire.

M. Otto: Lorsqu'on dit que l'on peut se réunir en séance, pour entendre les témoignages, les imprimer, et ainsi de suite, ce n'est pas une invitation d'aller plus loin. On suppose la résolution habituelle pour entendre et publier les témoignages. Je ne vois pas comment on pourrait ajouter d'autres conditions. Je suis contre cette mesure parce qu'il arrivera des moments où nous voudrions entendre des témoignages, même s'il n'y a pas de quorum, ni de vote prévu, et nous en serons empêchés par l'absence des représentants d'un parti. C'est ce que votre résolution dit.

M. Howe: Non, c'est une erreur. Il s'agit de préciser la composition de la réunion spéciale pour autoriser la publication des comptes rendus.

M. Otto: Est-ce que vous parlez du comité de direction?

[Text]

Mr. Howe: It could be the steering committee.

The Chairman: No, I do not think so, Mr. Howe. Could you tell the members exactly what you mean by putting this motion forward. We might as well face the fact that you are afraid the Chairman may call a meeting and he will be the only one in attendance.

Mr. Howe: This is true, sir.

• 1135

The Chairman: But notice will always have to be given. When I call a meeting notices will always be sent to all members of the Committee. Otherwise you will put me out of office.

Mr. Howe: Mr. Chairman, I do not want to do that.

According to the standing orders, this special meeting was not to vote. It was just to approve minutes of meetings that had been held, and I felt there should be a representative of each party at that particular meeting in order to approve the minutes. That meeting does not have to have a quorum.

The Chairman: No, but what do you mean exactly by "special meeting"?

Mr. Howe: It is defined in the standing orders, "...authorize the chairman to hold meetings to receive...". The Chairman just read out that he can call a meeting. There does not have to be a quorum at that meeting, sir, to authorize the minutes. Is that not correct?

You do not have to have a quorum to approve those minutes. So, for this purpose I felt that to approve minutes that may have been carried forward at a meeting where there was not a quorum—because we do hold meetings of this Committee without a quorum—that probably for technical reasons we should insist that for approval of minutes within a meeting that the Chairman could call, which does not necessitate having a quorum, each party should be represented.

Mr. Otto: Mr. Chairman, does the approval of minutes mean the printing of evidence? Is that your interpretation of "approval of minutes"?

Mr. Howe: To authorize the printing of evidence.

Mr. Otto: Then you are talking about the printing of evidence. With all respect, Mr. Chairman, although Mr. Howe says the only motive is a technical one, we are all political animals. I can visualize a situation where a

[Interpretation]

M. Howe: Possiblement.

Le président: Je ne le crois pas. Pourriez-vous dire aux députés, ce que vous entendez par la motion que vous avez présentée. Je sais que vous craignez que le président convoque une réunion où il serait le seul membre présent.

M. Howe: C'est exact.

Le président: Mais les avis seront toujours distribués à temps aux membres du comité. Sinon je perdrai mon siège.

M. Howe: Monsieur le président, ce n'est pas mon intention. Conformément au règlement, cette réunion spéciale n'a pas été convoquée pour voter, mais pour approuver les comptes rendus des réunions antérieures, et j'estime qu'il devrait alors y avoir des représentants de tous les partis. Il n'est pas nécessaire d'avoir le quorum.

Le président: Qu'entendez-vous exactement par séance spéciale?

M. Howe: Le règlement dit: «autorise le président à convoquer des séances pour entendre...» Le président vient juste de faire remarquer qu'il peut convoquer une séance. Et lors de ces séances, il n'est pas nécessaire qu'il y ait quorum, pour approuver le compte rendu. N'est-ce pas?

Il n'est pas nécessaire qu'il y ait quorum pour les approuver. Je crois que pour approuver le compte rendu, dans une séance où il n'y a pas de quorum, car cela arrive, je croyais que pour des raisons techniques nous devrions insister, pour l'approbation des comptes rendus lors d'une réunion convoquée par le président où il n'y a pas de quorum, que tous les partis soient représentés.

M. Otto: Est-ce que l'approbation des comptes rendus signifie la publication des témoignages?

M. Howe: Oui, d'approuver la publication des témoignages.

M. Otto: Vous parlez donc de la publication des témoignages. Sauf votre respect, monsieur le président, bien que M. Howe dit qu'il est motivé par l'aspect purement technique, nous sommes tous des animaux politiques. Je pour-

[Texte]

party or two parties or even three parties may decide not to attend a meeting in order to try to force a constant and 100 per cent attendance by the government party, which would be very difficult. Indeed, the whole purpose of this rule is that if the Chairman calls a meeting and the witnesses attend—they have gone to the trouble of coming to Ottawa to attempt to give evidence—that even if the members do not want to show up it will still be a good meeting despite the fact the Chairman holds it himself. However, I doubt that this would happen. I think he will always get enough members. Mr. Chairman, as long as notice is given I do not understand why we should have the further condition that if the members do not feel like coming out, or there is not a quorum, that we must have representation from all parties. I do not think parties were considered as part of this Committee.

Mr. Howe: There is no reference to a quorum in the original motion, Mr. Otto. It is just called a meeting.

Mr. Rynard: Mr. Chairman, at the moment I am not objecting one way or the other, but I think this statement of Mr. Otto's—he and I come from the same area—to the effect that parties are not considered in the makeup of a committee is completely wrong because every party must be represented on a committee if that Committee is going to do its job. I think we have to accept and keep in mind that this is a democratic principle and a democratic form, whether it is the NDP or the Créditiste or whatever the party may be—or the Tories. They must be represented for us to have democratic government. I think you must accept this.

Mr. Otto: Mr. Chairman, with respect to Mr. Rynard's argument, if you recall when this clause by clause examination took place in the House of Commons there was no condition that the attendance in the House had to have representation from any or all parties. You are now saying that because it is in committee naturally it is an extension of the principle of a committee of the whole breaking up into a special committee. However, we are adding another condition in this clause; we are saying that in order to have the minutes approved there must be representation from all parties. We are really departing from the established practice in the House of Commons that as long as 20 members are present—and it may be 20 members from one party—a clause-by-clause examination can be undertaken and the bill approved. If we are now going to add another condition, then I

[Interprétation]

rais imaginer la situation où un parti ou deux ou même les trois partis décident de ne pas assister aux séances où il n'y aurait plus que le parti au pouvoir, et créer ainsi une situation très délicate. Le but de ce règlement est que si le président convoque une réunion où les témoins sont présents, car ils sont venus à Ottawa spécialement pour témoigner, et que certains membres des autres partis décident de s'abstenir, la séance est valable même si le président est seul. Je ne crois pas que cette situation se présente. Si les avis sont distribués, je ne crois pas qu'il soit nécessaire de poser d'autres conditions, à savoir que si les députés décident de ne pas venir et qu'il n'y a pas le quorum, il faudrait un représentant de chaque parti. Je ne crois pas qu'on ait pensé aux partis pour la composition de ce Comité.

M. Howe: Je ne fais aucune référence au quorum dans ma motion initiale. Je n'ai parlé que de séance.

M. Rynard: Je ne m'oppose pas d'une façon ou d'une autre, mais je crois que M. Otto fait erreur lorsqu'il dit que l'on ne tient pas compte du parti dans la composition des comités. Chaque parti doit être représenté si le comité doit faire son travail. Il faudrait retenir ce principe démocratique quel que soit le parti. Il faut que chacun des partis soit représenté pour nous donner une représentation démocratique. Je crois que vous devez tomber d'accord avec moi.

M. Otto: Monsieur le président, malgré les arguments de mon confrère, je veux lui rappeler que, lorsque nous avons fait l'étude article par article à la Chambre, il n'a pas été question qu'il devait y avoir représentation de tous les partis. Vous soutenez maintenant que puisque ce Comité remplace le comité plénier il faut y étendre les mêmes principes. Toutefois, nous ajoutons ici une nouvelle condition qu'il y ait des représentants de chaque parti pour qu'on puisse procéder à l'approbation du compte rendu. On s'écarte alors des principes de la Chambre où il suffit que 20 députés soient présents, même si ce sont 20 membres du même parti, pour qu'on puisse procéder à l'étude article par article et approuver le projet de loi. Si nous allons ajouter une nouvelle condition, il faudrait d'abord le renvoyer au sous-comité de la procédure et de l'organisation.

[Text]

think it should go back to the Procedure and Organization Committee for consideration.

• 1140

Mr. Rynard: Mr. Chairman, I just want to add a supplementary comment to what Mr. Otto has said. I think he is probably like the Pharisees of old; he is following the letter of the law, but we have set up committees so we could work more effectively, and to work more effectively we certainly have to have members from all the parties. I think we have to consider this, regardless of the legal implications.

Mrs. MacInnis (Vancouver-Kingsway): Mr. Chairman, I was about to raise a point of order with the Chair. I understand we are now operating under the new rules laid down for all committees. It seems to me that this particular matter runs counter to the new rules. As a committee are we competent to make regulations for the committees which run counter to the rules already laid down? The point I am raising is whether this amendment is in order.

Mr. Howe: Mr. Chairman, there has been a considerable amount of controversy over this very question in a lot of the committees of the House. A lot of them deferred it and a lot of them amended it. I understand this is the type of amendment that was accepted by the Transport and Communications Committee.

Mr. Haidasz: In view of the confusion about this matter, Mr. Chairman, I would suggest this resolution stand and that you consult with the Chairman of the procedural committee or the House leaders to see what further elucidation can be given and whether all committees will be working on the same premise as asked by Mr. Howe, who proposed this resolution.

Mr. Rynard: I second the motion.

The Chairman: Is it agreed that we reserve the motion until I consult the authorities?

Some hon. Members: Agreed.

The Chairman: We will now resume consideration of clause 1 of bill C-102, An Act to amend the Patent Act, the Trade Marks Act and the Food and Drugs Act.

Mr. Basford: On Tuesday Mr. Robinson asked for an analysis of the Harley Committee recommendations and a breakdown of them, and what has been done with respect to them. I did not table it to start with because I understand Mr. Robinson has been grounded.

[Interpretation]

M. Rynard: Monsieur le président, un commentaire supplémentaire à ce qu'a dit M. Otto. Mon confrère est comme les Pharisiens, il suit la loi à la lettre, mais quand nous établissons des comités afin de travailler plus efficacement, il nous faut certainement des députés de tous les partis. Je crois qu'il faut prendre ceci en considération, quelles que soient les implications juridiques.

Mme MacInnis (Vancouver Kingsway): Je voudrais en appeler au règlement. Nous fonctionnons en vertu du nouveau règlement établi pour les comités. Est-ce que le comité est compétent pour introduire des conditions contraires au nouveau règlement. Je me demande si cet amendement n'est pas irrecevable.

M. Howe: Monsieur le président, il y a eu beaucoup de controverses à ce sujet dans plusieurs comités de la Chambre. Je sais qu'un amendement de ce genre s'est présenté aussi sur le comité des Transports et des Communications.

M. Haidasz: En vue de la confusion qui existe à ce sujet j'aimerais laisser tomber cette résolution afin que vous puissiez consulter le président du comité sur la procédure pour voir ce que l'on pourrait faire avec cette mesure et si tous les comités fonctionneront selon le principe que M. Howe a avancé.

M. Rynard: J'appuie la motion.

Le président: Nous sommes donc d'accord pour mettre la motion de côté jusqu'à ce que j'aie consulté les autorités?

Des voix: Oui.

Le président: Nous en revenons maintenant à l'article 1 du bill C-102, *Loi modifiant la Loi sur les marques de commerce et la Loi des aliments et drogues.*

M. Basford: Mardi, M. Robinson a demandé une analyse des recommandations du comité Harley et un aperçu de celle-ci et des dispositions prises à cet effet. Je n'ai pas déposé ce rapport tout de suite car j'ai appris que M. Robinson est absent.

[Texte]

I would like to have distributed in answer to Mr. Robinson's question a statement in English and in French which breaks down the Harley Committee recommendation, to whom they were directed, and so forth. They were directed at government, what has been done, or what they are thinking on.

I have copies of the statement that was prepared for me on the industry figures, in English only because it was not prepared for tabling, but if anyone would like it, it is available.

The Chairman: I would like to draw the Committee's attention to a telegram received 29 January, 1969, from Dr. Marvin Darrach, Professor of Biochemistry at the University of British Columbia, which reads:

LAST WEEK TELEGRAPHED MR. MUNRO AS FOLLOWS: DOCTORS FORD, PERNOWSKI AND MYSELF WILLING TO TESTIFY BEFORE HEALTH COMMITTEE CONCERNING DRUG BILL C-102.

As Dr. Darrach had presented a statement on medical research and the drug industry to the Special Committee on Drug Costs and Prices in 1966-67, I think it would be appropriate to refer this request to the Subcommittee on Agenda and Procedure for consideration. Is this agreed?

• 1145

Mr. Rynard: Mr. Chairman, in doing this, I think the steering committee should take under consideration that we want people from industry and we want people from the Economic Council, and comments from the heads of departments of pharmacology in the universities, either Toronto, or Montreal, and let us see what they think of this bill, because I would like their opinion before I come to a decision on it. I think that is only asking what is right and proper. I want that referred back to the steering committee when they meet, for their consideration.

The Chairman: Is there any other comment on this?

M. Émard: Oui, monsieur le président. Lors de la discussion de mardi, vous avez dit que nous aurions l'occasion de faire valoir les raisons pour lesquelles nous voudrions entendre certains témoins; je pensais que nous l'aurions aujourd'hui.

Le président: Les raisons doivent être données au président qui, lui, les transmettra au comité directeur, ou si vous le préférez, vous

[Interprétation]

J'aurais aimé distribuer ce rapport en réponse à la question de M. Robinson, en français et en anglais. Il traite des recommandations du comité Harley, des personnes touchées par le rapport etc...les recommandations étaient adressées au gouvernement.

J'ai des exemplaires du rapport qui m'a été fourni quant aux chiffres concernant l'industrie, en anglais seulement, car il n'a pas été préparé en vue d'être déposé, mais si quelqu'un le désire, il est disponible.

Le président: J'aimerais signaler au Comité un télégramme reçu le 29 janvier, venant du docteur Marvin Darrach, professeur de biochimie à l'Université de la Colombie-Britannique. J'en donne lecture:

SEMAINE DERNIÈRE TÉLÉGRAPHIÉ
M. MUNRO AINSI DOCTEURS FORD,
PERNOWSKI ET MOI-MÊME VOULONS
TÉMOIGNER DEVANT COMITÉ SANTÉ
CONCERNANT BILL DROGUES C-102.

Comme le docteur Darrach a présenté une déclaration sur la recherche médicale et l'industrie des produits pharmaceutiques au comité spécial sur les prix de revient et de vente des drogues en 1967, je crois qu'il serait opportun de déferer cette requête au sous-comité du comité de la procédure. Est-ce d'accord?

M. Rynard: Monsieur le président, en faisant cela, je pense que le comité de direction devra prendre en considération que nous désirons notamment avoir plus de témoins venant de l'industrie et des témoins venant du Conseil économique, ainsi que certains commentateurs des doyens ou des professeurs des facultés de pharmacie de l'Université de Montréal, ou de Toronto afin de savoir ce qu'ils pensent du projet de loi. J'aimerais connaître leurs opinions avant d'en venir à une décision. Je pense que cela n'est que justice. Je voudrais que cela soit déferé au comité de direction lorsqu'il se réunira de nouveau.

Le président: Y a-t-il d'autres commentaires là-dessus?

Mr. Émard: Yes, Mr. Chairman. I believe that last Tuesday you said that we would have the opportunity to put forth the reasons why we would like to call certain witnesses. I thought that today we would have this opportunity.

The Chairman: The reasons must be given to the Chairman who, in turn, will transmit them to the Steering Committee, or if you

[Text]

pouvez en faire part vous-mêmes à un membre du comité directeur.

M. Émard: Mais si je comprends bien, la décision du comité directeur sera communiquée à ce Comité après, pour que nous l'acceptions ou la rejetions, selon le cas.

Le président: C'est le Comité qui décidera.

M. Émard: Merci bien, monsieur le président.

The Chairman: Is it agreed then, that this should be referred to the steering committee?

Some hon. Members: Agreed.

Mr. Howe: When is this steering committee to meet?

The Chairman: As soon as possible.

Mr. Haidasz: Mr. Chairman, may I ask Dr. Rynard why he wants to hear these people. Were they not heard before by the Harley Committee?

Mr. Rynard: No, they were not. Nobody was called from industry, in spite of the fact that one of the members who is now in higher places wanted this done. We have had none of the professors who are in pharmacology and who know this work intimately. We have had no comments from them on how Bill C-102 is going to work.

Are they going to be able to come and tell us that this is perfectly safe, that it is all right to pass this bill? This is what we want to know, and we want to be able to ask them, so that we can come to a conscientious conclusion of it.

Mr. Haidasz: Have these people requested you that they be asked.

Mr. Rynard: No, they have not requested me. I am asking this for information for this whole Committee, including myself, and I am sure that they would be willing as part of their services to come here, if they were asked.

Mr. Rock: Since Dr. Haidasz mentioned those who had appeared before the Harley Committee, Mr. Chairman, I want also to add that the representatives of these industries who had appeared at the time, did not know what the results of the findings were going to be. They did not know what impact this legislation may have on the future of their companies, the expansion of their companies.

Now that they know what is in the bill, they also know what the impact will be, but you people do not know what the impact will

[Interpretation]

wish you may give them yourself to someone from the Steering Committee.

Mr. Émard: If I understand well, the decision of the Steering Committee will be presented to this Committee so that we can either accept it or reject it.

The Chairman: The Committee will decide.

Mr. Émard: Thank you, Mr. Chairman.

Le président: Est-ce qu'on accepte que ceci soit déferé au Comité?

Des voix: Oui.

M. Howe: Quand le comité de direction se réunira-t-il?

Le président: Dès que nous le pourrons.

M. Haidasz: Monsieur le président, puis-je demander à M. Rynard pourquoi il veut entendre témoigner ces gens? N'ont-ils pas été entendus lors des séances du Comité Harley.

M. Rynard: Non, Aucun membre de l'industrie n'a témoigné, même si un des membres qui occupe maintenant une haute fonction l'avait alors demandé. Nous n'avions aucun témoin qui ait été professeur de pharmacologie et connaissant intimement ce domaine. Nous n'avons aucun commentaire de leur part au sujet de l'application du bill C-102.

Pourront-ils nous dire vraiment que tout est dans l'ordre et que l'on peut adopter cette mesure? C'est ce que nous voulons leur demander, et nous voulons avoir le loisir de le leur demander afin d'arriver à une conclusion raisonnable.

M. Haidasz: Est-ce que ces personnes vous ont demandé à venir témoigner?

M. Rynard: Non, ils ne me l'ont pas demandé. Je demande cela simplement en vue d'obtenir des renseignements pour le Comité, ainsi que pour moi-même, et je suis certain qu'ils seraient heureux d'offrir leurs services si on le leur demandait.

M. Rock: Puisque le docteur Haidasz a mentionné les témoins qui sont venus devant le Comité Harley, monsieur le président, j'aimerais ajouter que les représentants des industries qui ont comparu n'ont pas connu le résultat de nos recommandations.

Ils ne connaissent pas non plus quel pourrait être l'impact de cette mesure législative sur l'avenir de leurs sociétés, de l'expansion

[Texte]

be. Therefore I feel that it should be considered that they also be invited if they wish to appear before you, so that they can explain what the economic impact will be, what the impact will be on the company for expansion in the future.

As I said yesterday, and I say this very seriously, when you start importing drugs from other countries, they will not be buying them from these companies, and therefore it will be a deterioration as far as their productivity is concerned. Therefore they will have to sack many employees. There is proof in the past of what happened to other industries when legislation such as this was allowed. So this should be considered by the Committee, Mr. Chairman.

The Chairman: Is it agreed that this matter be referred for further study.

Agreed.

The Chairman: I now have a letter here that comes from the PMAC, which we received this morning. It is in French, but I will translate it if my English is good enough. Excuse me, I forgot we have translators.

• 1150

Cher docteur Isabelle,

Le 27 janvier je vous ai écrit au nom des membres de l'Association Canadienne des Fabricants en Pharmacie pour vous demander que des représentants de notre Association soient appelés à témoigner devant le Comité permanent de la Santé, du Bien-être social et des Affaires sociales dont vous êtes le président afin de vous donner le point de vue de notre industrie au sujet du projet de loi C-102.

A la lumière de la décision prise par le Comité directeur de votre Comité, telle qu'exprimée mardi dernier, nous reconnaissons que vous ne désirez pas entendre les témoignages additionnels. Nous désirons donc, par la présente, retirer notre demande.

Cependant, nous sommes toujours à la disposition de votre Comité pour lui fournir les renseignements additionnels lesquels nous croyons devraient être inclus dans les procès-verbaux de votre Comité. Veuillez accepter, cher docteur Isabelle, l'expression de mes sentiments les meilleurs.

Guy Beauchemin

[Interprétation]

de leurs sociétés. Maintenant qu'ils savent ce que le bill contient, ils savent également quelles en seront les conséquences et les incidences, mais nous, nous n'en savons rien. Donc, je pense qu'il faudrait les inviter s'ils veulent comparaître devant nous, de façon à ce qu'ils nous expliquent quelles seront les conséquences vis-à-vis de l'expansion de ces sociétés dans l'avenir.

Comme je l'ai dit hier, quand on commence à importer des médicaments des pays étrangers, il y aura peut-être une détérioration en ce qui concerne la productivité. Il faudra donc mettre à pied un certain nombre d'employés, et ceci s'est passé dans le passé, quand on a adopté des mesures semblables pour d'autres industries. Voilà pourquoi il faudrait qu'il y ait étude du Comité à ce sujet, monsieur le président.

Le président: Est-ce qu'on accepte de référer cette question au comité?

Adopté.

Le président: J'ai ici une lettre qui vient de ACFP que j'ai reçu ce matin. Elle est en français et je vais la traduire.

Pardon, j'ai oublié que les traducteurs étaient ici.

The Chairman:

Dear Doctor Isabelle. On January 27, I wrote you on behalf of the members of the Pharmaceutical Manufacturers Association of Canada to ask you to summon representatives of our Association as witnesses before the Standing Committee on Health, Welfare, and Social Affairs of which you are the Chairman, so as to put forth the point of view of our industry regarding Bill C-102.

Following the decision taken by the Steering Committee of your Committee as explained last Tuesday, we recognize that you do not wish to have any additional testimony. We wish, therefore, to withdraw our request herewith. However, we remain at the disposal of your Committee to furnish any additional information we believe should be included in the report of your Committee.

Yours very truly,

Guy Beauchemin
Executive Vice-Chairman.

[Text]

M. Thomas (Maisonneuve): Monsieur le président, de quelle association?

Le président: L'Association canadienne des fabricants en pharmacie, ACFP.

It is our privilege to have with us again today, the Hon. Ron Basford and officers of the Department of National Health and Welfare, to answer your questions. Shall clause 1 carry?

Mr. Rock: Is the statement that was handed to us now the one the Minister made before?

The Chairman: Yes, Mr. Rock.

Mr. Rock: In your report that you read to the Committee, you mentioned that Quebec has 1,716 employed in the industry; I beg to differ with you completely on this. I have figures here with just the PMAC...

Mr. Émard: No, it is 11,137.

Mr. Rock: Wait a minute now; a total of 11,649 in Canada and they mention that in the Province of Quebec there are only 1,716 and 2,662 in Ontario. I would say to you that I have figures here, first of all in one report from the PMAC for Quebec, that they have 5,000 employees in the Province of Quebec of which 25 per cent have academic qualifications. Out of a survey of 28 member companies—not the total member companies, but 28 member companies—the total number of employees was 4,342 and the percentage of university graduates was 25 per cent, so this completely differs from your figures, Mr. Minister.

Mr. Basford: The statement, Mr. Rock, is based on DBS figures. They refer to manufacturing employment principally because you expressed your concern solely for the workers in the industry.

Mr. Rock: Do you feel that the people who are graduates are not also working in these laboratories?

Mr. Basford: I was concerned with the workers that you were concerned with.

Mr. Rock: Oh, no; I was concerned with the graduates. If you go back to my speech, first when it was Bill C-190, and all the speeches I have made on this subject matter, you will find I was concerned with the employees—the workers if you want to call them that—and also the graduates; they are employees too, those who are working in research laboratories and those who are working in test laboratories, and so on.

[Interpretation]

Mr. Thomas (Maisonneuve): What Association is that again, Mr. Chairman?

The Chairman: The Pharmaceutical Manufacturers Association of Canada.

Nous avons donc le privilège d'avoir aujourd'hui le ministre Basford et des fonctionnaires du ministère de la Santé et du Bien-être social qui répondront à vos questions. Peut-on adopter l'article 1?

M. Rock: Le rapport qui nous a été remis, est-ce celui que le ministre a fait?

Le président: Oui, monsieur Rock.

M. Rock: Dans le rapport que vous avez lu au Comité, vous avez indiqué qu'au Québec, 1,716 personnes étaient employées dans cette industrie. Or, je suis en désaccord complet avec vous sur ce point. J'ai ici des chiffres que la PMAC...

M. Émard: Non, c'est 11,137.

M. Rock: Un instant. 11,649 au total au Canada, et, selon eux, seulement 1,716 au Québec et 2,662 en Ontario. Or, selon mes chiffres, fournis par l'ACFP, il y en a 5,000 au Québec, dont 25 p. 100 de diplômés. Sur 28 compagnies membres, il y avait un total de 4,342 dont 25 p. 100 de diplômés de l'Université. Ceci diffère complètement de vos chiffres, monsieur le ministre.

M. Basford: Il s'agit d'un rapport du Bureau de la statistique. Il s'agit de l'emploi dans les usines, dans les fabriques.

M. Rock: Et vous estimez que les diplômés d'universités ne travaillent pas dans ces laboratoires?

M. Basford: Je m'intéressais à la même catégorie de travailleurs que vous.

M. Rock: Non, je m'intéressais aux diplômés de l'université. Vous pouvez revenir sur les discours que j'ai faits à ce sujet où je m'intéressais aux employés, aux travailleurs, et aux diplômés.

[Texte]

This is why I was suggesting to members yesterday that before passing anything here they better ask to visit one of the plants in Montreal to see what actually is happening in these places and what involvement there is before they make a serious decision like this.

If you have never visited any of these manufacturing companies then, by God, how could you make a decision like this? How could your consciences allow you to do so without even knowing how the company operates, and everything?

Mr. Basford: The course of action embodied in this Bill, Mr. Rock, is a recommendation of the Harley Committee which visited all the plants, or many of them. I would be happy, if Mr. Rock is questioning the figures, to table the DBS table.

Mr. Rock: This is a report from the PMAC that was submitted to the Castonguay Commission in Quebec.

The Chairman: Does that answer your question, Mr. Thomas?

Mr. Thomas (Maisonneuve): Yes.

Mr. Rock: Is all the employment included in the DBS report since you are now tabling the whole DBS report?

Mr. Basford: No, production and related workers are shown here.

• 1155

Mr. Émard: Does DBS have a breakdown of employees?

The Chairman: Just one minute; the Minister will answer.

An hon. Member: What are we waiting for?

The Chairman: We are waiting for the Minister to give his answer to Mr. Rock.

Mr. Basford: I will ask Mr. Davidson to explain the table or to analyse it.

Mr. Rock: Well, if you table it...

Mr. Basford: Yes, I have tabled it, but you wanted some explanation of it, I believe.

Mr. R. M. Davidson (Director, Merger and Monopoly Division, Combines Investigation Branch, Department of Consumer & Corporate Affairs): Mr. Chairman, the Dominion Bureau of Statistics report on this industry at page 9 gives the employment and payroll in the drug industry, broken down by production and related workers, administrative and office workers, sales and distribution.

[Interprétation]

Voilà pourquoi je proposais hier qu'avant d'adopter cette mesure, il fallait demander à visiter ces fabriques à Montréal pour voir ce qui s'y passe, avant de prendre un décision sérieuse à ce sujet. Si on n'a jamais visité ces usines de médicaments, comment peut-on prendre une décision? Comment en conscience peut-on agir si on n'a pas, si on ne connaît pas le fonctionnement de ces sociétés?

M. Basford: Pour ce projet de loi, la recommandation de la commission Harley a été faite après visite par cette commission de presque toutes les usines.

M. Rock: Il s'agit d'un rapport de l'ACFP présenté à la commission Castonguay du Québec.

Le président: Cela répond-il à votre question, monsieur Thomas?

M. Thomas (Maisonneuve): Oui.

M. Rock: Le rapport du BFS porte-t-il sur tout l'emploi?

M. Basford: Non, il s'agit de la production et des travailleurs de cette branche.

M. Émard: Le BFS donne-t-il la répartition par catégories d'employés?

Le président: Un instant. Le ministre va répondre.

Une voix: Qu'attendons-nous?

Le président: La réponse du ministre.

M. Basford: Je demanderais à monsieur Davidson d'expliquer ce tableau.

M. Rock: Ma foi, si vous le déposez.

M. Basford: Oui, mais vous désiriez certaines explications.

M. Davidson (directeur, Division des fusions et monopoles, service des enquêtes sur les coalitions, ministère de la Consommation et des Corporations): Monsieur le président, le Bureau de la statistique fait rapport sur cette industrie, à la page 9, et parle des salaires dans l'industrie des médicaments et le détail est établi selon la production, les travailleurs de la production, des bureaux des ventes et de la distribution.

[Text]

The figures the Minister quoted for the various provinces were for production and related workers. However, the total figure he gave was the total of production and related workers, administrative and office, and sales and distribution. Now, the reason for not allocating the sales and distribution, and administrative and office workers, or distributing them by provinces is that many of them do not work in a particular province. There are detail men, and so on, who are operating right across Canada, so the total figures quoted by the Minister for all of Canada include all workers: production and related workers, administrative and office workers, and sales and distribution. The figures he quoted for provinces include only the production and related workers.

Mr. Saltzman: Mr. Chairman, I wonder whether I could ask Mr. Rock a question since he has some figures there? Are there figures in the book you have on this professional group that would indicate how many of them are involved in research against how many of the professional group are involved in sales, or is this professional group largely their sales force, their trained pharmacists?

Mr. Rock: I believe that the professional force, if you want to call it a force, mostly is in the laboratories.

Mr. Saltzman: Do you have figures on that?

Mr. Rock: No. If you want to read this, go through it and study it . . .

Mr. Saltzman: But you do not have any figures at hand to indicate the extent to which the professionals are engaged in research as against the extent to which they are engaged in selling the product—in other words, high-priced salesmen?

• 1200

Mr. Rock: I do not have that. I must say that every time I have visited any of these plants, the people who were in the laboratories were all graduates as far as I know. If you ever have the opportunity to visit a plant, you will find out that practically 50 per cent of the buildings are laboratories because of the tests and so on that have to be made for all the production. That is why I suggest you ought to do that. While I am on my feet, Mr. Chairman, I was not on the Harley Committee and I do not know whether any members here were, so I could not say whether they did visit the plants or not. I do not know whether anyone here who was on

[Interpretation]

Et les chiffres que le ministre a cités pour les diverses provinces étaient des chiffres pour la production et les travailleurs qui y sont rattachés. Il s'agissait du total de la productivité, des travailleurs de la production, du personnel de soutien, de distribution et de vente. S'il n'a pas, en fait, compris les travailleurs de la distribution et du personnel par province c'est que, nombre d'entre eux, ne travaillent pas dans telle ou telle province en particulier. Il s'agit de personnes qui sont détachées, qui voyagent à travers le Canada. Donc les chiffres que le ministre a cités, pour le total, comprennent, pour tout le Canada, tous les travailleurs de la production dans le domaine de l'administration, de la distribution et des ventes. Les chiffres qu'il a cités pour les provinces, ne concernent que la production et autres domaines connexes.

M. Saltzman: Puisque M. Rock a les chiffres, j'aimerais poser une question. Comment les groupes professionnels sont-ils répartis dans le rapport qu'il a en main? Combien y a-t-il de chercheurs et de travailleurs professionnels dans le domaine de la pharmacie?

M. Rock: Je crois que les spécialistes sont surtout dans les laboratoires.

M. Saltzman: Avez-vous des chiffres à ce sujet?

M. Rock: Non. Si vous voulez le lire, vous pouvez le faire et l'étudier . . .

M. Saltzman: Mais parmi ces spécialistes, combien y en a-t-il dans les recherches et dans la vente?

M. Rock: Je ne sais pas. Je dois dire, que, quand je me suis rendu dans ces fabriques, ceux qui travaillaient dans les laboratoires étaient tous des diplômés de l'université. Si vous visitez une usine, vous verrez qu'au moins 50 p. 100 des locaux sont constitués de laboratoires en raison des essais de production. Voilà pourquoi je prétends qu'il faudrait faire des visites. Je n'étais pas membre du comité, et je ne sais pas ce que l'on a fait. Avez-vous fait partie de la commission Harley, à l'époque, docteur Haidasz?

[Texte]

that Committee can explain whether the Harley Committee did visit plants. Dr. Haidasz, were you on that Committee at the time?

The Chairman: Mr. Rock, for your information some of the members of the Committee have visited the pharmaceutical industry and some plants also.

Mr. Rock: It was not the whole committee, then.

The Chairman: I do not recall it was the whole committee. But everyone was invited to visit the factory.

Mr. Rynard: Mr. Chairman, in what year were those visits made?

The Chairman: They were made on an individual basis.

Mr. Rynard: I want to know what year, how long ago. I want to get the sequence of time.

The Chairman: In 1966-1967.

Mr. Rynard: There were visits made in 1966 and 1967 to drug plants?

The Chairman: On an individual basis.

Mr. Rynard: Not by the Committee as a whole so that they could see what was going on?

The Chairman: Not that I recall.

Mr. Rynard: Not that you recall. When was the last visit made, or was there any visit made by this Committee as set up—the Harley Committee?

The Chairman: This was set up before 1965, before the election, if I recall. I was on the Committee at the time.

Mr. Rynard: I do not want to press you for that information today, but I would ask, if you would, that you look it up and let us know at the next meeting who was on that committee, when those plants were visited and if it was the Harley Committee. I would appreciate your answering those three questions because there are a lot of new members here.

The Chairman: But you were on the Committee.

Mr. Rynard: That is right, but I am not quoting. I want you to look it up.

The Chairman: We will look up the records.

[Interprétation]

Le président: Pour votre information, monsieur Rock, certains membres du Comité ont fait ces visites.

M. Rock: Il ne s'agissait pas de tout le Comité?

Le président: Non, je ne me souviens pas si tout le Comité s'était rendu. Mais tout le monde a été invité.

M. Rynard: Quand ces visites ont-elles été faites?

Le président: Il s'agissait de visites individuelles.

M. Rynard: En quelle année? Il y a combien de temps que cela a été fait?

Le président: En 1966-1967.

M. Rynard: Des visites ont été faites, en 1966 et 1967, chez certains fabricants de produits pharmaceutiques?

Le président: Sur une base individuelle.

M. Rynard: Pas par le Comité afin que les membres puissent voir ce qui s'y passait?

Le président: Non, non. Pas que je me souviennne.

M. Rynard: Quand a eu lieu la dernière visite du Comité, s'il en a effectué une?

Le président: Ce comité a été créé avant 1965, si je me souviens bien. J'étais membre du Comité à l'époque.

M. Rynard: Je voudrais savoir, même si ce n'est pas aujourd'hui, qui était membre du comité, quand les usines ont-elles été visitées, et s'il s'agissait du Comité Harley. J'aimerais que vous puissiez répondre à ces questions car il y a beaucoup de nouveaux membres qui siègent ici.

Le président: Pourtant, vous étiez membre du comité.

M. Rynard: C'est exact, mais je voudrais que vous vérifiez ces renseignements.

Le président: Nous irons consulter le compte rendu.

[Text]

Mr. Rynard: Thank you very much.

Mr. Rock: Mr. Chairman, if you will permit me, at first we have the impression here that the Harley Committee as a whole visited the pharmaceutical plants. Now it seems that just some members individually went on their own and visited them, and we do not now have the same impression as we had before. I find that this is kind of odd. How could a report be made if the members themselves have not even gone out of here to visit these plants, if this is so? You members here may take the same decision not to visit the plants, not see them and also make a decision such as this.

Mr. Basford: In so far, Mr. Rock, as you are putting the question to me, I was not on the Harley Committee.

Mr. Rock: No, no reflection on you, Mr. Minister.

Mr. Basford: All right. I am a witness. In so far as that is a question to me, you ask how could the Harley Committee come to a recommendation without doing this. I was not a member of the Harley Committee and I am not in any position to speak for it, but I would remind you, Mr. Rock, that the witnesses before the Harley Committee included such people as the Canadian Pharmaceutical Association, the Pharmaceutical Manufacturers' Association of Canada, the Canadian Medical Association, the Canadian Drug Manufacturers' Association, Cyanamid of Canada Limited, Hoffmann-La Roche Limited, Ayerst, McKenna and Harrison Limited, Smith, Kline and French (Montreal) Limited, Charles E. Frosst and Company, Parke, Davis and Company Limited, Empire Laboratories Limited, plus others. That is only a partial list of the witnesses.

To reflect on the Harley Committee as not having gone into the question—that really was your reflection. I was not a member of the Committee. The members who were can speak for themselves. But I would like to point out that it is certainly my position that the Harley Committee looked at this whole issue very, very thoroughly following, of course, thorough examinations by the Restrictive Trade Practices Commission and the Hall Commission report which certainly, according to the records of the Hall Commission report, did look at manufacturing facilities. And all of them came forward with somewhat the same recommendations.

The Chairman: Mr. Saltzman.

Mr. Saltzman: Mr. Chairman, while appreciating that it would be very nice to

[Interpretation]

Mr. Rynard: Merci beaucoup.

M. Rock: Nous croyions, au début, que le Comité Harley avait visité certaines entreprises fabriquant des produits pharmaceutiques, mais il semble maintenant qu'il s'agit de certains membres qui y sont allés à titre individuel. Comment a-t-il été possible de préparer un rapport si les membres du Comité ne sont pas sortis d'ici pour visiter ces entreprises, si tel est, évidemment le cas? Ceux qui sont ici présents peuvent décider, également, de ne pas se rendre visiter ces entreprises et de prendre une décision comme celle-ci.

M. Basford: Je vous dirai, si c'est une question que vous m'adressez, que je n'étais pas membre du comité Harley.

M. Rock: Je ne parle pas de vous, monsieur le ministre.

M. Basford: Est-ce que vous demandez comment le Comité pouvait présenter une telle recommandation sans avoir effectué de visites? Je n'étais pas membre du Comité et je ne suis pas en mesure de parler en son nom. Mais je vous rappelle, monsieur Rock, que parmi les témoins qui se sont présentés devant le Comité, se trouvaient l'Association des pharmaciens du Canada, l'Association des manufacturiers de produits pharmaceutiques du Canada, l'Association médicale canadienne, l'Association canadienne des fabricants de produits pharmaceutiques, Cyanamid of Canada, Hoffman-La Roche, Ayerst, McKenna and Harrison, Smith, Kline and French (Montréal) Ltd, Charles E. Frosst and Company, Parke Davis Co., Empire Laboratories Ltd, et plusieurs autres.

Prétendre que le comité Harley ne s'est pas occupé de cette question, c'est tout simplement ce que vous venez de faire. Je n'étais pas membre du comité. Ceux qui l'étaient peuvent parler pour eux-mêmes. Mais j'aimerais faire remarquer que d'après moi, le Comité a scruté à fond ce sujet. Et ceci, après l'étude faite par la Commission sur les pratiques restrictives dans le commerce et celle de la Commission Hall qui, s'il faut en croire son rapport, s'est penchée sur les installations de ces entreprises. Et tous en sont arrivés à peu près aux mêmes recommandations.

Le président: Monsieur Saltzman?

M. Saltzman: Ce serait certainement agréable de visiter certaines de ces installations.

[Texte]

visit some of these plants, I would like to point out to Mr. Rock that as desirable as it might be from, let us say, an interest point of view, I do not really see how it is relevant to the kind of work that Parliament does. After all we do not sit here and base our decisions on complete lack of knowledge.

• 1205

There have been all kinds of committees set up and I think if you get anything done at all in Parliament you have to appreciate the on-going work that is taking place. You have to know that people before you have done research, have done work, have reached conclusions which you examine and which you analyze. Let me say, Mr. Chairman, that it is impossible to visit all the things upon which you legislate. I myself as one example have just finished sitting on a committee that dealt with the Kennedy Round negotiations. How was it possible for us to visit every one of those industries that is involved? We are discussing the International Monetary Fund, the Bretton Woods Agreements Act. How is it possible for us to visit every one of the countries involved to talk to all the central bankers of the world?

When we debated the Bank Act we could not possibly visit every financial institution in Canada to see how it operated.

When we talk about the Criminal Code, on the basis of Mr. Rock's suggestion we should visit every prison. We should visit every social welfare agency in the country.

Mr. Rock: Please do not put words in my mouth.

The Chairman: Gentlemen, please. Mr. Rock, have you a point of order to make?

Mr. Rock: Yes, I have.

Mr. Saltsman: Excuse me, Mr. Rock. I still have the floor. What I am suggesting, Mr. Chairman, is that the time has come for this Committee to reach some kind of conclusion. This debate has been going on now for about eight years. Committee after committee has investigated this matter. Very competent Parliamentarians, those who are sitting here today and those who have gone before us have looked into this matter. I do not see what more evidence could possibly be accumulated that we do not have now. There comes a time when a decision has to be reached and I would suggest respectfully, Mr. Chairman, that that time has now arrived.

Mr. Rock: Since he was able to make such a statement I would like to have a chance to make a short rebuttal. First of all I am only touching on one part, that is the part I feel

[Interprétation]

J'aimerais faire remarquer à M. Rock que même si ce devait être intéressant, personnellement, je me demande si ce serait vraiment utile au travail que fait le Parlement. Nous ne nous apprêtons quand même pas à prendre des décisions en ignorant tout de la question.

Il y a un grand nombre de comités qui ont été établis et si vous voulez réaliser quoi que ce soit, au Parlement, vous devez vous rendre compte que le travail qui se fait ici même n'est pas à négliger. D'autres personnes ont effectué des recherches et ont tiré des conclusions que vous pouvez ensuite examiner et analyser. Quant à moi, je trouve qu'il serait impossible d'effectuer des visites dans tous ces domaines sur lesquels nous sommes appelés à nous prononcer. Je viens de siéger sur un comité qui parlait du Kennedy Round. Me serait-il possible de visiter toutes les industries dont on a parlé? Nous avons parlé du Fonds monétaire international, des accords de Bretton Woods. Est-ce qu'il est possible de visiter tous pays en cause afin de nous entretenir avec les grands banquiers du monde.

Lorsque nous avons parlé de lois sur les banques, nous ne pouvions pas évidemment visiter toutes les institutions financières du Canada pour voir comment elles fonctionnent. Lorsque nous avons parlé du Code criminel, il nous aurait fallu, selon la suggestion de M. Rock, visiter toutes les prisons et toutes les agences de service social du pays.

M. Rock: Veuillez, s'il vous plaît, ne pas me faire dire des choses que je n'ai pas dites.

Le président: A l'ordre. Vous avez un point d'ordre à soulever, monsieur Rock?

M. Rock: Oui.

M. Saltsman: Excusez-moi, monsieur Rock, mais j'ai encore la parole. Ce que je veux dire, monsieur le président, c'est que l'heure est venue pour le Comité d'en arriver à une conclusion. Le débat se déroule maintenant depuis 8 ans. Divers comités ont enquêté sur la question. Il y a eu des gens très compétents, comme ceux qui nous ont précédés et ceux qui sont ici aujourd'hui, qui ont étudié le problème. Je me demande ce que nous attendons de plus comme témoignages. Nous avons tout ce qu'il nous faut. Il faut en arriver à une décision. Et je vous suggère respectueusement, messieurs et monsieur le président, qu'il serait temps de passer aux actes.

M. Rock: J'aimerais pouvoir préciser ma pensée. D'abord: je ne désire toucher qu'un aspect de la question, et l'aspect économique. Le Comité Harley n'a pas touché cet aspect et

[Text]

will do harm economically. This part was not touched by the Harley Committee or any of the other committees. This is the part that I want to discuss and this is why I want you to visit. Here you will know that they do employ...

The Chairman: Order. Order, Mr. Rock, order. Let us not take this time now for personal debates or arguments. I know that this question has been before a special committee for many years and I know also that you were not on the committee, Mr. Rock, and that you were probably visiting plants. I agree with this, but while you were visiting, this subject was being studied thoroughly. We are here to study Bill C-102 clause by clause. Let us not always come back and refer to the past. This thing has been done and we have to achieve something. We have been engaged in vain discussion this morning and we want to proceed. Most members here wish to proceed with this matter. Let us not waste the time of ministers, officials, members of the House of Commons. Let us stick to the matter at hand.

Mr. Rock: In other words the members...

The Chairman: I do not want to visit. Have you any questions? Never mind a visit.

Mr. Rynard: Mr. Chairman, I believe you stated that you would look into this situation.

The Chairman: I will, sir.

Mr. Rynard: I think this should be left in abeyance until you bring back your report at the next meeting.

The Chairman: We will bring back a full report on the visit of the Committee. Mr. Émard?

Mr. Émard: Mr. Chairman, there is a question I would like to ask Mr. Davidson, but prior to that I would like to say that I could bring just as many arguments against what Mr. Saltsman has said with regard to visits. All he has to do is to see what the Defence Committee has been doing and what the Transport Committee has been doing. But I am going to stop this subject for the moment.

What I would like to know is, according to the figures that were supplied to us this morning, I wonder if Mr. Davidson would allocate all the employees in the pharmaceutical industry who work in Ontario, all the employees who work in Quebec, and then tell us the number of employees who cannot be allocated to any particular province.

[Interpretation]

c'est le problème auquel je voudrais m'attaquer. C'est ce dont je voudrais parler. C'est pourquoi je vous invite à aller visiter...

Le président: A l'ordre. N'en profitons pas pour régler des querelles personnelles. Je sais que cette question a été portée devant un comité spécial et qu'elle y est depuis des années. Et je sais aussi que vous n'étiez pas membre du comité, monsieur Rock, et que vous étiez probablement en train de visiter des fabriques et des manufactures. C'était bien. Mais pendant que vous visitiez, nous, nous avons étudié à fond la question. Nous sommes ici pour étudier le bill C-102, article par article. Ne revenons pas en arrière. Nous avons à passer aux actes. Nous perdons notre temps en efforts inutiles. La plupart des membres ici veulent étudier la question. Ne gaspillons pas le temps des ministres, des hauts-fonctionnaires et les députés. Arrivons-en aux faits.

M. Rock: Autrement dit, les membres...

Le président: Je ne désire pas effectuer de visites. Vous avez une question à poser?

M. Rynard: Je crois, monsieur le président, que vous avez déclaré que vous étudieriez la question.

Le président: Je le ferai, monsieur.

M. Rynard: Pourquoi ne pas laisser le tout de côté jusqu'à ce que vous nous soumettiez votre rapport, à la prochaine séance?

Le président: Nous soumettrons un rapport complet sur la visite du Comité.

M. Émard: Monsieur le président, j'aimerais poser une question à M. Davidson. Auparavant, j'aimerais vous dire que je pourrais vous apporter autant d'arguments qu'en a apportés M. Saltsman mais à l'encontre de sa thèse. Il n'a qu'à regarder ce qui s'est fait au comité de la Défense et au comité des Transports. J'aimerais savoir, selon les chiffres qui nous ont été fournis ce matin, si M. Davidson peut nous dire combien d'employés de l'industrie pharmaceutique travaillent en Ontario, combien travaillent au Québec et quel est le nombre de ceux qui ne peuvent être rattachés à une province en particulier.

[Texte]

Mr. Davidson: I am afraid, sir, that the table does not indicate where the Sales and Distribution employees, for example, work. It simply indicates that they work for companies that have their manufacturing establishments in the province of Quebec or the province of Ontario, but it does not indicate where they do in fact work.

Mr. Émard: What is the number of those sales employees—referring to this 11,967?

Mr. Davidson: The total in Sales and Distribution is 2,850. The administrative and office workers total 2,841.

Mr. Émard: I am sure these could be allocated to either Quebec or Ontario.

Mr. Davidson: That may be so; that may be so. Perhaps it would be proper to allocate those to the particular province.

Mr. Émard: What about employees in research laboratories?

Mr. Davidson: They are already included in one or other of the two categories, production and related workers and administrative and office workers. The definition here may indicate in which of these they are included. At a quick glance, there is no reference that I can see to research workers, but "Production and Related Workers" includes, in addition to those engaged in production and assembling activities, employees in storing, inspecting, handling, packing and warehousing.

Mr. Émard: It was mentioned, sir, at previous meetings that approximately 2,550 university graduates are working in the industry. I know many of them may be in sales departments, but I am sure there are also quite a few working in research labs. Are you aware of how many are working in such research labs?

Mr. Basford: Mr. Emard, according to the PMAC brief to the Harley Report there were some 10,000 people employed in the industry, about 25 per cent of whom were university graduates.

That figure of 10,000 is open to correction, because as I have indicated this morning it has gone up to 11,000. They estimated that about one-quarter of their people were university graduates.

[Interprétation]

M. Davidson: Je crains, monsieur, que les tableaux ne précisent pas où travaillent, par exemple, les employés du service des ventes. Ils indiquent qu'ils travaillent pour des entreprises dont les usines sont situées au Québec ou en Ontario, mais sans préciser dans quelle province ils travaillent effectivement.

M. Émard: Quel est le nombre d'employés attachés aux services des ventes par rapport à ce chiffre de 11,967?

M. Davidson: Le nombre total des employés des ventes et de la distribution est de 2,850 employés. Pour ce qui est des services administratifs et des employés de bureau, leur nombre est de 2,841.

M. Émard: Il serait sans doute possible, dans cette dernière catégorie, de dire qui travaille au Québec ou en Ontario.

M. Davidson: Il est fort possible qu'il en soit ainsi. Il serait peut-être bon de répartir ces gens par provinces.

M. Émard: Combien y a-t-il d'employés dans les laboratoires de recherches?

M. Davidson: Ils sont déjà inclus dans l'une ou l'autre des deux catégories, production et travailleurs connexes, ou personnel de bureau et d'administration. Il y a ici une définition qui pourrait indiquer dans quelle catégorie ils sont inclus. Au premier coup d'œil, je ne peux voir aucune mention de chercheurs, mais la catégorie «production et travailleurs connexes» comprend, en plus de ceux qui travaillent à la production et à l'assemblage, les employés qui s'occupent de l'emmagasinage de l'inspection, de la manutention, de l'emballage et de l'entreposage.

M. Émard: On a mentionné, monsieur, à des réunions précédentes, qu'environ 2,550 diplômés d'universités travaillent dans l'industrie. Je sais qu'un grand nombre d'entre eux travaillent peut-être dans la section des ventes, mais je suis certain qu'il y en a aussi pas mal qui travaillent dans les laboratoires de recherches. Pourriez-vous nous donner le nombre des gens qui travaillent dans les laboratoires de recherches?

M. Basford: Monsieur Émard, selon le mémoire présenté par l'ACFP au Comité Harley, il y avait environ 10,000 personnes employées dans l'industrie, dont 25 p. 100 étaient des diplômés d'universités. Ce chiffre de 10,000 est sujet à correction, car, je l'ai dit ce matin, il est maintenant de 11,000. L'Association estimait qu'environ un quart des employés étaient des diplômés d'universités.

[Text]

Mr. Emard: My reason for wanting to know the exact allocation of employees is that I am quite sure that if you refer to the amount of investment and sales in the Province of Quebec and the Province of Ontario you will find that it is about three times more in the Province of Quebec. Yet from the figures supplied to us here this morning I get the impression that the pharmaceutical industry is much more important in the Province of Ontario than it is in Quebec. This what I just cannot understand.

Mr. Basford: There are indications from DBS that for manufacturers, production workers and related workers those are the figures. I am not in a position, Mr. Emard, to argue with DBS.

Mr. Emard: Neither am I, but I would like to obtain additional information so that I could get my figures straight, too.

Mr. Basford: There is, of course, the other point that even if you had the figures you want our analysis of the effects of this bill is totally and diametrically opposed to, and different from your analysis.

• 1215

You and Mr. Rock are arguing, as I understand it that this bill is going to create widespread unemployment in the Province of Quebec. There is no foundation for that analysis.

Mr. Emard: I agree, sir, that these are fears on my part. I have no indication of what is going to happen really. However, on the other hand, neither have you, and I feel it is your responsibility—the responsibility of your department—to supply us with these figures at least to put us at our ease, and to show that what we claim is not so because of definite facts—not just because of what you think and what I think.

Mr. Basford: I thought I put that analysis on the record on Tuesday, that we did not see this bill causing widespread unemployment in this case. We thought, for many reasons, that the Canadian industry was such that it could absorb the effects of this bill. I would be happy to give them to you again, if you so wish.

This issue was also but squarely before the Harley Committee by many people particularly in a statement—and you question that it was before the Harley Committee—made by

[Interpretation]

M. Émard: La raison pour laquelle j'aimerais connaître la répartition exacte des employés, c'est que je suis bien certain que si vous comparez le montant des placements et des ventes dans la province de Québec et dans celle de l'Ontario, vous verrez qu'il est environ trois fois plus élevé dans la province de Québec. Pourtant, d'après les chiffres qui nous ont été fournis, ici, ce matin j'ai l'impression que l'industrie pharmaceutique est beaucoup plus importante en Ontario qu'elle ne l'est au Québec. C'est ce que je n'arrive pas à comprendre.

M. Basford: Le Bureau fédéral de la statistique nous fournit ces chiffres en ce qui concerne les fabricants, ainsi que les employés de la production et travailleurs connexes. Ce n'est pas à moi, monsieur Émard, à contester les indications données par le BFS.

M. Émard: Ni à moi; mais j'aimerais avoir des renseignements supplémentaires pour être certain, moi aussi, des chiffres exacts.

M. Basford: Il est évident, bien entendu, que, même si vous aviez les chiffres que vous désirez, notre analyse des répercussions du présent Bill est totalement différente, et diamétriquement opposée, à la vôtre. Vous et monsieur Rock soutenez, si je comprends bien, que le présent Bill créera un grand nombre de chômeurs au Québec. Il n'y a aucun fondement à cela.

M. Émard: Je reconnais, monsieur, que ce sont des craintes que j'exprime là. Je n'ai aucune indication de ce qui va se passer, réellement. Mais, d'autre part, vous n'en avez pas non plus, et j'estime qu'il est de votre devoir, et de celui de votre ministère, de nous fournir ces chiffres, ne serait-ce que pour nous mettre à l'aise, et de nous prouver que ce que nous prétendons est faux d'après des faits précis, et non simplement parce que vous pensez qu'il en est ainsi.

M. Basford: Je croyais avoir analysé la situation pour vous mardi dernier et avoir montré que nous n'estimions pas que ce Bill pourrait causer beaucoup de chômage dans ce cas. Nous considérons, pour bien des raisons, que l'industrie canadienne des produits pharmaceutiques était en mesure d'absorber le contrecoup de ce Bill. Si vous le voulez, je pourrais vous répéter ces raisons.

Cette question a aussi été soulevée devant le Comité Harley par bien des gens, en particulier dans une déclaration—et vous prétendez que ce n'était pas devant le Comité Har-

[Texte]

the Director of Investigation and Research under the Combines Investigation, who directed himself and the Committee to this issue. The Harley Committee, having the issue before them, recommended in favour of this bill.

My own view would be Mr. Émard, that the industry, particularly that portion of it located in Quebec, is able to absorb the effects of this bill and to react to it without causing widespread unemployment.

My other reaction relative to the Province of Quebec is that, as I understand the problem, there are at the moment a great many elderly people in the Province of Quebec. In spite of the fact that it is "la Belle Province" people still get sick in the Province of Quebec; and levels of income are lower there than in many other parts of Canada. It is those people, surely, more than anywhere else in Canada, who need the beneficial effects of this bill; who need some assistance in the price of drugs; and who need a lowering of the price of prescription drugs. If there is any area in Canada where the effects of this bill are most needed it is in the Province of Quebec.

Mr. Émard: Mr. Basford, I entirely agree with you, and do not think that I am against decreasing the price of drugs. I know that the prices of drugs are much too high. I do not think anyone will contest that fact.

However, instead of arguments on your part and arguments on our part I would like to get a definite economic projection to adduce facts.

You are always relating to the Harley Report. I wish to quote from the Harley Report an extract which I have already quoted in the House. I will read it in French because it was in French in the House:

Il faudrait maintenir l'équilibre approprié entre l'industrie et le consommateur, et tenir compte de l'importance, non seulement de continuer, mais de continuer et d'accroître la recherche scientifique au Canada.

Je ne demande qu'à être convaincu, monsieur le ministre, mais parmi les mesures préconisées par ce bill, il y en a une en particulier à laquelle je m'oppose et c'est celle qui a trait à l'importation de toutes sortes de drogues; je crois que cette mesure aura des effets néfastes sur l'industrie et les travailleurs de l'industrie. C'est de cela que j'ai peur. Quant aux autres mesures, je n'y ai pas tellement d'objections.

[Interprétation]

ley—faite par le directeur des enquêtes et des recherches de l'enquête sur les coalitions, qui s'était penché lui-même sur cette question et l'avait présentée au Comité. Le Comité Harley avait étudié la question et avait recommandé l'adoption du présent Bill.

Mon opinion personnelle, monsieur Émard, c'est que l'industrie, particulièrement au Québec, est en mesure d'absorber le contrecoup du présent Bill et d'y réagir sans que cela crée un grand nombre de chômeurs.

D'autre part, en ce qui concerne le Québec, si je comprends bien le problème, il y a actuellement là-bas un très grand nombre de gens âgés. Cela a beau être «la belle province», on y tombe tout de même malade; et les salaires sont plus bas au Québec que dans bien d'autres parties du Canada. Ce sont ces gens-là, assurément, qui ont, plus que quiconque au Canada, besoin des bienfaits de ce Bill. C'est eux qui ont le plus besoin qu'on les aide à payer leurs médicaments, et que l'on abaisse le prix des médicaments sur ordonnance. S'il est une région au Canada où l'on a grand besoin des bienfaits du présent Bill, c'est bien dans la province du Québec?

M. Émard: Monsieur Basford, je suis entièrement d'accord avec vous; et n'allez pas penser que je suis contre une baisse du prix des médicaments. Je sais que le prix des médicaments est beaucoup trop élevé, et je ne pense pas que quiconque soutiendra le contraire.

Toutefois, au lieu d'avoir vos raisons et nos raisons, j'aimerais avoir une projection économique précise à l'appui des divers arguments.

Vous mentionnez sans cesse le rapport du comité Harley. J'aimerais citer un extrait du rapport Harley que j'ai déjà cité à la Chambre. Je vais le lire en français, car je l'avais cité en français à la Chambre.

We should maintain a proper balance between industry and the consumer and take into account the importance of continuing and increasing not merely continuing, but continuing and increasing scientific research in Canada.

I wish nothing more than to be convinced, Mr. Minister, but among the measures proposed in this Bill, there is one in particular to which I object, the one that deals with the importing of all sorts of drugs. I think this measure will be harmful to the industry and to the workers in this industry. This is what I am afraid of. I do not have any serious objections regarding the other measures.

[Text]

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Si vous pouviez, au moyen d'une projection économique ou par des témoignages de spécialistes, nous faire voir exactement quels seront les effets, bons ou mauvais, du bill, alors dans ce cas-là, je l'appuierais entièrement.

Le président: Voulez-vous poser une question au ministre, vous venez de faire un discours. Alors, posez une question pour qu'on puisse vous répondre.

M. Émard: Monsieur le président, je n'aime pas les remarques que vous faites, je pense que je m'en tiens à la décision. Vous connaissez mon tempérament. Alors, je vous prierais de ne pas commencer à discuter, parce que je pourrais dire des choses que vous n'aimeriez pas.

Le président: Maîtrisez votre tempérament et posez votre question monsieur Émard.

M. Émard: Monsieur le ministre, c'est justement la raison pour laquelle je voudrais avoir une projection économique, pas des arguments, je comprends que vous en avez de bons. Mais ceux qui sont avancés de part et d'autre, doivent être prouvés. Votre ministère peut-il, avec le concours des spécialistes à votre service, nous donner une projection économique de ce qui se produira dans ce domaine?

Mr. Basford: As I explained on Tuesday, Mr. Émard, it is impossible to make a precise economic projection that in the year 1970 there will be so many people employed and so many salesmen employed and so many production workers and so many scientists. It is impossible to do that it is impossible to do that for any industry, not only the drug industry, in any precise terms. We do not know what private decisions the boards of directors of the large pharmaceuticals will make or how they will react to this bill. We do not know precisely what the smaller Canadian companies are going to do.

We can only analyse the industry, which we have done and which the Harley Committee did, and we feel that the effect of this is not the widespread unemployment that you suggest. The major pharmaceutical manufacturers in Montreal, which I think you are concerned about, show, as the Harley Committee pointed out, a profit about double that of normal manufacturing industries. Also, they have very high promotional expenses and deliberately operate that way. We feel that with their large measure of profit and the large amount of money they spend on promotion, they have a very comfortable cushion

[Interpretation]

If you could, through an economic projection, or by expertise, show us clearly what would be the consequences, good or bad, of your bill, then I would support the bill wholeheartedly.

The Chairman: Will you please ask the Minister a question; you were making a speech. Would you ask him a question so he can answer you.

Mr. Émard: Mr. Chairman, I do not like your remarks. I think I shall stick by my guns. You know my character, and I would ask you not to start arguing because I might say things that you would not like.

The Chairman: Keep your temper and put your question, Mr. Émard.

Mr. Émard: Mr. Basford, this is exactly the reason why I would like to have an economic projection rather than arguments; I know that you have good arguments. But the arguments which are given on one side or the other must be proved. Can your Department, with the cooperation of the experts you have in your Department, give us an economic projection of what will happen in this field?

M. Basford: J'ai dit mardi, monsieur Émard, qu'il était impossible de faire des extrapolations économiques précises et dire qu'en 1970, il y aura tant de personnes employées, tant de vendeurs, d'employés de la production, d'hommes de science, etc. Il est impossible de le faire quelle que soit l'industrie en cause, pas seulement pour l'industrie des médicaments mais pour toutes les industries. Nous ne savons pas quelles décisions les conseils d'administration des grandes entreprises pharmaceutiques prendront, quelle sera leur réaction à ce bill. Nous ne savons pas exactement ce que les petites sociétés canadiennes feront.

Nous pouvons seulement analyser l'industrie comme nous l'avons fait, ainsi que le comité Harley, et il semble que les incidences de ce bill ne seront pas terribles pour l'emploi. Les grandes entreprises de fabrication de médicaments au Canada dont vous parliez, sont plus précisément, celles de Montréal. Le comité Harley a fait remarquer que leurs bénéfices sont le double des bénéfices normaux des industries manufacturières. Elles font délibérément beaucoup de dépenses en publicité. Nous croyons qu'avec leurs bénéfices élevés et les fortes dépenses à des fins de publicité, elles disposent d'une marge qui leur

[Texte]

with which to meet opposition created by other Canadian manufacturers and any possible imports. Whether they reduce their prices to meet that competition is of course up to their boards of directors and up to their shareholders located in Switzerland, France, Germany and the United States. We would hope and would expect them to reduce their prices and to maintain the manufacturing facilities they have in Canada.

I think also you should realize, and I pointed this out on Tuesday, that the companies that you are concerned about import 85 per cent of their fine chemical into Canada.

Mr. Émard: Sir, may I say something?

Mr. Basford: Yes.

Mr. Emard: The reason that they import 80 or 85 per cent is simply because we have no basic drug industry in Canada. We had one at one time, the Merck Company in Valleyfield. This company was situated right next to my county and it was doing very well producing these basic materials. Unfortunately, however, this company had to go out of business. They had a beautiful plant there but, two years ago, this beautiful plant was sold for scrap. They just could not operate because of the low priced imports coming in.

Mr. Basford: May I point out that other plants have opened. I do not want to go into the financial affairs of Merck Company.

I was pointing out that the companies you are talking about import 85 per cent of their fine chemical.

Mr. Emard: Where could they get it, sir, in Canada?

Mr. Basford: They import from outside Canada.

Mr. Emard: But where could they get it in Canada?

• 1225

Mr. Basford: If I might make my point Mr. Emard, they import 85 per cent of their fine chemical from outside Canada and their business in Canada is largely processing that fine chemical imported from abroad into dosage form and marketing it in Canada.

This is an industry that does not depend on the economies of scale. A small operation can make fine chemical into dosage form. This is why many small firms exist in Canada. In our

[Interprétation]

permettra de faire face à la concurrence des autres fabricants du Canada et des importations éventuelles. La décision de réduire leurs prix pour faire face à la concurrence, appartient à leur conseil d'administration et aux actionnaires qui se trouvent en Suisse, en France, en Allemagne, aux États-Unis. J'espère et je compte qu'ils réajusteront leurs prix et continueront de fabriquer au Canada.

Il faut se rendre compte, et je l'ai fait remarquer mardi, que les sociétés dont le sort vous inquiète, importent 85 p. 100 des ingrédients qui servent à fabriquer les médicaments.

Mr. Émard: Un moment, s'il vous plaît.

M. Basford: Oui.

M. Émard: La raison pour laquelle ils importent 80 ou 85 p. 100 est très simple; c'est que nous n'avons pas d'industrie de base de médicaments au Canada. Il y a un certain nombre d'années, il y avait la société Merck à Valleyfield, tout près de ma circonscription, qui produisait les ingrédients de base de drogues. Mais elle a abandonné les affaires. Elle avait une très belle usine, et il y a deux ans, si vous voulez savoir, elle a vendu cette usine pour pratiquement rien. Elle ne pouvait pas concurrencer avec le prix inférieur des importations.

M. Basford: Je ferai remarquer que d'autres usines se sont ouvertes ailleurs. Je ne voudrais pas aller dans les détails financiers de l'affaire Merck. Je faisais simplement remarquer que les sociétés dont vous parlez importent 85 p. 100 de leurs produits chimiques de base.

M. Émard: Où pourraient-elles les obtenir? Au Canada?

M. Basford: Elles les importent de pays étrangers.

M. Émard: Mais où les prennent-elles au Canada?

M. Basford: Si vous me permettez de parler, monsieur Emard, elles importent 85 p. 100 de leurs produits chimiques. Leur exploitation au Canada consiste surtout à transformer les produits qu'elles importent en médicaments et tâcher de les mettre sur le marché.

C'est une industrie qui ne fonctionne pas selon une économie d'échelle. Une petite entreprise peut fabriquer des médicaments sous sa forme posologique, c'est pourquoi il

[Text]

view, there is no reason that the preparation of these finished dosage forms cannot be done efficiently in Canada if and when this act is enacted. The fact that international companies, which you are concerned about, choose to undertake the manufacturing of dosage forms in Canada demonstrates that it can be economically done here, otherwise they would have been importing their dosage forms years ago and doing nothing in Canada except simply marketing them.

In addition, the industry that you are concerned about will continue after this bill is passed to have the advantage of a 15 per cent tariff on dosage forms—15 per cent of value, which gives added protection for the expensive dosage forms over the importation of less expensive fine chemicals.

So we say that these firms that you are concerned about will still be able to economically import fine chemical, which they are doing now to the extent of 85 per cent, and manufacture it into dosage forms in Canada, still enjoying a 15 per cent tariff—which I might say is far more protection than many of the other industries that provide employment in the Province of Quebec are given.

I would be inclined to ask, how much protection does an industry want? You know, if you ask any industry they will want all the protection in the world. They will ask that a complete tariff barrier be put up—a complete import ban around the country. But surely we cannot allow them to do that. We are giving them a 15 per cent tariff protection. I would point out that it is much more difficult for companies to satisfactorily meet the requirements and the tests of the Food and Drug Directorate because it is more difficult to test finished, dosaged forms than to test the fine chemicals and, therefore, the importer of dosage forms which you are concerned about is going to have more difficulty meeting the requirements of the Food and Drugs Act than the importer of fine chemical who manufactures it into dosage forms in Canada.

• 1230

Le président: A l'ordre. Je voudrais rappeler aux députés que la présidence a été très patiente. J'ai beaucoup de noms sur ma liste et je voudrais bien, maintenant que nous avons entendu les gens qui ne font pas partie du Comité, que nous entendions un peu les membres du Comité. Vous avez la parole depuis déjà une heure et quart. Vous pouvez poser votre question, monsieur Émard.

[Interpretation]

existe plusieurs petites entreprises de ce genre au Canada.

D'après nous, il n'y a aucune raison pourquoi ces préparations sous leur forme posologique ne seraient pas faites au Canada une fois que la loi sera adoptée. Le fait que ces entreprises internationales, dont vous vous inquiétez, ont décidé d'entreprendre ces activités manufacturières au Canada, prouve que c'est économiquement avantageux pour elles, autrement il y a longtemps qu'elles importeraient ces produits sous leur forme posologique et ne feraient que les distribuer au Canada.

De plus, l'industrie dont le sort vous inquiète continuera, après l'adoption de ce bill, d'avoir l'avantage d'un tarif de 15 p. 100 sur les produits sous leur forme posologique, c'est-à-dire 15 p. 100 de la valeur ce qui leur donne une protection tarifaire supplémentaire pour les produits sous leur forme posologique par rapport aux produits de base importés.

Nous avons dit que ces entreprises pourront toujours continuer d'importer 85 p. 100 des produits chimiques de base et de fabriquer les produits sous leur forme posologique au Canada tout en jouissant d'un tarif de 15 p. 100, soit un tarif déjà beaucoup plus élevé que ceux dont jouissent d'autres industries dans la province de Québec.

Quelle autre protection l'industrie peut-elle désirer? Si vous la laissez faire, l'industrie va demander le plus de protection possible. Elles exigeront des barrières tarifaires complètes, une interdiction globale de l'importation. Mais c'est impossible. On leur accorde une protection tarifaire de 15 p. 100. Je ferai remarquer qu'il est beaucoup plus difficile pour les sociétés de répondre aux exigences et aux tests de la Direction des aliments et drogues parce qu'il est plus difficile de vérifier les produits, sous leur forme posologique que de faire l'essai des produits de base. L'importateur de produits finis aura donc plus de difficultés à satisfaire les exigences de la Direction des aliments et drogues que l'importateur de produits de base qui fabrique au Canada les produits sous leur forme posologique.

The Chairman: Order please, I would like to remind the Members that the Chairman has been up to now very patient. I have a lot of names on my list, and now that we have heard the people who are not members of the Committee, I would like to hear the members of the Committee. You have had the floor for an hour and a quarter. If you may put your question, Mr. Émard.

[Texte]

M. Émard: Monsieur le président j'en ai seulement pour deux minutes.

Mr. Rock: Mr. Chairman, I have a question of privilege.

M. Émard: Monsieur le ministre, je suis loin d'être un expert dans les produits pharmaceutiques. Je ne connais absolument rien. Mais, je crois que je peux me fier à la lecture des différents rapports qui nous sont présentés. Pour répondre à ce que vous m'avez dit, j'aimerais vous lire un paragraphe d'une dizaine de lignes du mémoire de L'Association canadienne des fabricants en pharmacie, qui a été présenté à la province de Québec.

L'industrie pharmaceutique est forcée d'importer 80 p. 100 de sa matière première à des prix de 15 à 20 p. 100 plus élevés que dans le pays d'origine, plus le coût du transport, plus les tarifs douaniers qui ajoutent parfois jusqu'à 20 p. 100 au prix de la marchandise. Plusieurs membres de notre Association se procurent leur matière première à meilleur marché, parce que leur maison-mère à l'étranger est une industrie chimique. Mais, alors, les douaniers majorient de 50 p. 100 l'évaluation déclarée des marchandises avant de calculer les droits de douanes.

Vous pouvez passer à d'autres questions.

Mr. Rock: On a question of privilege, Mr. Chairman.

The Chairman: On a question of privilege.

Mr. Rock: Yes, I want to correct something the Minister said. He said last meeting, and he said it again today, that Mr. Émard and I have the impression that this bill is going to cause mass—he used the word “mass”—unemployment in the Province of Quebec. This is not what I said. I said it will cause future unemployment in this industry and to related industries—the supporting industries. I never said that it was going to cause mass unemployment. But somehow the Minister brings that impression down here, and sometimes the press will put out in the news that Ray Rock declares mass unemployment . . .

Mr. Basford: I am sorry I did not want to misinterpret you. I was referring to what I thought you were saying, massive unemployment in the government.

Mr. Rock: If you had said in the drug industry, if you had said that also, then I would agree with you.

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Mr. Rynard: I have a supplementary question to the Minister. He says that 15 per cent

[Interprétation]

Mr. Émard: It will only take me a couple of minutes, Mr. Chairman.

M. Rock: Monsieur le président, j'ai une question de privilège.

Mr. Émard: Sir, I am far from being an expert in pharmaceutical products. I know absolutely nothing in this field. However, I think I can rely on what I have read in the various reports which are presented. In reply to what you have just said, I should like to read to you a paragraph of about ten lines of this memorandum from the Pharmaceutical Manufacturers Association of Canada presented in the Province of Quebec.

The drug industry has to import 80 per cent of its basic materials at prices which are 15 to 20 per cent higher than in the country of origin, plus the cost of transportation, plus customs tariffs which sometimes add up to 20 per cent to the price of the merchandise. Several members of our Association get their basic materials cheaper because the parent company abroad produces chemicals. However, the customs then increase by 50 per cent the declared value of the merchandise before calculating customs duties.

You may move on to other questions.

M. Rock: Question de privilège.

Le président: Question de privilège?

M. Rock: Je tiens à corriger ce que le ministre a dit lors de la dernière séance, que nous avions l'impression, M. Émard et moi, que ce bill créera beaucoup de chômage dans la province de Québec. Ce n'est pas du tout ce que j'ai dit. J'ai dit que dans l'avenir cela sera du chômage dans l'industrie en cause et dans les industries connexes. Je n'ai pas dit qu'il causerait un chômage massif. C'est pourtant l'impression que donne le ministre et je pense que la presse pourrait se saisir de cela et répandre la nouvelle que selon M. Rock on peut s'attendre à une vague de chômage.

M. Basford: Excusez-moi, je pensais que vous aviez dit un chômage énorme dans la fonction publique.

M. Rock: Si vous parliez de l'industrie pharmaceutique et si vous référiez à cela aussi, alors, je suis d'accord avec vous.

M. Rynard: Une question supplémentaire qui s'adresse au ministre. Il a dit que le 15 p.

[Text]

will give all the protection that is necessary, or words to that effect, on the fine chemicals that are imported. Now, I am wondering how he is figuring, and I would like to know how this is projected, because in the countries of origin their standard of living is much below ours and the wages would be much below what we have to pay here in Canada.

I am wondering what he bases this 15 per cent on. Where was this figure arrived at? Did he get it from industry, that this would give the protection that is necessary for the Canadian manufacturer to compete?

Mr. Basford: This is the chemical tariff. . .

Mr. Rynard: I realize that.

Mr. Basford: ...which is determined or arrived at, and was the recommendation of the Canadian Tariff Board. They are concerned, as you are aware, about what tariff should be applied to imports, and their main concern is the state of Canadian industry.

Mr. Rynard: Yes, this is the point I wanted to get before the Committee. Your statement would be to the effect that this is adequate to protect the difference in wages in a foreign country and what they pay here, because they produce this chemical in a foreign country. It is right there, ready to go to work on. And what you are saying is that they could ship this through and a 15 per cent tariff will permit the Canadian manufacturer, who pays two or three times the wages, to manufacture this particular drug.

This, I think, Mr. Chairman, is a good reason why we need some extra advice on this, and I am accepting the Minister's statement on this if he believes this.

But I believe we need to go into this on the steering committee and have people from industry come here and show us so that we will be able to show to those people who have brought up those questions that we have the answer, and I think that is the only way it can be settled.

Mr. Basford: The point I want to make clear is that the industry is already importing 85 per cent.

Mr. Rynard: I do not disagree with this, but your bill here is to bring down the cost of drugs. This is what I am coming at, and you have to correlate the industry with the cost of drug production in some foreign country from which you are importing those chemicals.

[Interpretation]

100 serait une protection suffisante pour l'importation des produits chimiques de base. Je me demande comment il a fait ses calculs, car le niveau de vie dans les pays exportateurs de même que les traitements sont beaucoup plus bas qu'au Canada. Alors, je me demande sur quoi il fonde son 15 p. 100. Comment en est-il arrivé à ce chiffre de 15 p. 100? De l'industrie? Est-ce que les industries considèrent que cette protection est suffisante pour concurrencer sur le marché canadien?

M. Basford: C'est le tarif des produits chimiques. . .

M. Rynard: Je m'en rends compte.

M. Basford: ...qui a été recommandé par la Commission canadienne du tarif. Comme vous le savez, c'est elle qui décide quel droit de douane il faut imposer sur les importations. Elle s'inquiète particulièrement du sort de l'industrie canadienne.

M. Rynard: Mais alors, selon vous, cette protection serait suffisante pour compenser la différence entre les salaires à l'étranger et au Canada puisque ces produits chimiques sont préparés à l'étranger. Vous dites que même s'ils importent ces produits, le tarif de 15 p. 100 protégera le fabricant canadien qui doit payer des salaires deux ou trois fois plus élevés.

Voici une bonne raison pour laquelle il faut demander conseil à ce sujet. J'accepte la déclaration du ministre s'il est d'accord avec moi. J'estime qu'il faut étudier cette question au comité directeur et inviter les gens de l'industrie pour qu'ils puissent s'exprimer et que nous puissions leur démontrer que nous tenons la réponse à ce problème; c'est la seule façon logique de procéder.

M. Basford: L'industrie importe déjà 85 p. 100 de ses matériaux.

M. Rynard: D'accord, mais votre mesure vise à réduire le coût des médicaments. Alors il faut que le coût de la production de l'industrie soit relié au prix de fabrication à l'étranger.

[Texte]

Mr. Basford: Eighty-five per cent of the fine chemical is being imported now. The fine chemical industry in Canada devoted to pharmaceuticals is a very small one.

Mr. Rynard: I do not disagree with this at all, Mr. Chairman. The point I am making is that the Minister is bringing this bill in to bring down the cost of the price of drugs and this is the key to it. And this is why I am bringing up this point now, and I think this is why we need somebody from industry to explain this to us. I am sure the Minister is doing the best he can.

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Mr. Basford: I hope you are not suggesting that we raise the tariff.

Mr. Rynard: No, I am not, not at all. I am well aware that you reduced it to 15 per cent. The question in my mind is whether this is adequate. This you have not told us.

Mr. Basford: If it is not adequate, are you suggesting we raise it?

Mr. Rynard: I am not suggesting that at all, because on the one hand you bring this bill in to reduce the price of drugs...

Mr. Basford: Yes.

Mr. Rynard: ... and at the same time you say you are going to encourage manufacturers in Canada. What I am saying is, are you certain that they will not take those raw chemicals and produce them in the country of origin, and then ship them in here?

Mr. Basford: Ship them in here in dosage form?

Mr. Rynard: Yes.

Mr. Basford: The bill allows them to import them in dosage form, and I would hope that the price in Canada of dosage forms is high and non-competitive, someone would come along and import some dosage forms. That is the whole design of the bill. It will provide the Canadian public with cheaper prescription drugs.

Mr. Rynard: Mr. Chairman, this is exactly the fear expressed by Mr. Émard, Mr. Rock, and several others here. And this is why I bring up this point again, that we cannot get anywhere until we have this witness from industry.

Mr. Basford: If you wish a discussion of tariff, I would be delighted to have my Depu-

[Interprétation]

M. Basford: On importe actuellement 85 p. 100 des produits chimiques de base alors que cette industrie est très réduite au Canada.

M. Rynard: Oui, mais ce que je veux dire c'est que le ministre propose cette mesure pour faire baisser le prix des médicaments. Voilà pourquoi je soulève la question et que j'estime qu'il faudrait que quelqu'un de l'industrie nous explique la situation.

M. Basford: J'espère que vous ne proposez pas une hausse de tarif.

M. Rynard: Non, il ne s'agit pas de cela. Je sais que vous l'avez fait baisser à 15 p. 100. Je me demande seulement si cette protection est suffisante. C'est ce que vous ne nous avez pas dit.

M. Basford: S'il n'est pas suffisant, comment proposez-vous de le hausser?

M. Rynard: Ce n'est pas ce que je veux dire. Si on propose ce bill c'est pour diminuer le prix des médicaments. D'accord?

M. Basford: Oui.

M. Rynard: Et vous voulez en même temps encourager la fabrication au Canada, êtes-vous certain qu'ils ne prendront pas tout simplement les produits chimiques bruts et se mettront à fabriquer à l'étranger, avant de les expédier au Canada?

M. Basford: Sous leur forme posologique?

M. Rynard: Oui.

M. Basford: Le bill leur permet de les expédier ici sous leur forme posologique, et j'espère que si le prix des produits sous leur forme posologique est élevé au Canada et non concurrentiel, quelqu'un les importera effectivement. Voilà comment ce bill pourra faire baisser le prix.

M. Rynard: C'est exactement ce que craignent mes collègues, et c'est pourquoi je répète qu'on n'arrivera à rien sans le témoignage de l'industrie en cause.

M. Basford: Si vous voulez discuter du tarif, mon sous-ministre adjoint sera heureux

[Text]

ty Minister answer your questions further. He was formerly with the Department of Finance, and formerly a tariff negotiator.

Mr. Rynard: I think this will be decided in the steering committee. They will bring somebody in and satisfy the questions that have been asked.

Mr. Saltsman: Mr. Chairman, I have a figure here I would like to give you, as a short indication. It is a report from the Economic Council of Canada that deals directly with this question on tariffs that is before us. It reads:

A study prepared for the Economic Council of Canada indicates that Canadian manufacturing in general has a higher level of effective tariff protection from import competition than the nominal or published tariff rates would suggest.

We have been talking about the 15 per cent tariff protection, when in fact the protection is about twice as much as that, as the Economic Council of Canada figures point out. And I am taking these figures from Special Study No. 9, "Effective Protection in the Canadian Economy", by Professors James R. Melvin and Bruce W. Wilkinson. The figures are on page 27, in which it says under "pharmaceuticals" that the nominal tariff is 22.5 per cent, the effective protection based on one calculation is 28.8 per cent, and the effective protection based on another calculation is 31.9 per cent.

We are really talking about a very effective tariff protection; it is far greater than the 15 per cent figure would indicate.

Mr. Basford: This is why I ask, Mr. Saltsman, how much protection does an industry want?

Mr. Saltsman: The report also says that in many cases, the Kennedy Round actually raised the effective tariff protection, rather than lowered it.

The Chairman: Mr. Ritchie.

Mr. Ritchie: Mr. Chairman, I would like to ask the Minister a few questions on prices. He hopes that this will bring down the price of drugs, and we all hope this. I have a record of a telegram to the Rt. Hon. P. E. Trudeau, Prime Minister of Canada, dated October 22, 1968, which reads:

I head a wholly Canadian-owned independent group of companies presenting basic pharmaceutical chemicals and finished drug products. The Minister of Consumer Affairs claimed proposed Gov-

[Interpretation]

de le faire. Il était autrefois avec le ministère des Finances à titre de négociateur du tarif.

M. Rynard: Laissons le comité directeur décider qui viendra répondre aux questions posées.

M. Saltsman: J'ai un chiffre ici que je voudrais donner à titre d'indication. Dans le rapport du Conseil économique du Canada où l'on traite de la question du tarif, et je cite:

une étude préparée par le Conseil économique du Canada indique que, en général, les fabricants canadiens jouissent d'une protection tarifaire réelle contre la concurrence des importations beaucoup plus élevée que ne le laisseraient croire les taux officiels.

Nous parlons d'une protection tarifaire de 15 p. 100, alors qu'en fait la protection est environ le double de ceci. Ces chiffres sont tirés de l'étude spéciale n° 9, à la page 27 où l'on dit sous la rubrique «produits pharmaceutiques» que le tarif officiel est de 22.5 p. 100 tandis que, d'après un calcul, la protection réelle est de 28.8 p. 100 et d'après un autre calcul, elle est de 31.9 p. 100. Nous parlons d'une protection tarifaire réelle qui est beaucoup plus élevée que ne laisserait croire le chiffre de 15 p. 100.

M. Basford: Voilà pourquoi je demande monsieur Saltsman, ce qu'une industrie désire de plus.

M. Saltsman: Le rapport indique également que, dans bien des cas, la négociation Kennedy a relevé la protection tarifaire réelle au lieu de la faire baisser.

Le président: Monsieur Ritchie.

M. Ritchie: Je voudrais poser au ministre quelques questions au sujet des prix. J'estime que cette mesure pourra peut-être réduire le prix des médicaments, ce que nous espérons tous. Mais j'ai ici un télégramme du premier ministre, M. Trudeau, du 22 octobre 1968:

Je représente un groupe de sociétés canadiennes qui produisent des produits chimiques de base pour l'industrie des produits pharmaceutiques, ainsi que de médicaments. Le ministre des Affaires

[Texte]

ernment action on drug patents introduced to break monopoly and reduce drug prices. You should know this is false.

It goes on, but I do not think there is any point in adding. It is signed by John M. Cook, President, Paul Maney Laboratories. Maybe I should add:

For a dozen years we have been breaking drug monopoly and reducing drug prices far below those given to House of Commons using provisions of our present Patent Act.

Now turning to the figures the Minister gave on October 17, and going through some of these. For instance, Chloromycetin at \$21.68. There is a generic brand at \$3.25. Achromycin—it is interesting to note that in Rome it is more expensive than in Canada.

Mr. Basford: I am wondering if you would mind telling me what page you are quoting from.

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Mr. Ritchie: Page 1512. Do you want me to go back to Chloromycetin?

Mr. Basford: Would you start over?

Mr. Ritchie: Priced at \$21.68 by the Minister; a brand of chloramphenicol at \$3.25. Achromycin—it is interesting to note as a comment at this time that in Rome, Italy, which has no patent laws for drugs at all and no protection for manufacturers, it is more expensive than in Canada. Achromycin at 13.56; generic form from a supplier at \$2.90. I telephoned the drug store this morning for a patient, and the druggist had one for five cents. That would be \$5.00 a hundred, his price plus his fee, of course, for dispensing.

Gantrisin; there is hardly any generic in Gantrisin: \$3.64. There is a generic competition at \$3.00, an example, presumably, of the generic firm hovering just below the trade mark; Decadron priced at \$16.10; Canadian competition, \$7.68; Librium, \$6.49: an unstatistical strength at \$3.66.

Now, I may say that I personally know that in Manitoba, Horner who is manufacturing Librium under compulsory licence, I understand, from the Food and Drug Directorate, has captured all the hospital market in Manitoba. Therefore, presumably they are considerably lower than Librium. Equanil priced at \$5.50—its competition—Canadian suppliers of meprobamate at 80 cents a hundred. I personally know—I was in a drug

[Interprétation]

des consommateurs désire présenter une mesure touchant les brevets sur les médicaments afin d'éliminer les monopoles et faire baisser le prix des médicaments.

Le télégramme poursuit, mais il est inutile de le citer en entier. Il est signé par M. Cook, président, Paul Maney Laboratories. Je devrais peut-être ajouter:

Depuis douze ans nous avons réussi à briser les monopoles et à réduire le prix des médicaments à un niveau très inférieur aux chiffres cités à la Chambre, grâce aux dispositions de la Loi sur les brevets.

Si on se reporte aux chiffres du ministre, du 17 octobre, la chloromycétine, par exemple, se vend à \$21.68 tandis que sans son nom générique, l'Achromycine se vend \$3.25. Il est intéressant de noter qu'elle se vend plus cher à Rome qu'au Canada.

M. Basford: Quelle page est-ce que vous citez?

M. Ritchie: Page 1512. Désirez-vous que je revienne à la Chloromycétine?

M. Basford: Pourriez-vous recommencer?

M. Ritchie: Oui. Le prix cité par le ministre était de \$21.68, pour le chloramphénicol vendu sous appellation, tandis que l'achromycine se vend \$3.25. J'ai ajouté qu'à Rome, où il n'y a pas de brevet pour les produits pharmaceutiques, ce produit est plus cher qu'au Canada. L'achromycine s'y vend \$13.56 tandis que le produit sous son nom générique se vend \$2.90. J'ai téléphoné à une pharmacie ce matin et le pharmacien en avait à \$5 le cent, plus ses frais d'exploitation, bien entendu.

Passons à la Gantrisine qui ne se vend pratiquement pas sous son nom générique. Elle se vend \$3.64 et le produit sans son nom générique à \$3.00.

Le decadron se vend \$16.10, tandis qu'un prix compétitif canadien est \$7.68; le prix du librium est fixé à \$6.49, tandis qu'un produit semblable dont la teneur n'est pas indiquée se vend \$3.66.

Je pourrais citer le cas de Horner, au Manitoba, qui fabrique du solium, a tout le marché des hôpitaux au Manitoba. Ainsi le prix doit être considérablement plus bas que celui du librium. Le prix de liste de l'equanil est \$5.50, et celui d'un produit concurrent, fabriqué au Canada, le meprobamate, est de 80 cents le cent. J'ai constaté par moi-même, il y a deux mois dans une pharmacie, que l'equanil se détaillait à 5 cents la pilule. Une

[Text]

store two months ago and equanil was retailed at 5 cents per pill. It was on the drug store shelf—a bottle by a “copy house” in Toronto—quite a good one I must say—quite reputable—at 1 cent a pill or \$1.00 a hundred. Butazolidin—I might go back to meproamate for a minute. For the month of April a drug flyer to the doctor states:

Dear Doctor:

These prices are good for the month of April 1968.

and lists it at \$3.70 a thousand or 37 cents a hundred, that is assuming you bought a thousand. It would be a little higher to buy at a hundred. Not only that, but if you bought 5,000 you got 1,000 free. These are some of them.

Mr. Haidasz: Mr. Chairman, on a point of order, is the member quoting prices for the patient or for the doctor?

Mr. Ritchie: This is to the retailer. The doctor is the retailer in this instance in this flyer.

Mr. Haidasz: I think you must realize that Equanil is a brand name and you are quoting the lower prices in the generic name.

Mr. Ritchie: That is right.

Mr. Haidasz: I do not believe you have made that distinction in your statement and I think it is very important.

Mr. Ritchie: Oh, I am sorry.

Mr. Haidasz: The names tabled by the Minister are drugs by the brand names at the company that has the patent on the drug.

Mr. Rynard: Mr. Chairman, a supplementary question to that—

Mr. Basford: Just a moment, Dr. Rynard; I did not get Dr. Ritchie's question.

Mr. Ritchie: Perhaps I should ask the Minister whether I did confuse him. Does he understand that I was quoting generic houses, that is, houses that are manufacturing this drug?

Mr. Basford: Yes, I understood that.

Mr. Ritchie: To go on, Butazolidin at 100 milligrams—\$2.16 by Paul Maney. Three of these quoted are from Italy where the price is higher and where there is no drug patent. We already have some competition, or considerable competition. Does the Minister think by

[Interpretation]

imitation de ce produit fabriquée par une firme reconnue de Toronto se trouvait sur les tablettes de la pharmacie et se vendait 1 cent l'unité ou \$1 le 100.

Quant à la Butazolidine, je reviens au meproamate pour une minute, au mois d'avril une brochure indiquait aux médecins ceci:

«Cher docteur,

Les prix suivants sont valables pour le mois d'avril 1968.»

\$3.70 le mille ou 37 cents le cent, à condition que vous en achetiez 1000. Ce sera un peu plus cher si vous en achetez seulement cent. Mais si vous en achetez 5000, on vous en donne 1000 gratuitement.

M. Haidasz: Monsieur le président, j'en appelle au Règlement. Est-ce que le député parle du prix au patient ou au médecin?

M. Ritchie: Le prix de détail, le médecin agit en somme comme détaillant en fonction de ce pamphlet.

M. Haidasz: Je pense qu'il faut se rendre compte qu'on parle ici d'une marque de commerce, l'Equanil et que dans l'autre cas, il s'agit du plus bas prix d'un produit générique.

M. Ritchie: C'est exact.

M. Haidasz: Je ne crois pas que vous ayez fait cette distinction dans votre déclaration, et il me semble que c'est très important.

M. Ritchie: Je m'excuse.

M. Haidasz: Les noms dont parle le ministre sont des produits de marque, dont une compagnie a le brevet.

M. Rynard: Monsieur le président, une question supplémentaire.

M. Basford: Un instant s'il vous plaît. Je n'ai pas très bien compris la question de M. Ritchie.

M. Ritchie: Il faudrait demander au ministre, peut-être que je n'ai pas été très clair ici mais je citais les prix de produits aux termes génériques de maisons fabriquant ces produits.

M. Basford: J'ai compris.

M. Ritchie: Pour continuer, la Butazolidine à 100 milligrammes, à \$2.16 par Paul Maney. Trois des médicaments cités proviennent d'Italie où il n'y a pas de brevet pour les drogues. Il existe déjà une concurrence considérable. Est-ce que le ministre pense qu'en aug

[Texte]

adding more people involved in the manufacture of drugs that this will lower the price of drugs, or does it mean that there are factors other than price that seem to hold the cost unduly high?

Mr. Basford: I did not quite catch the last phrase.

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Mr. Ritchie: In a sense, in a purely competitive market, Butazolidin at \$5.57 a hundred should not be able to compete with Butazolidin at \$2.16 a hundred. In other words, we already have competition. Why is not the price of drugs lowered by the competition already in operation in the industry?

Mr. Basford: For a number of reasons. First, seeing that you have referred to this table I would like to say a few things because Dr. Rynard referred to it with some glee at second reading. The table that I used on page 1512 of *Hansard* is a complete duplication of Appendix F of the Harley report. Simply, it was updated by my predecessor when he moved second reading and updated again when I moved second reading, so Appendix F in the Harley report would be up to date and the figures I gave on October 17 were up to date and derived from the same sources as the Harley report and Mr. Turner used.

The table in the Harley report to show one thing; that Canadian drug prices—brand name drugs—are unduly high in Canada and higher than in many other places in the world. Appendix F in the Harley report shows that, the table I used at page 1512 shows that—it bears out that statement, it seems to me. It was used by me for the same purpose as the Harley report. Dr. Rynard was a member of the Harley Committee and I assume he agreed with the insertion of Appendix F and the statements made in the Harley report.

Mr. Rynard: Mr. Chairman—

Mr. Basford: I am indebted to Dr. Ritchie for pointing out this table and bringing it to the attention of the members this morning, as well as bringing to the Committee the prices of some of the generic equivalents that are available in Canada. We are anxious that those generic equivalents that have been cleared by the Food and Drug Directorate are on the market after complying with the Food

[Interprétation]

mentant l'effectif des fabricants de médicaments, cela va réduire le prix des produits pharmaceutiques ou y a-t-il d'autres facteurs qui semblent fixer sans raison valable des prix anormalement élevés?

M. Basford: Je n'ai tout à fait compris la dernière phrase.

M. Ritchie: Dans un sens, dans marché purement concurrentiel, si l'on prend la butazolidine à \$5.57 le cent, elle ne devrait pas pouvoir concurrencer la butazolidine qui se vend à \$2.16 le cent.

La concurrence existe déjà. Pourquoi les prix des produits pharmaceutiques ne sont-ils pas abaissés par la concurrence qui existe déjà au sein de l'industrie.

M. Basford: A cause d'un grand nombre de raisons. J'aimerais faire quelques observations faisant suite à celles qu'a faites le Dr. Rynard, à la seconde lecture au sujet de ce tableau.

Le tableau que j'ai utilisé apparaît dans le *hansard* à la page 1512 et c'est simplement la copie de l'appendice F du rapport de la Commission Harley. Il a été simplement mis à jour par mon prédécesseur lorsqu'il a proposé la deuxième lecture et remis à jour de nouveau par moi-même, parce que moi aussi j'ai proposé la deuxième lecture. Par conséquent, l'annexe F du rapport Harley est maintenant à jour. Les chiffres que j'ai cités le 16 octobre avaient été vérifiés et provenaient des mêmes sources que celles qui avaient été utilisées par le rapport Harley et M. Turner.

Les tableaux qui paraissent dans le rapport Harley tendent à indiquer que les prix des médicaments portant marques de commerce sont excessivement élevés au Canada, plus élevés que dans la plupart des autres pays du monde. L'annexe F du rapport Harley l'indique fort bien. Le tableau que j'ai utilisé à la page 512 en fournit la preuve. J'ai utilisé des chiffres aux mêmes fins que le rapport Harley. M. Rynard était membre du Comité Harley qui a établi l'annexe F et les déclarations figurant au rapport Harley.

M. Rynard: Monsieur le président...

M. Basford: Je remercie le Dr Ritchie pour avoir signalé aux membres du comité ce tableau, et pour nous avoir fourni les prix de certains médicaments équivalant aux termes génériques disponibles au Canada.

Il nous tarde de voir ces équivalents aux termes génériques acceptés par le Directeurat des Aliments et des drogues et mis en marché. Le Dr. Ritchie a bien signalé quels

[Text]

and Drug Directorate requirements. Dr. Ritchie has demonstrated more than I have the advantage to the consumer of buying generics and all this Bill is designed to do is to encourage that development.

All that the information bulletin to doctors that Dr. Chapman spoke of on Tuesday is designed to do is to encourage doctors to prescribe, rather than something that costs \$5.57 a hundred to the retailer, something that costs 37 cents. If we can get those sorts of prescription drug prices on the Canadian market—and we have a good many of them already—if we can get doctors to prescribe them, if we can develop confidence of the doctors in those generic equivalents, then we will have accomplished the purpose this Bill, the other points in the government program and the Harley recommendations were designed to do—bring cheaper prescription drugs to Canada.

Mr. Rynard: Mr. Chairman, as a supplementary question, what the Minister, in effect, is saying is that we have the drugs here now if we had a way of seeing they were prescribed.

Mr. Basford: We have some of the drugs here. We think, as the Harley report recommended, if we change the Patent Act to allow compulsory licences to be granted or applied for and granted more expeditiously over a shorter period of time, and if we allow compulsory licensing for imports, we will encourage the trend that Dr. Ritchie has pointed out.

Mr. Rynard: Well, Mr. Chairman, I just have this to add: Mr. Paul Maney who is a young—or his laboratory, Mr. Cook who is the president of that—has drawn to the attention of the Minister that this statement is a bit wrong. He puts it a little stronger than that and says that for a dozen years we have been breaking the drug monopoly in reducing prices far below those that were presented to the House of Commons, and this is the point that Dr. Ritchie was making. Let us present the true facts here so that we can come to proper decisions.

Mr. Basford: Yes, I forgot that Dr. Ritchie had mentioned Paul Maney and Mr. Cook. I would point out that complex of Micro Chemicals Limited, Gryphon Laboratories Limited and Paul Maney Laboratories Canada Limited, presented a brief to the Harley Committee and Mr. Cook, their President—or the President of Micro—testified before the Harley Committee and in view of that testimony made the recommendation that they did.

[Interpretation]

sont les avantages pour le consommateur d'acheter des produits aux termes génériques. Ce projet de loi tend précisément à favoriser cette pratique.

Tous les renseignements, les bulletins, les dépliant qui sont envoyés aux médecins et qu'on a mentionnés cherchent précisément à inciter les médecins à ordonner plutôt qu'une drogue qui coûte \$5.57 le cent un médicament qui ne coûterait que 37 cents. Si nous pouvions obtenir ce genre de listes de prix pour les médicaments en vente sur le marché canadien, et nous en avons déjà quelques-unes, si dans une certaine mesure nous pouvions inciter les médecins à prescrire en conséquence, si nous pouvions amener les médecins à avoir confiance en ces produits, nous aurions alors atteint l'objectif du projet de loi et des autres points des programmes du gouvernement, ainsi que les recommandations du rapport Harley, soit d'abaisser le coût des médicaments au Canada.

M. Rynard: Monsieur le président, une question complémentaire.

Le ministre est en train de nous dire que nous avons maintenant des produits pharmaceutiques, que c'est une question d'ordonnance.

M. Basford: Nous avons certains de ces produits pharmaceutiques. Comme le rapport Harley le signale, si nous modifions la *Loi sur les brevets* afin que des permis obligatoires soient accordés plus rapidement, avec plus de célérité et si les permis d'importation sont accordés plus rapidement, nous encourageons la tendance soulignée par le Dr. Ritchie.

M. Rynard: J'aimerais ajouter que M. Paul Maney, propriétaire et M. Cook, président d'un laboratoire, ont attiré l'attention du Ministre sur le fait que cette déclaration est quelque peu fautive. Selon la déclaration de M. Maney, et je cite: «Nous avons essayé depuis des années de briser le monopole des médicaments en réduisant leurs prix bien en deça du niveau qui a été indiqué à la Chambre des communes.» Voilà précisément ce que disait le Dr. Ritchie. Présentons donc les véritables faits et prenons ainsi les décisions qui s'ensuivent.

M. Basford: J'avais oublié que le docteur Ritchie avait mentionné Paul Maney et M. Cook.

J'aimerais mentionner que le complexe *Micro Chemicals Limited, Gryphon Laboratories Limited et Paul Maney Laboratories Canada Limited* a présenté un rapport au Comité Harley, et que M. Cook a témoigné devant le Comité. Le Comité Harley, après cette déclaration, a fait ses propres recommandations.

[Texte]

Mr. Ritchie: I would like to ask Dr. Chapman about some of the safety things he is involved in. First of all, he has some considerable new help in his Department. How many of those are pharmacologists; that is, doctors trained in drug therapy? Can you answer that? You have some, I presume?

Dr. Chapman: Yes, Mr. Chairman, we certainly have. I cannot indicate to you the precise number of pharmacologists; I can tell you that the number of personnel with university degrees in our research laboratories is approximately 100 and we have approximately 80 personnel trained to the doctorate level. A number of these are pharmacologists but I cannot give you a precise figure.

Mr. Ritchie: You cannot tell me how many medical doctors trained in pharmacology you have?

Dr. Chapman: Mr. Chairman, is it the number of medical doctors with further degrees in pharmacology?

Mr. Ritchie: Yes, or training in pharmacology. I realize it is probably difficult to find.

Dr. Chapman: Yes, it is an extremely rare person who has degrees in both these areas. We do not have anyone at the present time who has both an M.D. degree and a Ph.D. in pharmacology.

Mr. Ritchie: Have you any with M.D. degrees who have further training or have a bent to pharmacology?

Dr. Chapman: Very definitely.

Mr. Ritchie: Have you an approximate idea how many you have?

Dr. Chapman: I would prefer, Mr. Chairman, to consult with the Directors and get those figures.

The Chairman: Are there any other questions?

Mr. Ritchie: In your assessment of a drug, do these medical doctors have the most influence? Are they the ones who make the final decision?

Dr. Chapman: Mr. Chairman, the recommendations that come forward to me are initiated in our Drug Advisory Bureau. This

[Interprétation]

M. Ritchie: Monsieur le président, j'aimerais demander au docteur Chapman qui s'occupe des problèmes de sécurité. Premièrement, il a reçu du renfort dans son département.

Combien avez-vous de pharmacologues, de médecins qui ont reçu une formation spéciale en pharmacothérapie. Pouvez-vous nous répondre? Vous en avez, je suppose.

M. Chapman: Oui, monsieur le président, certainement. Je ne puis vous préciser le nombre de pharmacologues, mais je suis en mesure de vous indiquer que nous avons dans nos laboratoires près de 100 diplômés de l'université et que nous en avons formé 80 environ au niveau du doctorat. Parmi eux figurent des pharmacologues, mais j'ignore en quel nombre précis.

M. Ritchie: Pouvez-vous me dire combien de médecins ont reçu une formation en pharmacie?

M. Chapman: Vous parlez de médecins, de personnes qui ont terminé d'abord leur cours de médecine et qui ensuite se sont spécialisées en pharmacie?

M. Ritchie: Ou qui ont simplement suivi un cours en pharmacie. C'est rare, sans doute.

M. Chapman: Je crois qu'on trouverait très peu de gens ayant des diplômes et en médecine et en pharmacie. Nous n'avons personne à l'heure actuelle qui ait son doctorat en médecine et, en plus de cela, son doctorat en pharmacie.

M. Ritchie: Avez-vous au sein de votre personnel quelques médecins qui aient quand même tâté de la pharmacie?

M. Chapman: Certainement.

M. Ritchie: Et combien approximativement?

M. Chapman: Monsieur le président, j'aimerais mieux consulter le directeur de nos laboratoires avant de fournir une réponse à cette question.

Le président: Y a-t-il d'autres questions?

M. Ritchie: Oui. J'aimerais savoir si, lorsqu'ils évaluent le produit pharmaceutique ou une drogue, on consulte les autorités médicales ou non? Qui arrête la décision finale quant à la valeur d'une drogue?

M. Chapman: Monsieur le président, les recommandations qui nous sont présentées proviennent de notre Bureau de consultation

[Text]

Bureau is headed by a medical doctor. In that Bureau we have a division of medicine and pharmacology and in this division we have a number of evaluation units. These units are made up of a combination of medical doctors and scientists: pharmacologists, biochemists and other disciplines in the biological sciences. A recommendation in regard to a new drug comes from the evaluation unit to the drug advisory committee which is chaired by the Director of the Drug Advisory Bureau, Dr. J. Bishop. It is carefully reviewed; if there is any question about this drug it comes forward to a staff meeting and the final recommendation lands on my desk. The major input to this recommendation is made by medical doctors and pharmacologists.

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Mr. Ritchie: Mr. Chairman, I would like to point out one or two things that cause difficulty for doctors in this matter of generics and original drugs. I suppose, Dr. Chapman, you know of Dr. Gilman who was co-author of the book *Goodman and Gilman* in the United States.

Dr. Chapman: I am familiar with the text.

Mr. Ritchie: It is a book, do you agree, that is widely used—nearly every doctor has one on his shelf—on therapeutics, and consulted almost once a day by many people? In testifying before the Senate Drug Committee in Washington he made the statement:

All producers, and certainly the generic houses, should be required to submit proof of the performance of their drugs in human patients before they are permitted to market them.

Would you agree with this?

Dr. Chapman: No, Mr. Chairman, I would not, and the reason for that is the statement I made at the last meeting of the Committee when I quoted from the report of the task force on prescription drugs of the United States Department of Health, Education and Welfare where they stated that instances of clinical non-equivalency have seldom been reported and few of these have had significant therapeutic consequences. To require that each new product coming on the market—now, not each new drug because certainly each new drug must be tested clinically and must be shown to be clinically effective—but for each new product or one that has been on the market for many years—20 years—to require that that be tested clinically before it is placed on the market would put an impos-

[Interpretation]

(drogues), dirigé par un médecin, et qui comprend une division de médecine et une de pharmacie. Dans cette dernière division, des groupes de médecins et de spécialistes divers: pharmacologues, biochimistes, etc., s'occupent des questions d'expertise. Lorsqu'un nouveau produit pharmaceutique est examiné, le service d'expertise présente sa recommandation à son sujet au Comité de consultation (drogues), le docteur J. Bishop. La recommandation est étudiée minutieusement, et, en cas de difficulté, est transmise à un groupe de responsables, avant d'atterrir sur mon bureau. Ce sont des médecins et des pharmacologues qui prennent la plus grande part à cette recommandation.

M. Ritchie: Monsieur le président, j'aimerais signaler une ou deux raisons qui occasionnent les difficultés qu'éprouvent les médecins dans le domaine des produits génériques et originaux. Je suppose, docteur Chapman, que vous connaissez le docteur Gilman, co-auteur de l'ouvrage *«Goodman and Gilman»*, aux États-Unis?

M. Chapman: Je connais cet ouvrage.

M. Ritchie: Il s'agit d'un ouvrage qui est consulté, je crois, par tous les médecins sur la thérapeutique et bien des gens consultent cet ouvrage. Le Dr Gilman a, devant la commission sénatoriale sur les drogues, à Washington, fait la déclaration suivante:

Tous les fabricants, et à coup sûr les sociétés de produits génériques, devraient se voir imposer de prouver le résultat de leurs produits sur des malades humains avant d'être autorisés à les commercialiser.

Êtes-vous du même avis?

M. Chapman: Non, monsieur le président, et comme je le déclarais lors de notre dernière réunion, à cause du comité d'étude sur les produits pharmaceutiques relevant du *Department of Health, Education and Welfare* des États-Unis, où il est noté qu'on a trouvé peu de cas de dissimilitude clinique et que très peu de ceux-ci avaient des conséquences notables. Non seulement nous manquons des installations nécessaires pour analyser tous les nouveaux produits avant de les mettre sur le marché, et pas seulement les produits pharmaceutiques, mais cette pratique ne s'impose pas. Nous manquons de matériel pour ce faire et ceci ne pourrait pas être justifié d'après l'expérience que l'on a eue.

[Texte]

sible burden on the facilities in Canada available for such testing. There would simply not be the facilities available to do this and the evidence is that it just could not be justified on the basis of the information available.

I might also add that this requirement would certainly work to the detriment of the small drug company attempting to get a product on the market because, as you are fully aware, this type of testing is extremely expensive.

Mr. Ritchie: Mr. Chairman—

The Chairman: Dr. Ritchie, it being five minutes to one o'clock, and as I have many other members on my list, is it the wish of this Committee that we adjourn until 3.30 this afternoon?

Mr. Monteith: Mr. Chairman, I have one question. On this Committee do you consider 3.30 or after orders of the day?

The Chairman: How long is the question period usually—what is today? It is on Thursday?

Mr. Monteith: I do not know, but the Minister of Finance has a statement.

The Chairman: After the orders of the day.

Mr. Monteith: Thank you.

AFTERNOON SITTING

• 1548

The Chairman: We will resume consideration of Clause 1 of Bill No. C-102.

We did some research, gentlemen, during the lunch hour. This morning Dr. Rynard asked whether Committee members ever visited pharmaceutical plants. I answered for up to 1965 because I was not here before that, so I went and got some information.

On May 28, 1964, following an invitation addressed to all members of the Special Committee on Food and Drugs, 12 members went to Montreal and visited the manufacturing laboratory facilities of Mount Royal Chemicals Limited, the laboratories of Charles E. Frosst & Company, the Ayerst, McKenna & Harrison Limited, also the Clinical Investigation Unit at the Hôtel-Dieu Hospital in Montreal.

On July 7, 1964, at the invitation of Cyanamid of Canada Limited to the Special Committee on Food and Drugs, 8 Members visited a very important laboratory, the Lederle Research Laboratories at Pearl River, New York. This is besides all the individual visits that have been made by members of the Committee. I hope, Dr. Rynard, that this is the information you require.

[Interprétation]

Je dois dire aussi que cette exigence serait défavorable aux petites sociétés de fabrication de produits pharmaceutiques qui chercheraient à mettre leurs produits sur le marché, vu le coût extrêmement élevé de ces essais.

M. Ritchie: Monsieur le président...

Le président: Comme il est à peu près une heure et qu'il y a un bon nombre d'autres membres sur la liste, est-ce que le Comité désire lever la séance pour revenir cet après-midi?

M. Monteith: Monsieur le président, une question. Trois heures et demie ou après l'ordre du jour?

Le président: Combien de temps dure la période des questions? C'est jeudi, aujourd'hui?

M. Monteith: Je ne sais pas, mais le ministre des Finances a une déclaration à faire.

Le président: Après l'ordre du jour.

M. Monteith: Merci.

SÉANCE DE L'APRÈS-MIDI

Le président: Nous allons reprendre l'étude de l'article 1 du bill C-102.

Ce matin, le D^r Rynard a demandé si les membres du Comité ont déjà visité une usine où on fabrique des produits pharmaceutiques. J'ai répondu pour jusqu'en 1965, car je n'étais pas ici avant 1965. J'ai pris plusieurs renseignements: le 28 mai 1964, à la suite d'une invitation, les membres du Comité spécial sur les aliments et drogues se sont rendus à Montréal et ont visité les laboratoires de Mount Royal Chemicals Ltd., de Charles E. Frosst and Co., de Ayerst, McKenna and Harrison Limited, et la clinique de l'Hôtel-Dieu de Montréal.

Le 7 juillet 1964, à la suite d'une invitation de la Cyanamid du Canada Ltée, huit membres du Comité ont visité un laboratoire important, le laboratoire de recherche Lederle à Pearl River, New York. Et je crois que cela s'ajoute à toutes les autres visites faites individuellement par les députés. J'espère que cela répond à votre question, docteur Rynard.

[Text]

Mr. Rynard: Mr. Chairman, that is exactly the information that I wanted you put on the record, but how many of those were on the Harley Commission? That is the point I brought up and I think that is the point apropos to this discussion.

The Chairman: Yes, we could furnish you with the list if you wish.

• 1550

Mr. Rynard: If you would, please.

The Chairman: I will read the list:
Present in Montreal May 28, 1964:

Messrs. Harley; Asselin (Richmond-Wolfe); Côté (Longueuil); Enns; Howe (Hamilton South); Mackasey; Marcoux; Mitchell; Prud'homme; Rynard; Whelan; Willoughby.

Went to Pearl River, N.Y. (July 7, 1964): Armstrong; Gauthier; Harley; Mackasey; Mitchell; Prud'homme; Whelan; Willoughby.

Does that satisfy you?

Mr. Rock: Went to New York, you say?

The Chairman: Pearl River in New York; not Pearl Harbor—Pearl River.

Mr. Rock: I thought that was Food and Drug, not the Harley Commission.

The Chairman: Food and Drug, yes; but it was the Harley Special Committee on Food and Drugs. When we adjourned, Dr. Ritchie had the floor. Are you through, Dr. Ritchie? Before we proceed, I imagine Dr. Chapman has an answer to give you on a special question asked by you. Dr. Chapman?

Dr. Chapman: Thank you, Mr. Chairman. Yes.

The question asked by Dr. Ritchie related to the number of professional staff with training in pharmacology. I should point out that there is no university in Canada that I am aware of that grants an honours degree in pharmacology, so that this relates to advanced training. With the exception of two or three they are all trained to the doctorate level. Pharmacology: Assistant Director General (Drugs) 1; Research Laboratories 8; Drug Advisory Bureau 7; Total 16.

Then I would like to give you the numbers where the granting department was other than pharmacology, but where pharmacology formed a significant portion of their training. Biochemistry: Research Laboratories 7; Drug advisory bureau 3; Total 10. Physiology: Re-

[Interpretation]

M. Rynard: C'est exactement ce que je voulais faire inscrire au compte rendu. Mais combien de ces membres appartenaient à la Commission Harley?

Le président: Nous pourrions vous donner la liste si vous voulez l'obtenir.

M. Rynard: C'est ce que nous voulons.

Le président: Je vais vous donner la liste des membres du Comité qui sont allés à Montréal, le 28 mai 1964:

MM. Harley, Asselin (Richmond-Wolfe), Côté (Longueuil), Enns, Howe (Hamilton-sud), Mackasey, Marcoux, Mitchell, Prud'homme, Rynard, Whelan, Willoughby.

Pearl River (N.Y.) le 7 juillet 1964:

MM. Armstrong, Gauthier, Harley, Mackasey, Mitchell, Prud'homme, Whelan, Willoughby.

Cela vous satisfait?

M. Rock: Ils sont allés à New-York? C'est bien ce que vous avez dit?

Le président: Pearl River, New York; pas Pearl Harbor, Pearl River.

M. Rock: Je croyais que c'était les Aliments et Drogues, et non la Commission Harley.

Le président: C'était le Comité spécial Harley sur les aliments et les drogues. Lorsque nous avons ajourné la séance, le docteur Ritchie avait la parole. Avant d'aller plus loin, je crois que le D^r Chapman doit vous donner une réponse sur une question spéciale que vous avez posée. Docteur Chapman, vous avez la parole.

M. Chapman: Merci, monsieur le président. La question posée par le docteur Ritchie portait sur le nombre de personnel spécialisé possédant une formation en pharmacologie. Il n'y a pas au Canada une université qui donne un cours spécial de pharmacologie et il s'agit donc de formation avancée. Ce sont tous des gens qui ont un doctorat, à l'exception de deux ou trois. En pharmacologie: Directeur général adjoint (drogues) 1; laboratoires de recherches, 8; bureau de consultation (drogues) 7; soit 16 personnes.

Je voudrais maintenant vous donner le nombre de personnes qui ont un diplôme autre qu'en pharmacologie, mais dont la majeure partie de leurs études concernait la pharmacologie: laboratoires de recherches, 7; Bureau consultatif (drogues), 3; soit 10 per-

[Texte]

search Laboratories 4; Drug advisory bureau 1; Total 5. Medicine: Deputy Director-General 1; Research laboratory 1; Drug advisory bureau 16; Total 18. Doctorate in veterinary medicine: Research Laboratory 3; Drug advisory bureau 17; Total 20.

I believe that advanced training of professional staff applies in the case of 69 of our personnel.

Mr. Ritchie: Mr. Chairman, Dr. Chapman, are these 69 all medical doctors apart from the veterinary people?

Dr. Chapman: No, sir. These are Ph.D.s, M.D.s, and D.V.M.s.

Mr. Ritchie: Could you tell me the number of M.D.s approximately?

Dr. Chapman: Yes, exactly. There are 18 M.D.s.

The Chairman: Does that satisfy you, Dr. Ritchie? Are there any other questions?

Mr. Ritchie: Yes, I want to pursue this. When we finished, Dr. Chapman told us that it would be impossible to have new products, as he said, to submit proof of performance in human patients before they are permitted to market them because of the tremendous expense involved and I quite agree that this is possible. However, Dr. Chapman, would you not agree that this, if possible, would be very desirable?

Dr. Chapman: Mr. Chairman, I feel that it would be desirable to require such tests in those cases where there was an indication that the drug might not be clinically effective. I think, however, that it would be impractical and completely unjustifiable to insist that all new products or any new product coming on the market should be tested clinically. In this case even such products as ASA tablets would have to be tested clinically, if you required that all new products coming on the market should be tested in this manner. I think you will agree that you would just not be able to find the physicians, qualified investigators, to do this type of investigation.

• 1555

Mr. Ritchie: Mr. Chairman, I want to ask Dr. Chapman, then, if it would be possible to have any selective group, say the antibiotics, the cortisones, those which, if poor, in a given situation may be disastrous.

[Interprétation]

sonnes. Physiologie: laboratoires de recherches, 4; Bureau consultatif (drogues), 1; soit 5 personnes. Médecine: directeur général adjoint, 1; laboratoires de recherches, 1; Bureau consultatif (drogues), 16 personnes; soit un total de 18. Médecine vétérinaire: laboratoires de recherches, 3; Bureau consultatif (drogues), 17; soit 20 personnes. Et je crois que le total des personnes qui ont reçu une formation professionnelle avancée atteint 69 personnes.

M. Ritchie: Ce sont tous des médecins à part les vétérinaires?

M. Chapman: Non. Il y a des gens qui ont un Ph.D., un doctorat en médecine et un doctorat en médecine vétérinaire.

M. Ritchie: Pourriez-vous me dire combien il y a de médecins?

M. Chapman: 18 exactement.

Le président: Êtes-vous satisfait, docteur Ritchie? Y a-t-il d'autres questions?

M. Ritchie: Lorsque nous avons terminé la réunion, le docteur nous a dit qu'il était impossible d'obtenir que des nouveaux produits soient mis en marché avant qu'ils ne soient dûment éprouvés, ce qui cause des dépenses considérables. J'admets que c'est possible. Mais, docteur Chapman, ne croyez-vous pas que si c'est possible, ce serait tout à fait souhaitable?

M. Chapman: Monsieur le président, je crois que ce serait souhaitable que d'exiger ces essais, ces tentatives lorsqu'il y a une possibilité que le produit pharmaceutique ne soit pas efficace. Je crois toutefois qu'il ne serait pas pratique et tout à fait injustifié que d'exiger que tous les nouveaux produits mis sur le marché fassent l'objet d'une étude clinique. A ce moment-là, des produits tels que les tablettes ASA par exemple, devraient faire l'objet d'une étude clinique si l'on doit exiger que tous les nouveaux produits mis sur le marché fassent l'objet d'une telle étude. Et à ce moment-là, il ne serait plus possible de trouver le personnel qualifié requis pour faire ce genre d'enquête.

M. Ritchie: Je vais maintenant demander au docteur Chapman s'il serait possible d'entreprendre des études sur certains produits particuliers tels que les antibiotiques, l'hydrocortisone, produits qui, s'ils sont de mauvaise qualité, peuvent avoir de graves conséquences.

[Text]

Dr. Chapman: It would be difficult, I believe, Mr. Chairman, to require this by regulation. However, we are already looking at those groups of drugs which might present a problem in this regard. Those are the drugs which would be insoluble as compared to most products, or only "difficultly" soluble, and those drugs which might be lifesaving. We can select these groups and we are looking at these products at the present time, examining them to determine what specific drugs might present a problem from the point of view of clinical effectiveness and biological availability.

Mr. Ritchie: Mr. Chairman, may I suggest to Dr. Chapman that in the final analysis immediate application depends, if you will agree, on the physician; that is the physician must make the decision as to what drug he will use in a given situation. The Food and Drug Directorate cannot decide that for him. How do you overcome the physician's reluctance to substitute a drug which, as a new drug, has been proven and use in its place a generic drug which is cheaper, presumably cheaper—the main reason for using it—when all the Food and Drug Directorate can tell him is that it seems to come up to standards but they cannot really prove that it has done what the new drug has done. How do you overcome this reluctance?

Dr. Chapman: Mr. Chairman, it was the recommendation of the Harley Committee to publish a monthly bulletin to all physicians, pharmacists, dentists and hospital personnel in Canada, giving them detailed information in regard to the action of the drug, the last assay of the drug and a number of other factors including the therapeutic action, the side-effects of the drug, contra-indications and toxicity, the last assay of each company's product of content and availability of active ingredients, solubility and disintegration and, I would add to that, dissolution rate, because this is a new technique that has been developed within the last several years which I think will be very helpful in picking out any drugs that might be a problem; and finally any problems with any company's products such as toxicity, impurities, seizure, court actions, failure to meet standards, and so on.

This is the type of information that we propose to include in the drug information bulletin, and hopefully this will provide physicians with the necessary confidence in additional products.

Mr. Ritchie: Mr. Chairman, I realize there are other people who wish to ask questions, but I have a few more questions for the Commissioner of Patents, if I may ask them.

[Interpretation]

M. Chapman: Ce serait difficile d'exiger cela au moyen d'un règlement. Toutefois, nous étudions déjà ces catégories de produits qui peuvent poser des problèmes. En l'occurrence, je songe aux produits qui sont insolubles, par opposition à la plupart des produits, ou qui sont à peine solubles, et ces produits qui peuvent sauver la vie. On peut choisir ces groupes et les étudier en détail. On peut les examiner afin de déterminer quels produits spécifiques peuvent poser des problèmes au point de vue des effets cliniques et de la disponibilité biologique.

M. Ritchie: Monsieur le président, puis-je dire au docteur Chapman qu'en dernière analyse, l'utilisation immédiate dépend du médecin. C'est le médecin qui doit décider quel produit il va utiliser dans tel ou tel cas. Ce n'est pas le Directeur des aliments et des drogues qui peut le faire pour lui. Et comment peut-on convaincre un médecin d'utiliser un médicament aux termes génériques meilleur marché, plutôt qu'un médicament nouveau qui a fait ses preuves. Comment le Directeur des Aliments et des drogues peut-il dire que les deux produits sont à peu près équivalents mais que ce n'est pas prouvé? Comment peut-on arriver à surmonter ces hésitations?

M. Chapman: Monsieur le président, le Comité Harley a recommandé la publication d'un bulletin mensuel destiné à tous les médecins, pharmaciens, dentistes, et au personnel hospitalier d'un bout à l'autre du Canada qui leur donnerait des renseignements au sujet des effets des médicaments, y compris l'aspect thérapeutique, les effets secondaires et toxiques, le contenu, les éléments actifs, la solubilité, la désintégration. Et j'ajouterais à cela la rapidité de dissolution, car c'est une nouvelle technique qui est utilisée depuis quelques années. Je crois que cela permettra de dépister les produits pharmaceutiques qui peuvent causer des problèmes, et également tous les problèmes qui peuvent surgir, tels la toxicité, l'impureté, les saisies, les procédures judiciaires, le non-respect des normes, etc.

Voilà donc les renseignements que nous voulons inclure dans cette brochure. Nous espérons que ceci permettra de créer la confiance nécessaire dans le nouveau produit.

M. Ritchie: Si d'autres personnes ont des questions à poser, je ne veux pas monopoliser l'attention. Il y a cependant la question des marques de commerce.

[Texte]

• 1600

[Interprétation]

Mr. Basford: I omitted to point out to you this morning, Dr. Ritchie, that we had with us this morning, and again this afternoon, Mr. Archie Laidlaw, the Commissioner of Patents, as part of our group.

Mr. Ritchie: Mr. Chairman, I want to ask Mr. Laidlaw how he arrives—I presume he is the one who sets it; correct me if I am wrong—at a compulsory licence; that is, the royalty of such.

Mr. A. M. Laidlaw (Commissioner of Patents, Department of Consumer and Corporate Affairs): I find that question rather difficult to answer at the moment, because...

Mr. Basford: Excuse me, Mr. Laidlaw. If we are getting into detailed consideration of the bill clause by clause, that is fine. This question would relate precisely to that sort of discussion clause by clause and if that is where we are going I welcome that. It actually is a subclause further on in Clause 1.

Mr. Ritchie: It may not be applicable to the Clause. I would like to ask whether you have looked at the royalties paid by the British government in their approach to this problem which I understand they met many years ago?

Mr. Laidlaw: Mr. Chairman, I was at the United Kingdom patent office about eight weeks ago and spent a day there inquiring into their particular method of how the controller of patents in the United Kingdom makes his decisions with respect to royalty payments. Their system—the way they measure the amount of royalty that is awarded—is different from what has heretofore been done in Canada because their legislation is different. The legislation in Canada under Section 41 as it stands now has not been changed, and it has been tested in the courts and we cannot possibly compare the awarding of royalties in the United Kingdom with the present method in Canada because of the actual difference in the particular legislation.

It happens by coincidence that the United Kingdom legislation with respect to compulsory licensing happens also to be Section 41, but the actual drafting of that statute is quite different from ours.

Mr. Ritchie: Therefore, your study there would indicate it will be of no assistance in arriving at royalties, which is a bone of contention?

Mr. Laidlaw: That is quite correct, Doctor.

M. Basford: Nous avions avec nous, ce matin et nous avons parmi nous cet après-midi également M. A. M. Laidlaw, le commissaire des marques de commerce, qui fait partie de notre groupe.

M. Ritchie: Monsieur le président, je vais demander à M. Laidlaw comment il peut établir un permis obligatoire, et les redevances qui s'en suivent.

M. Laidlaw (Commissaire des brevets, ministère de la Consommation et des Corporations): Monsieur le président, je trouve qu'il est assez difficile de répondre à cette question pour le moment.

M. Basford: Je vous prie de m'excuser, mais si nous voulons étudier le bill article par article, je suis d'accord. Cette question porte essentiellement sur ce genre de sujet. Si j'en conclus que c'est la façon dont vous voulez procéder, je suis d'accord. Il s'agit d'un alinéa de l'article 1.

M. Ritchie: Ceci ne s'applique peut-être pas à cet article. Je voudrais demander au président s'il a étudié la question des redevances qui ont été payées par le gouvernement britannique, lorsqu'il a été obligé d'aborder cette question il y a quelques années.

M. Laidlaw: Monsieur le président, je suis allé au bureau des marques de commerce du Royaume-Uni, il y a environ huit semaines et j'ai tenté pendant une journée de me renseigner sur la façon dont le contrôleur des marques de commerce prend ses décisions quant au paiement des redevances. La façon de calculer le paiement est différente de celle qui est adoptée au Canada, car les lois sont différentes. La loi, telle qu'elle existe au Canada en vertu de l'article 41, n'a pas été modifiée. Elle a été appliquée devant les tribunaux. Nous ne pouvons donc pas comparer la façon d'accorder les redevances employée au Royaume-Uni et la méthode qui existe présentement au Canada à cause de la différence réelle des lois pertinentes.

C'est une coïncidence qu'au Royaume-Uni on a adopté une mesure législative semblable à celle de l'article 41 en ce qui concerne les brevets obligatoires mais la définition réelle des statuts est bien différent de la nôtre.

M. Ritchie: Vous croyez donc que votre étude là-bas indique qu'elle ne nous est d'aucune aide quant aux redevances, qui, au fait, sont notre véritable pomme de discorde.

M. Laidlaw: C'est exact, docteur.

[Text]

Mrs. MacInnis (Vancouver-Kingsway): Mr. Chairman, I have been sitting here very patiently listening since morning, and while I think we have had a good deal of useful information I believe we are losing sight of the purpose of the Bill. You see, in the House we gave second reading to this Bill which, in general, approved of the purpose of the Bill, which is to bring down the cost of drugs to the consumer.

Now, today I have not heard anything very much about this Bill itself or about the problem of bringing down the cost of drugs to the consumer. We have heard a great deal from people who have been representing the interests, particularly, of these big manufacturing companies whose profits have been twice the rate of manufacturing profits generally in industry and we have not heard very much about the plight of the chronically ill and the elderly.

Mr. Rock: I take exception to that, Mr. Chairman ...

Mrs. MacInnis (Vancouver-Kingsway): Just let me speak, if you please. I am a member of the Committee and this is the first chance I have had to say a word all day and I am going to say it with the permission of the Committee and the Chairman.

Mr. Rock: I have the right, too, to be here.

Mrs. MacInnis (Vancouver-Kingsway): I want to say just very briefly that I have been receiving letters from consumers, elderly and ill, who are just very anxious to have something done about this. We have had a great deal of talk this morning about the statistics and facts and figures of the drug companies.

I want to say that from the same lady who wrote to me and whose story I put on the record of the House when I spoke the other day, who paid first of all \$12 for 500 pills of quinidine sulfate for heart trouble and who told me that within a very short space the price had gone up to \$65.25, I received a much more recent letter—this morning, in fact—saying that before she finally went back in despair to her doctor and asked him for another kind of drug, the price of those 500 pills went up to \$97.50. Consequently, I am not so particularly concerned about protecting the drug manufacturers' profits when they have this big cushion that has been outlined.

● 1605

Now, the purpose of this Bill—and I am anxious to get down to it, Mr. Chairman—is to bring down the price of drugs. The House

[Interpretation]

Mme MacInnis (Vancouver-Kingsway): Monsieur le président, je suis assise, bien patiemment depuis ce matin écoutant les divers propos. Même si je trouve que nous avons entendu de nombreux commentaires valables, je crois que nous sommes en train de perdre de vue le projet de loi. A la Chambre, nous avons adopté ce bill en deuxième lecture. Nous avons approuvé de façon générale que le but du bill porte essentiellement sur l'abaissement du prix de détail des médicaments.

Toutefois, aujourd'hui, on ne semble pas avoir tellement parlé du bill ou de l'abaissement du prix que doivent payer les consommateurs. Nous avons beaucoup entendu parler des intérêts des grands fabricants qui réalisent des profits qui sont deux fois plus élevés que ceux de la plupart des industries, mais nous n'avons pas souvent entendu parler de la triste condition des malades chroniques et des personnes âgées.

M. Rock: Je m'oppose à...

Mme MacInnis (Vancouver-Kingsway): Veuillez me laisser parler s'il vous plaît. Je suis membre de ce Comité et c'est la première fois que j'ai la chance de parler aujourd'hui et j'ai l'intention de parler, avec la permission du Comité et du président.

M. Rock: J'ai aussi le droit d'être là.

Mme MacInnis (Vancouver-Kingsway): Je veux dire brièvement que j'ai reçu des lettres de la part de consommateurs âgés et malades qui veulent absolument qu'on agisse à ce sujet. Nous avons parlé longuement ce matin de statistiques, de faits, de chiffres, présentés par les compagnies pharmaceutiques.

Je veux vous parler de la même malade qui m'a déjà écrit et dont j'ai déposé le témoignage devant ce Comité l'autre jour. Elle a payé douze dollars pour obtenir 500 pilules de sulfate de quinidine pour des troubles cardiaques dont le prix, dans un délai très court, est monté à \$65.25. J'ai reçu une lettre de la même personne ce matin. Elle a dû se rendre chez son médecin en désespoir de cause et lui demander une ordonnance pour un autre produit. Le prix de son médicament habituel ayant passé à \$97.50. En conséquence, je ne m'intéresse pas tellement à protéger les profits des fabricants de produits pharmaceutiques, qui ont de telles marges de profit.

Le but de ce projet de loi, et j'ai hâte d'arriver à cette question, est de faire baisser le prix des médicaments. La Chambre des

[Texte]

of Commons has already said that we are in favour of this by majority vote. I realize that there are a great many new members on this Committee who have not had the opportunity of going through the evidence of the Harley Committee. We have managed in the steering committee to see that they got the report.

One thing that I want to ask you, Mr. Chairman, is whether or not it would be possible to make available to those Committee members who have not had the chance of reading the evidence before the Harley Committee to get that evidence, because so much of the discussion today stems from the fact that the members are not familiar with the evidence in the Harley hearings or even in the report.

Now, I do not think we should waste the time of the Committee any further in going into matters that have been gone over for eight years by committees, commissions inquiries. I have not heard anybody yet in this Committee say, "This is a lie" or "These facts are incorrect". I have heard no challengers. The Minister has brought the salient facts up to date and for my part I think what we ought to do now is to realize that what the House of Commons gave us to do was this Bill, clause by clause.

Certainly we have given second reading to it again today, or we should have, right here because we have gone all over a general debate and I for one, Mr. Chairman, would like to see us get down to a consideration of the clause by clause and I would like to see it confined to clauses instead of continuing to wander all over the lot, because we have had lots of discussion on that.

I would urgently suggest that we get down to it clause by clause and that we do not any more go into these individual drugs, and its and pieces. The consumers are waiting for action now and we have had plenty of act-finding over the years.

The Chairman: Thank you, Mrs. MacInnis.

Mrs. MacInnis (Vancouver-Kingsway): Could you answer my question, though? Could we get the evidence during the Committee for those members who would like to go through it and become familiar with it?

The Chairman: I think this report is available to any member at the library here, and I believe those who are really interested in knowing what has been going on for eight years should read. Before adjourning the last meeting I said those who like to read before going to bed should try to get a copy and read the thing. It will not take very long; five

[Interprétation]

communes a déjà démontré que nous sommes en majorité en faveur de cette mesure. Je me rends compte que beaucoup de nouveaux membres du Comité n'ont pas eu l'occasion d'étudier les témoignages de la Commission Harley. Nous avons fait en sorte au Comité directeur, qu'ils puissent obtenir ce document.

Je veux vous demander une chose, monsieur le président, s'il serait possible oui ou non, de permettre aux députés qui n'ont pas eu la chance de prendre connaissance de ce témoignage, de le faire car la plupart des discussions qui surgissent aujourd'hui proviennent du fait que les membres du Comité ne connaissent pas la nature des recommandations du rapport Harley.

Je ne crois pas qu'il faut perdre le temps du Comité plus longtemps à étudier de nouveau des questions qui ont été à l'étude par des comités, des commissions et des enquêtes depuis 8 ans. Personne au Comité n'a encore déclaré: «Ceci n'est pas vrai» ou «ces faits ne sont pas exacts». Il n'y a pas eu de contestation. Le ministre a apporté les derniers faits saillants. Pour ma part, je crois que ce qu'il faut faire aujourd'hui, c'est de se rendre compte du travail qui nous a été confié par la Chambre, celui d'étudier la loi article par article.

Nous avons adopté le bill en deuxième lecture aujourd'hui, ou nous devrions avoir terminé, car nous nous sommes perdus dans un débat général et je crois, pour ma part, monsieur le président, qu'il faudrait aborder l'étude du bill article par article, et de ne faire que ça. Au lieu de continuer à parler de toute cette situation générale, je demande instamment de passer à l'étude du bill article par article. Il n'est pas utile de passer en revue ces médicaments, un à un, morceau par morceau. Les consommateurs attendent désormais une action.

Le président: Merci madame.

Mme MacInnis (Vancouver-Kingsway): Voulez-vous répondre à ma question? Est-il possible d'obtenir un exemplaire des témoignages pour les membres du comité qui le désirent?

Le président: Je crois que tout député qui veut consulter ce rapport, peut se rendre à la bibliothèque. Je crois que ceux qui sont réellement intéressés de connaître ce qui s'est poursuivi depuis 8 ans, n'ont qu'à le lire. Avant d'ajourner pour la dernière fois, il me semble que ceux qui aiment lire au lit devraient se procurer le rapport. En 5 ou 6

[Text]

or six hours if you are intelligent and if you are not it is not worth reading.

Mr. Rynard: I want to ask a question of Mrs. MacInnis. I wonder if you could put us straight on the question of quinine derivatives and whether we could have got it cheaper anywhere in the world due to the situation in Viet Nam? I just want to be very fair so that all of the points are brought out as far as I know them. This is one I would like you to put straight on the record.

Mrs. MacInnis (Vancouver-Kingsway): It can now be got cheaper, I understand, because the monopoly cartel has been broken, but if you think that was my only example, Mr. Chairman, I would like to give you one more.

An old gentleman in my riding who is living in one of the low-cost housing projects wrote to me just before Christmas about Pro-Banthine pills at drugstores in Vancouver at \$10 a hundred, with one exception. There is one drugstore there, the London Drugs, Ltd., that is trying to break the monopoly and sells them at \$2.98 for 50 pills. This is an old gentleman; an old New Brunswicker, to begin with. His letter reads, in part:

I am supposed to take 4 a day, but I manage on two a day. My Doctor gives me some samples once in a while, so it helps. If I went to the Old Age...

that is the Old Age Assistance, ... on Dunmuir Street I could get free drugs. But my old lady would not hear of such a thing. We (have) been married 54 years last 5th of this month and we have never been on welfare and we are not going to start now...

I have another letter here from somebody who says, if only they could come in under some of the drug insurance schemes, but they cannot pay the \$5 a month to come in under those schemes.

These are the people I think we should be concerned about in this Committee. I am not pinning everything to the quinidine sulfate situation; that monopoly is broken now, but there are other monopolies that I am concerned about and I could dig out some more of them. I just took the worst one I had but I have some others.

The Chairman: Have I answered your question, Mrs. MacInnis?

Mrs. MacInnis (Vancouver-Kingsway): I guess...

The Chairman: Partly, or...

[Interpretation]

heures, si vous êtes intelligents vous devriez avoir une bonne connaissance de la situation, et si vous ne l'êtes pas, cela ne vaut pas la peine de le lire.

M. Rynard: J'aimerais poser une question à madame MacInnis. Pour ce qui est de la quinine et de ses dérivatifs, qu'en est-il exactement? Pouvons-nous l'obtenir à meilleur marché dans le monde quand je songe par exemple à ce qui se passe au Vietnam? C'est un sujet que j'aimerais voir abordé. J'aimerais qu'il figure au procès-verbal.

Mme MacInnis (Vancouver-Kingsway): Je crois qu'on peut maintenant l'avoir à un prix moins élevé, car il semble que le cartel a été brisé. Mais si vous croyez que c'est mon seul exemple, monsieur le président, je vais vous en donner un autre.

Il y a un vieux monsieur dans ma circonscription qui habite une maison à prix modique, qui m'a écrit juste avant Noël que des pilules pro-banthine se vendaient \$10 pour cent pilules avant Noël, dans les pharmacies de Vancouver. A l'exception d'une pharmacie qui essaie de briser ce monopole et qui le vend \$2.98 les 50 pilules. Il s'agit du London Drugs Ltd. Il y a ce vieux monsieur du Nouveau-Brunswick qui m'écrit:

Je devrais prendre 4 pilules par jour mais je n'en prends que 2 par jour. Mon médecin me donne parfois quelque échantillon pour m'aider. Si je vais à l'Assistance... de la rue Dunmuir, j peux obtenir des médicaments gratuitement mais ma femme ne veut pas entendre parler. Nous sommes mariés depuis 54 ans et nous n'avons jamais été sous l'assistance sociale et nous n'allons pas commencer maintenant.

J'ai ici une autre lettre en main qui m'a été envoyée par une personne qui voulait profiter d'une sorte d'assurance-médicaments mais cette personne ne peut pas payer \$5 par mois pour profiter de cette assurance. Ce sont des gens auxquels on devrait penser dans le comité. Je ne ramène pas tout au problème du sulfate de quinidine. Ce monopole est brisé maintenant, mais il y en a d'autres monopoles qui me préoccupent, et je peux vous en citer encore d'autres.

Le président: Ai-je répondu à votre question madame?

Mme MacInnis (Vancouver Kingsway): J pense...

Le président: Partiellement ou...

[Texte]

• 1610

Mrs. MacInnis (Vancouver-Kingsway): Well, would there be individual sets of evidence still available for members?

The Chairman: We do not know yet but we can inquire about it.

Just a minute, gentlemen. Before we go any further, as I said this morning I think we are getting a little lost in this matter. It is my belief that the Chairman has been lenient in this matter and I think that we have heard about all the discussions related to the Bill. The bill is divided into three points: it is An Act to Amend the Patent Act, the Trade Marks Act and the Food and Drugs Act.

I believe we should start discussing clause by clause, because we have the opportunity of having the Commissioner of Patents with us here this afternoon and all the questions relating to licences are on the first one. I think we have heard enough. I may let one or two short questions be asked of the Minister, then after that we should proceed clause by clause. Mr. Fortin?

Monsieur Fortin.

M. Fortin: Monsieur le président, sauf le respect que je vous dois, je ne crois pas du tout que nous devions étudier immédiatement le bill C-102 article par article, et mes raisons sont très simples.

La première, c'est que, élu seulement depuis le 25 juin dernier, je n'ai pas eu la chance, comme d'autres membres, d'étudier en profondeur cette question et de faire certaines visites industrielles ou autres. De la sorte, monsieur le président, si je veux que ma participation soit positive, dans l'adoption de ce bill en comité, de même qu'en Chambre, je crois avoir le temps de l'approfondir.

Je sais que le temps nous manque, et avant de dormir le soir, je prends deux heures pour l'étudier. Mais c'est insuffisant, monsieur le président, et il me manque des renseignements pour vraiment m'engager dans cette discussion pour ou contre.

La deuxième raison c'est que, au cours de son discours d'introduction, au Comité, et au cours des discussions du comité, le ministre a fait certaines affirmations comme il en a été fait ce matin concernant l'industrie pharmaceutique; affirmations qui contredisent d'une certaine façon les chiffres, les statistiques et les rapports que nous recevons tous les jours au bureau, et qu'on a cités d'ailleurs ce matin.

C'est une autre raison pour moi, monsieur le président, de craindre d'étudier immédiatement le Bill.

[Interprétation]

Mme MacInnis: Y a-t-il des exemplaires disponibles pour les membres du comité?

Le président: Je n'en sais rien, mais nous pouvons nous en informer. Un moment, s'il vous plaît, messieurs, avant de continuer, comme je l'ai dit ce matin, je crois que nous risquons de nous perdre. Je crois que le président a été très souple à ce sujet en ce qui concerne le bill. Le bill est divisé en trois. Il s'agit de modifier la *Loi sur les brevets*, la *Loi sur les marques de commerce* et la *Loi sur les aliments et drogues*.

Je crois que nous devrions entreprendre l'étude article par article, puisque nous avons, avec nous, le Commissaire aux brevets et que toutes ces questions concernant les licences relèvent du premier article. Je permettrai qu'une ou deux brèves questions soient posées au ministre, puis nous procéderons article par article.

Mr. Fortin.

Mr. Fortin: Mr. Chairman, with all due respect, I am not of the opinion that we were supposed to go immediately into clause by clause consideration of Bill C-102. My reasons are quite simple. First, as I was elected on June 25 last and am a new member here, I did not have the occasion, as other members have had, to study thoroughly this question and to visit various manufacturers and plants. So, if I want my participation to be a positive one, in the adoption pass this bill in Committee, and also in the House, I think I should have the time to study this bill thoroughly.

I know that we do not have enough time and I spend two hours in the evening, before going to sleep, to study it. But this is still insufficient and I lack information to really be able to participate in this discussion, whether for or against.

My second reason is that the Minister has made an opening speech, in the Committee, and during the discussions, concerning the pharmaceutical industry. And these statements contradict to some extent the figures, statistics and reports that we receive daily in our offices and which we quoted this morning.

That is another reason, Mr. Chairman, why I am not anxious to consider the bill immediately. We had a brief from the Pharmaceuti-

[Text]

Le mémoire présenté par l'Association Canadienne des Fabricants en Pharmacie contredit quelque peu les chiffres avancés par le ministre.

Le président: Avant d'aller plus loin, vous savez que l'Association Canadienne des Fabricants en Pharmacie a retiré sa demande de paraître devant nous.

Étiez-vous ici ce matin, monsieur?

M. Fortin: Ce matin, monsieur le président, je participais aux travaux d'un autre comité; c'est désolant, mais c'est le système parlementaire qui veut qu'on nous présente deux comités en même temps, alors qu'il est impossible d'être à deux places en même temps.

Je prends note de votre mise au point, mais il reste, monsieur le président, que je ne suis pas du tout prêt à étudier le Bill et je ne suis pas le seul.

De plus, monsieur le président, j'aimerais inviter certains témoins, des docteurs en la matière, et qui pourraient nous renseigner.

Et le quatrième point que je voulais soulever, c'est le marché québécois. Lorsque je consulte des statistiques à ce sujet, je ne suis pas du tout sûr que le bill proposé par le ministre va aider l'industrie pharmaceutique québécoise, et c'est ce qui me touche particulièrement comme Québécois.

Aussi longtemps que je n'aurai pas la certitude que le bill pourra apporter quelque chose de positif, de favorable à l'industrie québécoise, monsieur le président, je demanderai que vous ne preniez pas la décision d'étudier le bill article par article tant et aussi longtemps que le comité directeur ne se sera pas réuni pour en décider.

• 1615

Le président: Monsieur Guilbault.

M. Guilbault: Monsieur le président, j'aimerais exprimer mon opinion au sujet de la discussion en cours, à savoir si nous allons étudier le Bill clause article par article maintenant, ou continuer plus longtemps à discuter de la teneur générale du bill.

Je diffère d'opinion avec l'orateur qui m'a précédé, car je pense que les discussions générales sur le Bill ne peuvent nous amener qu'à une question: le bill est-il bon, faut-il réduire le coût des médicaments? Le rapport Harley que nous avons devant nous, qui a été étudié durant de nombreuses années, nous donne une idée claire. Je suis ingénieur et non savant ou pharmacien, et je ne pense pas avoir tous les renseignements nécessaires pour évaluer ce rapport.

[Interpretation]

cal Manufacturers Association of Canada which somewhat contradicts the Minister's figures.

The Chairman: Before going any further, you know that this Association has withdrawn its request to testify here. Were you here this morning, sir?

Mr. Fortin: This morning, Mr. Chairman, I attended a committee that was sitting at the same time as yours. This is distressing, but it is the parliamentary system that requires that we have two committees at the same time while it is impossible to be in two places at once.

I note your intervention but nevertheless, Mr. Chairman, I am not at all ready to consider this bill and I believe that I am not the only one.

Moreover, Mr. Chairman, I would like to invite certain witnesses, doctors, who know very well this field of activity and who could give us information.

The fourth point which I wanted to raise is the Quebec market. When checking statistics, on this matter, I am not at all sure that the bill proposed by the Minister will really help the pharmaceutical industry in Quebec, and I am particularly interested in this as a Quebecker.

As long as I will not have the certainty that the bill will give something positive and advantageous to the Quebec industry, I believe, Mr. Chairman, that we should not decide to consider the bill clause by clause until the Steering Committee will have had a meeting to decide on this.

The Chairman: Mr. Guilbault.

Mr. Guilbault: Mr. Chairman, I should like to give my own opinion on what we are discussing namely whether we will proceed now to consideration of the bill, clause by clause, or if we shall further continue to discuss the general contents of the bill.

My point of view differs from that of the speaker who has just preceded me, because I think that to discuss the general contents of the bill will only lead to the following question: is the bill sound, should the cost of drugs be reduced? The Harley Report that we have in front of us, which represents a sum of work of several years gives us a clear idea. Being myself an engineer and not a pharmacist, I do not believe that I have all the necessary information to evaluate the report.

[Texte]

Cependant, je fais confiance à ceux qui ont siégé à ce comité et qui, ayant ramassé des preuves, nous disent que le prix des médicaments est trop élevé. Je me demande si, en continuant à faire des considérations générales, nous en arriverons à trancher le problème.

Je crois qu'il est temps, dès maintenant, de passer à l'étude du Bill article par article. Ce faisant, nous n'empêcherons personne de se renseigner, parce qu'à l'étude de chaque article, chacun pourra poser des questions et on pourra se renseigner. Nous avons ici tous les experts qui peuvent nous aider.

Aussi, monsieur le président, je propose que nous passions immédiatement à l'étude du Bill article par article.

Mr. Forget: J'appuie cette proposition.

M. Fortin: Monsieur le président, je demande un vote sur cette question-là, parce que je ne partage pas, comme je l'ai dit tantôt, cette opinion. Si le ministre peut amener des témoins qui favorisent la teneur du Bill, je peux en amener qui ne sont pas d'accord.

Monsieur le président, je répète la remarque que j'ai faite plus tôt. La décision d'inviter d'autres témoins doit relever du comité directeur et non pas du présent comité.

Le président: Cette question est réglée, monsieur; nous allons étudier, à une prochaine réunion du Comité directeur, cette proposition faite hier.

De plus, une résolution a été soumise à l'attention du comité. A l'article 3, le Comité directeur dit que nous n'entendrons pas l'autres témoins, sauf si des évidences nouvelles peuvent être présentées, s'il peut être prouvé que des évidences différentes de celles qui ont déjà été présentées devant le Comité.

Alors voilà de quoi le sous-comité est saisi, et je pense que demain après-midi, nous pourrions tenir une réunion pour en discuter.

One thing I must point out also is that it is the Bill that has been referred to us. It is not the subject matter of the Bill, it is the Bill itself and the Bill itself is not the Harley Report, it is only a few recommendations arising from the Committee Report. If you look at Clause 1 you will see it is on the Patent Act, and on Patent Act you could ask all the questions you want on this matter because we have, as I said, the Commissioner here with us today.

If this is to bring endless debate, well, I do not know what is going to happen, but if it is the intention of the Committee to drag and

[Interprétation]

However, I have confidence in the people who have sat on this Committee and who, having collected evidence, tell us that the price of drugs is too high. I do not believe that we will solve the problem by general considerations.

I believe we should now get on with the clause by clause consideration of the bill, and we will not stop anybody from getting information. We will be able to put questions, when considering each clause. We have here all the witnesses, the experts who will be able to help us.

Furthermore, Mr. Chairman, I would propose that we go immediately on with the consideration of the bill, clause by clause.

Mr. Forget: I second this proposal.

Mr. Fortin: Mr. Chairman, I would like to have a vote on this question, because as I said earlier, I do not share this opinion. If the Minister will bring us witnesses who are in favour of the contents of the bill, I can bring witnesses who do not agree.

I am repeating what I said previously, Mr. Chairman. The decision whether we should invite other witnesses must be the responsibility of the Steering Committee and not of this Committee.

The Chairman: This question has been solved. We shall consider the proposal that was made yesterday at the next meeting of the Steering Committee.

We also have a motion what was brought forward to the attention of the Committee. Regarding clause 3, the Steering Committee says that we shall not hear any new witnesses, except if the new evidence can be put forward besides the evidence which we already have.

This is the question that is now before the subcommittee, and I think that we shall be able to have a meeting tomorrow afternoon to discuss it.

Il est une autre chose que je dois signaler, c'est le bill qui nous a été déferé, et non pas la quintessence du bill. Le bill n'est pas le rapport Harley, mais il comporte certaines recommandations du rapport. Si vous consultez l'article 1, vous verrez qu'il y est question de la Loi sur les brevets. Vous pouvez poser toutes les questions que vous désirez, sur ce sujet car, comme je l'ai dit plus tôt, le Commissaire aux brevets est ici.

Si le débat se prolonge, j'ignore ce qui se produira. Car si le Comité désire laisser traîner cette question en longueur, nous risquons

[Text]

drag this thing, we will be choked up with some other bills that are going to be referred to us. Therefore, I do not want to push this matter any further.

I leave it to you. I know you are men of experience. I know you are capable of doing the right thing in the right place and I think it is the right place to do the right thing here, so I believe you all have the opportunity of asking any questions on Clause 1. Yes, Mr. Robinson?

Mr. Robinson: Mr. Chairman, as a point of information, I understand that if we go through the Bill clause by clause, with the debate that would go along at that time, then there would be no further opportunity for questioning the witnesses after that.

The Chairman: No. You could always ask a question. We will proceed clause by clause, then this bill will be reported to the House of Commons, then at the House of Commons, I am told, . . .

Some hon. Members: No, no. No more. No, Mr. Chairman.

The Chairman: It is still going to go back there.

• 1620

Mr. Rynard: Mr. Chairman, I think you said yesterday that the steering committee would meet and make a decision on this. Now, you have not met and this is the point, and I do not think you can carry it as far as saying we are going on with this, we are going to carry this clause, until your steering committee has met and made the decision.

The Chairman: That is all right. You are right, sir.

Mr. Robinson: My understanding, Mr. Chairman, is that there will be an opportunity for representations to be made by other groups that wish to be heard and then the steering committee will consider this and report back.

The Chairman: That is exactly what has been said at the Steering Committee and exactly what has been said in the Committee and approved, with some reservations on the part of Dr. Rynard. We will consider those who want to make representations and these will be studied by the steering committee before coming back here.

Mr. Robinson: When will they make their representations?

[Interpretation]

de nous trouver dans une impasse parce que d'autres bills nous seront référés. Néanmoins, je vous laisse le soin de décider. Je sais que vous avez un jugement sain et que vous désirez poser le bon geste au bon moment. Vous avez, ici, l'occasion d'agir ainsi.

Je crois que vous pouvez poser toutes les questions que vous voulez poser sur l'article 1.

Monsieur Robinson.

M. Robinson: Si nous procédons à l'étude du bill, article par article, dois-je comprendre que nous n'aurons plus l'occasion de poser des questions par la suite?

Le président: Vous pourrez toujours poser des questions. Nous procéderons article par article, puis rapport sera fait aux Communes, puis, rendu là . . .

Des voix: Non, non, non.

Le président: Il finira par y retourner.

M. Rynard: Monsieur le président, je crois que vous avez dit, hier, que le comité directeur se réunira et prendra une décision à ce sujet. Vous ne vous êtes pas réunis. Je ne crois pas que vous puissiez poursuivre et que vous puissiez dire que tel article est adopté tant que le comité directeur ne se sera pas réuni pour prendre une décision.

Le président: C'est ça, vous avez raison.

M. Robinson: Je crois comprendre, monsieur le président, que les groupes qui désirent se faire entendre pourront le faire puis que le comité directeur étudiera toute la question avant de nous soumettre son rapport.

Le président: C'est exactement ce qui a été dit au comité directeur et ici, et ce qui a été approuvé. Nous étudierons, au comité directeur, cette question de ceux qui désirent faire entendre leur point de vue, puis le tout sera porté à l'attention du comité.

M. Robinson: Quand présentera-t-on les instances?

[Texte]

The Chairman: We will discuss that at the Steering Committee meeting. Are you a member of the Steering Committee?

Mr. Robinson: I am indeed. That is why I am concerned.

The Chairman: At the very beginning we asked those people who had representations to send them to the Steering Committee, or to send them to me in order that I could pass them along to the Steering Committee, and we are ready to accept them.

Mr. Robinson: One representation has been presented to me already, so I think we should meet. If the time to meet is before we study it clause-by-clause, then perhaps that is what we should do.

Mr. Rock: At first I thought it was to be verbal, Mr. Chairman, and then of course at the end it was understood you meant it to be in writing, so I will have to put it in writing this afternoon.

The Chairman: It is up to you gentlemen to decide what we should do. Do you want to adjourn or do you want to keep on asking general questions arising from the bill? If you want to keep on investigating the old system, it is up to you to decide.

Mr. Rynard: Mr. Chairman, I suggest that we go along and cover the field as much as we can without getting into a clause-by-clause discussion. You can then call the Steering Committee and come to a decision as to what you want to do. We should not take up any further time on this. The Steering Committee must make the decision about what is to be done about this problem.

Mr. Perrault: Mr. Chairman, there is a motion before this Committee, but surely a far more systematic approach to this whole piece of proposed legislation would be to go into it clause-by-clause and when we get to the specifics of it we can then call witnesses.

An hon. Member: Oh, Mr. Chairman—

Mr. Perrault: There seems to be an effort—and this may be an unfair comment—to delay action on this particular measure. There have been numerous commissions which have brought down a number of recommendations and there was a heavy majority vote on principle on second reading in the House to proceed with this legislation. It now seems that in effect we want to reestablish the Harley Committee to once again hear evidence from every conceivable direction. If we were to proceed with this generalized approach to this

[Interprétation]

Le président: Nous en discuterons au comité directeur. Êtes-vous membre du comité directeur?

M. Robinson: Je le suis. C'est pourquoi je m'y intéresse.

Le président: Dès le début, nous avons demandé à ceux qui voulaient présenter des instances, de les envoyer au comité directeur ou de me les envoyer pour que je puisse les remettre à ce comité. Nous sommes maintenant prêts à les accepter.

M. Robinson: J'ai déjà une instance devant moi et je pense que nous devrions nous réunir. Si nous devons nous réunir avant de faire l'étude article par article, nous devrions peut-être le faire.

M. Rock: Au début, monsieur le président, je croyais que c'était verbal, mais j'ai compris à la fin que vous vouliez dire par écrit. Je devrai l'écrire cet après-midi.

Le président: Messieurs, c'est à vous de décider ce qu'il faut faire. Voulez-vous que nous ajournions ou voulez-vous continuer à poser des questions de nature générale sur le Bill? Si vous voulez poursuivre vos enquêtes, c'est à vous de décider.

M. Rynard: Il faut faire autant de travail que nous pouvons sans faire une étude article par article. Ensuite, nous irons au comité directeur et nous prendrons une décision. C'est le comité directeur qui doit prendre la décision à ce sujet.

M. Perrault: Monsieur le président, il y aurait une méthode bien plus systématique d'aborder cette question: ce serait de l'étudier article par article. Quand nous arriverons aux questions spécifiques, nous pourrions entendre des témoins.

Une voix: Monsieur le président...

M. Perrault: Il semble qu'on tente de faire retarder cette mesure. Il y a diverses commissions qui ont présenté plusieurs recommandations. Il y a eu un vote très majoritaire à la deuxième lecture à la Chambre des communes. Il me semble que nous voulons ré-établir la Commission Harley. Si nous continuons de cette façon générale, nous pourrions être ici pendant des mois et des mois sans que les Canadiens puissent profiter de cette mesure.

[Text]

matter we could be here for months before any action is taken to reduce the cost of drugs in this country.

Mr. Rynard: Mr. Chairman, I have a comment to make on that. We have heard no witnesses on Bill No. C-102 whatever and this is not correct.

An hon. Member: We had to have the Minister.

Mr. Rynard: You mean right here with this Committee, but I mean outside the Committee.

Mr. Monteith: Mr. Chairman, this is the first time this Committee has been active—except in the cigarette issue—since the rules were changed. It was indicated that the changes in the rules were going to be of great assistance; there was going to be much more thorough work done in the Committee. I do not want to suggest closing off right now, but I certainly do not believe that we can go into a clause-by-clause study until we have made a decision about calling witnesses.

If we are going to call new witnesses or if we are going to look at the briefs that may be presented to us by the end of the week, this sort of thing, I do not see how we can possibly start a clause-by-clause study right now. If there is no further general discussion—I am not making a motion—I suggest that we now adjourn and meet again on Tuesday, after the Steering Committee has had an opportunity to meet and come forward with a recommendation.

• 1625

Mr. Saltsman: On this point of order, I would be quite willing—as a matter of fact, I am quite anxious—to go into a clause-by-clause examination of the bill. As I stated before, I believe there has been enough study and we have enough information to reach a decision. However, I also recognize that a decision of the Steering Committee may be reached which perhaps will indicate that we should not take a vote on each one of the clauses that are being examined. I would be quite willing to put this out as a palm branch to try to reach a reconciliation and to see if we could not continue the work of the Committee. I think it would be a very bad move to adjourn the Committee, in the light of the amount of work we have before us, while we are awaiting a decision of the Steering Committee—if that is what it is hanging on.

I wonder, Mr. Chairman, if it would be possible, because we have the officials here and we also have the Minister with us, to

[Interpretation]

M. Rynard: Monsieur le président, nous n'avons pas entendu de témoins sur le bill C-102 et ceci n'est pas normal.

Une voix: Il fallait entendre le ministre.

M. Rynard: Vous voulez dire au sein même du Comité, mais moi, je veux dire à l'extérieur.

M. Monteith: C'est la première fois que ce comité siège, sauf pour l'étude sur l'usage de la cigarette, depuis que les règlements ont été modifiés. Ces modifications du règlement devaient nous permettre de faire beaucoup plus de travail au Comité. Je ne crois pas qu'on puisse faire l'étude article par article, sans avoir régler la question des témoins.

Si nous devons entendre d'autres témoins, si nous devons étudier les mémoires qui peuvent nous être présentés d'ici la fin de la semaine, je ne vois pas comment on peut commencer l'étude article par article dès maintenant. S'il n'y a plus de discussion générale, je suggère donc d'ajourner jusqu'à mardi prochain. Le comité directeur aura eu alors l'occasion de se réunir.

M. Saltsman: Je serais tout à fait d'accord pour étudier le Bill article par article. On a assez étudié et on a assez de renseignements pour prendre une décision. Mais, je suis prêt à reconnaître aussi que le comité directeur pourra décider qu'il ne sera peut-être pas nécessaire de voter sur chacun des articles. Je suis tout à fait prêt d'accepter cette alternative, de telle sorte que nous puissions arriver à une entente. Je pense qu'il serait très mauvais d'ajourner, étant donné tout le travail que nous avons à faire, et d'attendre une décision du comité directeur.

Je me demande, monsieur le président, s'il ne serait pas possible, étant donné que nous avons ici les témoins et le ministre, de procé-

[Texte]

proceed on a clause-by-clause examination without calling a vote at the end of each clause. This would enable us to ask the questions that we have in our minds, and perhaps when we are ready to call the vote a lot of the questions that might arise at that time will have been answered. This would give us an opportunity to ask questions of the officials and the Minister while they are here, rather than to keep bringing them back all the time.

I am sure they have a lot of work to do and I do not think this Committee wants to impose on their time any more than we have to. I put this to you, Mr. Chairman, as a suggestion, although I am quite willing to have it put to a vote, that we proceed on a clause-by-clause basis.

Mr. Robinson: I would like it settled whether it is in the form of a motion, Mr. Chairman.

Mr. Saltsman: I am putting it as a suggestion for the Committee's consideration that we go into it clause-by-clause without actually calling the vote at the end of each clause.

Mr. Howe: Mr. Chairman, this morning I spoke on a point of procedure, but I have not discussed anything with regard to this bill. I have some general comments I would like to make and some questions I would like to ask the Minister before we begin the clause-by-clause study. I think I have a perfect right to ask these questions and make these comments.

The Chairman: If you want to ask questions, it is perfectly all right, I will recognize you, Mr. Howe, but before you do so I would like to make a short comment.

This procedure is entirely new and, of course, there are no fixed rules, but I presume we should follow the new Standing Orders that have been accepted by the House of Commons. I will read from Article 75(1)—Proceedings on bills in any Committee:

In proceedings in any committee of the House upon bills, the preamble is first postponed, and if the first clause contains only a short title it is also postponed; then every other clause is considered by the committee in its proper order; the first clause (if it contains only a short title), the preamble and the title are to be last considered.

I think it is very clear. As I said, it is not the subject matter of the bill that has been referred to us; rather, it is the clauses of the bill, and this particular one is Bill No. C-102. This is why we have had general discussion on the bill for practically two days and your

[Interprétation]

der à l'étude article par article sans, pour autant, voter sur les articles. Nous pourrions poser des questions qui nous intéressent et, quand le temps sera venu de voter, on aura répondu à nos questions. On pourra aussi profiter du fait que nous pouvons poser maintenant des questions aux fonctionnaires et au ministre, et que nous n'aurons pas à les faire revenir plus tard.

Je pense qu'ils ont beaucoup de travail à faire et que le comité ne veut pas prendre trop de leur temps. Je suis tout à fait prêt à ce qu'il y ait un vote pour passer à l'étude article par article.

M. Robinson: Est-ce une motion, monsieur le président?

M. Saltsman: C'est une suggestion tout simplement que je fais au comité, à savoir que nous passions à l'étude article par article sans prendre le vote après chaque article.

M. Howe: Ce matin, j'ai parlé du règlement, mais je n'ai rien discuté au sujet du Bill. Je voudrais poser certaines questions d'ordre général au ministre et faire des commentaires avant de passer à l'étude article par article. J'ai parfaitement le droit, à mon avis, de poser certaines questions.

Le président: Si vous voulez poser des questions, vous avez parfaitement le droit. Je vous donnerai la parole, monsieur Howe, mais avant, je veux faire un commentaire. Il s'agit d'une procédure tout à fait nouvelle. Évidemment, il n'y a pas de règle établie, mais nous devrions suivre le nouveau Règlement qui a été adopté par la Chambre des communes. Voici l'article 75 (1)—Délibérations sur des bills en comité:

«Lors de l'étude de bills par un comité de la Chambre, on reporte d'abord à plus tard l'étude du préambule puis celle du premier article si celui-ci ne vise que le titre abrégé; le comité étudie ensuite chacun des autres articles dans l'ordre, puis en dernier lieu le premier article (s'il ne vise que le titre abrégé), le préambule et le titre.

Je pense que c'est très clair. Comme je l'ai dit, ce n'est pas le sujet du Bill, mais bien les articles du Bill C-102 qui nous ont été défrés. Voilà pourquoi nous avons eu un débat général sur cette mesure pendant deux jours et le président est prêt à permettre à ceux

[Text]

Chairman is ready to let those members who did not have an opportunity previously to participate in the debate a chance to do so now. However, afterwards I think we should follow the Standing Orders and proceed clause-by-clause. Those of you who have been here for many years know very well that it is better to follow the rules than to try to bypass them in order to do something else.

Your Chairman is an inexperienced man. I should have been a lawyer instead of a doctor. After receiving my M.D. I should have taken a post-graduate course in law. Unfortunately, I have to rely on you!

Mr. Monteith: If I may, Mr. Chairman, I would like to add one word in response to what you have said. I am not suggesting for one moment that we do other than follow the rules—not for one moment—but are you suggesting that if we do hear witnesses they should not be heard until after we have started through this bill clause-by-clause?

• 1630

The Chairman: No. This will depend on the Steering Committee—

Mr. Monteith: That is my point.

The Chairman: —and then yourself after that, you will decide, but that does not prevent us from following the existing Standing Orders. I will now ask Mr. Howe if he has any questions of the Minister.

Mr. Howe: Mr. Chairman, the reason I wanted to make—

Mr. Énard: We are still on a motion, Mr. Chairman.

An hon. Member: On a point of order.

Mr. Énard: There is still a motion and I would like to—

The Chairman: There is no motion.

Mr. Énard: Yes, there was a motion put to the floor by—

The Chairman: It has not been put by the Chair as yet.

Mr. Rock: No.

Mr. Guilbault: Do you want to go ahead with a clause by clause study or keep on with a general discussion?

The Chairman: I would suggest that we hear Mr. Howe first and then we will try to do something—

Mr. Énard: On a point of order.

[Interpretation]

qui n'ont pas pu participer au débat de le faire maintenant. Après quoi, nous passerons à l'étude article par article, conformément au Règlement. Ceux qui ont siégé ici pendant nombre d'années savent très bien qu'il vaut mieux suivre le Règlement plutôt que d'essayer de lui échapper. Votre président n'a pas d'expérience. Après avoir obtenu mon diplôme de médecin, il aurait fallu que j'aie étudié le droit. Malheureusement, je dois me fier à vous.

M. Monteith: Je ne dis pas qu'il ne faut pas suivre les règlements. Voulez-vous dire que nous ne pourrions pas entendre les témoins avant de passer à l'étude article par article?

Le président: Non. Tout dépend du comité directeur.

M. Monteith: C'est ce que je veux dire.

Le président: ...et ensuite, c'est à vous de prendre la décision. Mais, ceci ne nous empêche pas de suivre les règlements de la Chambre des communes. Je demande donc à M. Howe s'il a des questions à poser au ministre.

M. Howe: Monsieur le président,...

M. Énard: Monsieur le président, nous sommes toujours saisis d'une motion.

Une voix: J'invoque le Règlement.

M. Énard: Il y a une motion et je voudrais...

Le président: Il n'y a pas de motion.

M. Énard: Oui, une motion a été déposée par...

Le président: Le président ne l'a pas encore reçue officiellement.

M. Rock: Non.

M. Guilbault: Est-ce que nous allons entamer l'étude du Bill article par article ou bien procéder à une discussion générale?

Le président: La parole est à M. Howe, et ensuite nous verrons comment...

M. Énard: J'invoque le Règlement.

[Texte]

The Chairman: —in order to proceed.

Mr. Emard: On a point of order. I would like to say something in clarification. It is not my intention to delay these proceedings. I had some representations to make and I think I have made them. It is not my job to defend the pharmaceutical industry. My concern is for the workers and economic matters in my county. I know you cannot allow all the witnesses to come back but if you would allow maybe three from the medical side and three witnesses from the financial side, I certainly would be satisfied. If these people cannot defend their own point, then it is just too bad.

Mr. Rock: Mr. Chairman, I do not want to take any exception to what certain people have said before, but I am worried about the people working for the company and I do not like the idea of international companies having such powers as being able to get into the importation as well. However, this is something else.

What I wanted here, Mr. Chairman, from the beginning was a decision to allow witnesses to come in front of you. This is what I wanted from the beginning, and yet, at the same time Mr. Chairman you were trying to go into clause by clause which I think was not fair. I think this is quite understandable. If your steering committee could make this decision and the decision is final, well, that is it. As far as I am concerned, there is no reason for me to be here because in a speech which I made to the House of Commons, this is what I asked for, that these people have the opportunity to appear in front of this Committee. This is what I said and this is all I am asking for, and I have come here to do the same thing.

The Chairman: Mr. Rock, I do not know if you have been here before. I know that you have been a very regular attender of the meetings. On Thursday, January 16 we had the motion of Mr. Robinson, seconded by Mr. Guilbault that:

That the Chairman be authorized to hold meetings to receive and authorize the printing of evidence when a quorum is not present.

On January 25 we had a meeting of the subcommittee and the subcommittee recommended to you three items. The first one was that no new witnesses be called because the subject was fully covered in previous sessions, and unless good and valid arguments are given that there is brand new evidence, the

[Interprétation]

Le président: ... nous allons procéder.

M. Émard: J'invoque le Règlement, monsieur le président. J'aimerais avoir une explication. Je ne compte pas du tout retarder nos délibérations. J'avais certaines instances à présenter et je crois l'avoir fait.

Il ne m'appartient pas de défendre l'industrie pharmaceutique. Je me préoccupe plutôt des travailleurs et des facteurs économiques qui intéressent ma circonscription. Néanmoins, je sais fort bien que vous ne pouvez pas demander à tous les témoins qui sont venus témoigner de revenir, mais si nous pouvions avoir trois témoins de la profession médicale, et trois témoins du secteur financier, j'en serais satisfait. Et si ces gens ne peuvent faire valoir leur point de vue, alors tant pis.

M. Rock: Monsieur le président, je ne prends pas ombrage de ce qu'ont dit certains préopinants, mais je me préoccupe beaucoup plus des gens qui travaillent pour ces compagnies. Je n'aime pas que des compagnies internationales aient des pouvoirs aussi étendus dans le domaine de l'importation.

Ce que je voulais, monsieur le président, c'était la permission pour les témoins de venir témoigner. Si le comité directeur peut arrêter cette décision, et si cette décision est finale, fort bien! Voilà ce que j'ai demandé en Chambre: que ces gens aient l'occasion de comparaître devant le Comité. Voilà précisément ce que j'ai demandé, et ce que je demande encore:

Le président: Monsieur Rock, j'ignore si vous aviez siégé au sein de notre Comité ce jour-là. Je sais que vous avez été un membre très assidu aux réunions. Le jeudi 16 janvier, sur la proposition de M. Robinson, appuyé de M. Guilbault, il est résolu

«Que le président soit autorisé à tenir des réunions pour recevoir et autoriser l'impression des témoignages lorsqu'il n'y a pas quorum».

Le Comité recommande trois choses. D'abord, qu'aucun nouveau témoin ne soit convoqué, puisque la question a été bien étudiée au cours des dernières sessions et qu'à moins que des arguments valables soient invoqués pour justifier la présence de nouveaux témoins, le Comité ne devrait pas convoquer

[Text]

Committee should not hear any new witnesses. Is that clear enough?

So take your representations to the steering committee and the steering committee will make its own recommendation and will come back here. That is all there is to it. I hope this is understood by everyone.

Mr. Emard: Sir, it says "unless". I have submitted my new reasons and I think they should be considered.

The Chairman: Yes, you submit it to the secretary of the Committee.

Mr. Emard: I submitted it to a member of the steering committee.

The Chairman: It is all right, then. Let us not discuss that anymore. We are going to proceed according to the resolution. Mr. Howe?

Mr. Howe: Mr. Chairman, I am sorry if I disturbed you. I think you are a good Chairman. You do a very good job in a very difficult situation.

The Chairman: Thank you sir.

• 1635

Mr. Howe: However, the history of Bill C-190 prompts me to say that we must be very careful with Bill C-102. We remember how Bill C-190 was brought into the House and we, as the opposition and the Conservative Party, were accused of holding it up and of stopping people from getting cheap drugs just because we insisted that safety measures be put into that bill before it was passed. They are safety measures that had been incorporated in the much touted Harley report. This was the main reason why we objected to Bill C-190 last year and if the government in its wisdom had put those clauses into the bill last year it probably would have been law today.

This, as I say, prompts me say that we must be very careful before we pass this bill. Mr. Chairman, I am not at all sold on the fact that this is going to make cheap drugs available to everyone in Canada. This is an idea that is going around and it is not fair to the people of Canada to give them this idea because I do not think it is going to come about. After all there is something more to selling drugs than just importing them from another country and bringing cheap drugs into Canada. They have to be manufactured; they have to be distributed; they have to be promoted; they have to be sold. This does not come cheap under our high-cost economy.

[Interpretation]

de nouveaux témoins. Vous devez donc présenter vos demandes motivées au Comité directeur qui fera ses propres recommandations. Voilà! Est-ce bien compris?

M. Émard: J'ai soumis moi-même mes nouvelles motivations et je crois que ces raisons doivent être examinées aussi.

Le président: Vous les avez soumises au secrétaire du Comité.

M. Émard: J'ai présenté mes raisons à un membre du comité directeur.

Le président: Fort bien! La question est tranchée, nous allons procéder dans le sens de la résolution. Monsieur Howe?

M. Howe: Monsieur le président, je crois que vous faites un bon travail, que vous êtes un bon président, et je m'excuse de vous avoir causé certaines difficultés.

Le président: Merci, monsieur.

M. Howe: Cependant, la nature du bill C-190 me force à être très prudent avec le bill C-102. Vous vous rappelez comment le bill C-190 a été représenté à la Chambre. Nous, de l'opposition et du parti conservateur, avons été accusés d'obstruction à la politique de baisse des prix des médicaments, en exigeant que certains articles assurant la sécurité des consommateurs soient incorporés à la Loi avant qu'elle soit adoptée. On avait prévu de telles mesures dans le fameux rapport Harley.

Telle a été la principale raison pour laquelle nous nous sommes opposés au bill C-190 l'an dernier et si le très sage gouvernement avait consenti à intégrer ces articles dans le bill de l'an dernier, ils auraient force de loi maintenant.

C'est pourquoi je dis qu'il nous faut être très prudents avant d'adopter ce bill. Et vous savez, monsieur le président, je ne pense pas que la mesure va réduire le prix des médicaments partout au Canada. Il n'est pas juste pour la population du Canada de lui donner cet espoir car je ne pense pas que ce sera le cas. Il ne suffit pas d'importer certains produits pharmaceutiques peu coûteux d'un autre pays pour régler le problème. Ces produits doivent être fabriqués, distribués, annoncés et vendus, et ces opérations ne sont pas peu coûteuses dans notre système économique.

[Texte]

Speaking about our high-cost economy and costs, I would like to ask the Minister, although we took off the 11 per cent sales tax, how much did that reduce the price of drugs all across Canada?

Mr. Basford: We have evidence, Mr. Howe, which I went into very briefly the other day, that, as you appreciate, that sales tax is at the manufacturing level. We have evidence from the Combines Branch with whom the pharmaceutical industry co-operated to a great extent in showing their price lists, that the manufacturer upon whom the tax was levied passed on the removal of that tax through the distribution system, that there was a reduction at the manufacturers' price resulting from the removal of the sales tax.

I explained the other day the difficulty, though, of determining to what extent it had been passed on at the retail level. Of course, retail prices vary from every outlet, and there are thousands and thousands of outlets. Many of the retail outlets in most provinces are changing their prescription pricing practice. Rather than following what was the traditional pattern of a mark-up, like any other retailing, they have been charging a prescription fee and including the drugs within the prescription at cost.

It is very hard to determine to what extent the removal of the sales tax was passed on at the retail level. My information is that it was passed on by the manufacturers and that the manufacturers did not take advantage of the removal of the sales tax by keeping their prices as they were and taking the tax as additional profits.

I expressed my appreciation to the industry for adjusting their prices to take account of the removal of the sales tax.

Mr. Howe: We are talking about the retail level, Mr. Chairman. We are not talking about the wholesale level. What was the effect? Surely that the Department would be able to come up with figures to show what the removal of this 11 per cent sales tax did for the consumer.

Mr. Basford: It is impossible to make any accurate statement that would not be open to challenge. I would not want to give you, Mr. Howe, a statement that would be open to challenge.

Mr. Howe: Could you give us an approximation?

[Interprétation]

A ce sujet, et au sujet des coûts, de combien la suppression de la taxe de 11 p. 100 a-t-elle réduit les prix des médicaments au Canada?

M. Basford: Monsieur Howe, comme vous le savez, la taxe de vente est imposée au fabricant. Selon le Bureau des enquêtes sur les coalitions, qui a été chargé de faire enquête là-dessus, et avec lequel l'industrie pharmaceutique a certainement collaboré en lui montrant ses listes de prix, le fabricant qui devait payer cette taxe, la reflétait au système de distribution, et il y avait réduction du prix de fabrication résultant de l'élimination de la taxe de vente.

J'ai dit qu'il était difficile de déterminer dans quelle mesure la taxe a été reflétée au niveau du détail parce que les prix au détail, évidemment, varient d'un établissement à l'autre. Il y a des milliers et des milliers d'établissements de vente au détail et, chacun fixe son propre prix. Cependant, bon nombre d'établissements de vente au détail changent leur pratique dans l'établissement des prix des prescriptions: plutôt que de suivre la pratique traditionnelle de majoration des prix, comme on le fait dans toutes les autres industries, on demande maintenant des frais de prescriptions qui comprennent les médicaments compris dans la prescription.

Il est très difficile de déterminer dans quelle mesure l'élimination de la taxe de vente a pu modifier les prix au niveau du détail; mais d'après les renseignements que j'ai reçus, le fabricant n'a pas profité de l'élimination de la taxe en laissant les prix tels quels pour faire un profit supplémentaire.

Je suis très reconnaissant à l'industrie pour avoir rajusté ses prix en fonction de l'élimination de la taxe de vente.

M. Howe: Nous parlons du prix de détail, et non du prix de gros. Quel fut le résultat? Le ministère pourra sûrement nous dire dans quelle mesure l'abolition de cette taxe de 11 p. 100 a influencé le prix au consommateur.

M. Basford: Il est impossible de donner un exposé précis de la situation sans s'exposer à une contestation des chiffres publiés, et je ne voudrais pas le faire.

M. Howe: Pouvez-vous nous donner des chiffres approximatifs?

[Text]

Mr. Basford: No, because the practices at the retail level changed and are in the process of changing.

Mr. Howe: Yes, but this whole question we are discussing is cheaper drugs for people. We took the action of removing the 11 per cent sales tax, and we should be told how much that reduced the price of drugs to the ordinary consumer.

• 1640

Mr. Basford: That has absolutely nothing to do with the consideration of Bill C-102.

Mr. Howe: Yes, but this was one of the recommendations of the Harley Report and the point is we took this action. What I am getting at, Mr. Chairman is this: I heard the figure of approximately 4 per cent to the consumer. Was it in that area?

Mr. Basford: I am sorry, Mr. Howe, we cannot give you a proper figure on that.

Mr. Howe: You cannot tell me...

Mr. Basford: I can tell you that when the tax was removed from the manufacturer—and you will appreciate it was a tax at the manufacturing level—that the wholesale prices were reduced commensurate with the reduction in sales tax.

Mr. Howe: Eleven per cent or 12 per cent?

Mr. Basford: No. Would you like to explain this Mr. Henry? It does not quite work that way.

Mr. Henry: Mr. Chairman, it is a rather complicated procedure, but I think the figure we have of the general over-all reduction was subject to a number of aberrations, because some prices actually went up and others went down more than the amount of the sales tax, but over-all the prices went down at the wholesale level, reflecting the removal of the sales tax, by roughly of the order of 8 to 10 per cent. Of course, the 8 to 10 per cent is not exactly the same amount of the percentage figure representing the tax, but that is because of the way the tax is applied at the wholesale level by the Department of National Revenue. It requires a fairly careful computation, which in the case of each company is dependent upon the way they market their products, and after having consulted them we found out what formula was to apply and satisfied ourselves that an 8 per cent or 10 per cent reduction—roughly of that order—would represent the passing on of the whole

[Interpretation]

M. Basford: Non. La pratique au niveau du détail a changé, les prix sont actuellement modifiés.

M. Howe: Nous parlons de réduction des prix des médicaments aux consommateurs. Nous avons éliminé la taxe de vente de 11 p. 100, et nous sommes en droit de savoir de combien le prix de détail en a été réduit.

M. Basford: Cela n'a absolument rien à voir avec l'étude du bill C-102.

M. Howe: Oui, mais c'était là l'une des recommandations du rapport Harley précisément, et nous l'avons appliqué. Ce à quoi je veux en venir, monsieur le président, c'est que j'ai entendu parler d'une réduction de 4 p. 100. Est-ce une appréciation raisonnable?

M. Basford: Je regrette beaucoup, monsieur Howe, nous ne pouvons pas vous donner des chiffres exacts.

M. Howe: Vous ne pouvez pas me dire...

M. Basford: Je puis vous dire que lorsque la taxe a été éliminée au niveau de la fabrication, les prix de gros ont été réduits, et dans une proportion équivalente.

M. Howe: Une proportion de 11 p. 100? De 12 p. 100?

M. Basford: Non. Voulez-vous expliquer cette réduction, monsieur Henry? Le fonctionnement est différent.

M. Henry: Monsieur le président, c'est une procédure assez compliquée. Je crois que les chiffres indiquant la réduction générale étaient sujets à bien des approximations fallacieuses. Certains prix sont montés, d'autres sont descendus. Dans l'ensemble les prix ont baissé au niveau du gros, reflétant l'élimination de la taxe de vente, de 8 à 10 p. 100. Cela n'est pas dû exactement au pourcentage de la taxe, c'est en raison de la façon que la taxe est appliquée au niveau du gros par le ministère du Revenu national. Il faut un calcul assez compliqué qui doit être fait dans le cas de chaque compagnie. Ayant consulté les compagnies, nous avons trouvé la formule d'application. Nous sommes convaincus qu'une réduction de 8 à 10 p. 100 représenterait bien l'élimination de la taxe. En d'autres mots, en éliminant la taxe de vente de 12 p. 100, cela ne voudra pas dire que les prix baisseront de 12 p. 100 automatiquement.

[Texte]

of the sales tax. In other words, if you take off a 12 per cent sales tax it does not result in a 12 per cent decrease in the price.

That is the information we have, and it was very carefully worked out over a period of some months. When I tell you that it took that long you will understand that it was quite a complicated calculation to make.

Mr. Howe: Yes, I understand. I sometimes feel that those tax reductions that look so big at the beginning seem a lot smaller when they get down to the consumer. Of course, Mr. Chairman, when you think of the increase in the cost of living that has taken place in the last year, and that I understand...

The Chairman: Mr. Perrault asked for a supplementary.

Mr. Perrault: I have a supplementary question of the Minister and at the same time I would like to make an observation on the remarks which have been made here. The implication emerges that because there is no proof positive guarantee that in effect there is a certain percentage reduction at the retail level of drugs that no action at all is desirable or necessary. The question I would like to ask...

An hon. Member: Mr. Chairman, this is a question of personal privilege.

An hon. Member: This is ridiculous.

Mr. Perrault: If this is an unfair conclusion as a result of the remarks...

An hon. Member: I am just making an attempt...

The Chairman: Order please. A supplementary, Mr. Perrault?

Mr. Perrault: I would like to ask the Minister this question, supplementary to your remarks. Is it not true that conversations and meanings are anticipated between the provincial and federal government, in order to discuss this matter of the retail price of drugs, on how prices can be reduced at the retail level to explore this area, in addition to the legislation which we have before us.

Mr. Basford: Very much so. We have had some preliminary discussions with the provinces and we intend to have more. They have control over what happens at the retail level and how it is structured, and therefore we will be meeting with them. Of course, as I explained the other day, some of them are acting on their own. I am very grateful to them for this because the Ministers of Health

[Interprétation]

Tels sont les renseignements que nous avons et, pendant des mois, nous avons vérifié ces chiffres. Je peux vous assurer qu'il a fallu aussi longtemps pour faire tous les calculs qui sont assez compliqués.

M. Howe: Je comprends bien cet aspect de la question. Je dois dire que certaines réductions, qui semblent considérables, lorsqu'elles atteignent le consommateur semblent très petites. Et que dire de l'augmentation du coût de la vie depuis l'an dernier, et je...

Le président: M. Perrault voudrait poser une question supplémentaire.

M. Perrault: Oui, je voudrais poser une question supplémentaire et commenter l'observation qui a été faite. On a laissé entendre que, parce qu'il n'y a pas d'assurance que les prix seront réduits au niveau du détail, aucune mesure n'est nécessaire. Je voudrais savoir...

Une voix: Je voudrais m'expliquer sur un fait personnel.

Une autre voix: C'est ridicule.

M. Perrault: Si c'est une observation à la suite des remarques...

Une voix: Je veux tout simplement...

Le président: A l'ordre. Monsieur Perrault?

M. Perrault: J'ai une question complémentaire aux observations que vous avez faites. N'est-il pas vrai que des entretiens et des réunions auraient lieu entre le fédéral et les provinces pour discuter cette question des prix de détail et voir si les prix peuvent être réduits au niveau de détail?

M. Basford: Nous avons eu certains entretiens préliminaires avec les provinces et nous comptons en avoir d'autres. Les autorités provinciales exercent l'autorité sur les établissements de détail. C'est pourquoi nous voulons les rencontrer. Les ministres de la Santé des diverses provinces se préoccupent beaucoup de cette question.

[Text]

in the respective provinces are very concerned about the price of prescription drugs.

Mr. Rynard: A supplementary, Mr. Chairman.

The Chairman: A supplementary, Mr. Rynard.

Mr. Rynard: I wonder if this would be of any help. This is an appendix that was issued by the federal Department of Health and Welfare on measuring medication costs. Dr. Chapman, no doubt, is well aware of it. They set out prescription drugs in 1949 at the figure of 100 and in 1966 at 100.4. Is that right? I took those figures down and I hope they are right. The average price per prescription in 1952 was \$1.82 and family expenditure on prescription drugs per year was \$23.60 in 1955 and \$39 in 1964. I believe you could comment on this because it was issued by the Department of Health and Welfare.

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Dr. Chapman: Mr. Chairman, I am really not in a position to comment on this because it does not come within the jurisdiction of the Food and Drug Directorate. We have no responsibility for the development of these figures.

Mr. Rynard: For the publishing of this bulletin? It would then come under the Minister of Health.

Dr. Chapman: Yes, that is correct.

Mr. Rynard: It must come under it.

Dr. Chapman: Yes.

Mr. Rynard: And your Department operates under that Department. Perhaps you could get this for us and put it on the record at the next meeting.

Mr. Basford: You have it, Dr. Rynard, and I am sure you would be happy to table it.

Mr. Rynard: It is entitled "Measuring Medication Costs". That might clear up a little bit of this problem.

The Chairman: A supplementary, Mr. Saltzman?

Mr. Saltzman: Mr. Chairman, during the years I have been here on almost every occasion when we have discussed the high price of a product some people in the House of Commons—and many of them in the Conservative party—have almost invariably pointed out that the reason for high prices is govern-

[Interpretation]

M. Rynard: Question complémentaire, monsieur le président.

Le président: Monsieur Rynard?

M. Rynard: J'ai ici une annexe qui a été publiée par le ministère de la Santé nationale et du Bien-être social sur les prix des médicaments. Je crois que M. Chapman en a fait mention. On fixe les prescriptions en 1949 à 100, et en 1966 à 100.4, n'est-ce pas? Le prix moyen pour une prescription en 1952 était de \$1.82, et les dépenses d'une famille pour des prescriptions étaient de \$23.60 en 1955 et \$39 en 1964. Il me semble que vous pourriez faire des commentaires sur ce sujet.

M. Chapman: Monsieur le président, je ne suis pas en mesure de faire des commentaires sur ce sujet, parce que cela ne relève pas de la Direction des aliments et drogues. Nous n'avons aucune responsabilité en la matière.

M. Rynard: La publication de cette brochure relève du ministre de la Santé.

M. Chapman: C'est exact.

M. Rynard: Il le faut.

M. Chapman: Oui.

M. Rynard: Et la Direction relève du ministère. Peut-être pouvez-vous obtenir ces chiffres pour nous et les citer à la prochaine réunion?

M. Basford: Monsieur Rynard, puisque vous avez ces chiffres vous-même, vous pourriez les déposer.

M. Rynard: Voici le titre: *Évaluation du coût des médicaments*.

Le président: Question complémentaire, monsieur Saltzman?

M. Saltzman: Monsieur le président, presque chaque fois que nous avons discuté le prix élevé de certains produits, plusieurs députés du parti conservateur signalent, presque invariablement, que la raison des prix élevés est la politique de taxation du gouvernement. C'est vrai; on n'a qu'à consulter les

[Texte]

ment taxation. This is true; the record will demonstrate it. I am getting a little tired of this kind of argument because it is quite obvious that the high prices in Canada do not arise from government taxation. This is a perfect example of that. When the taxation was removed it had almost no effect on the price of drugs. They simply used this as an excuse to increase their profit.

Mr. Howe: I understand that they were reduced.

The Chairman: Gentlemen, please. Are you finished with your supplementary, Mr. Saltzman?

Mr. Saltzman: I think we may feel the same thing on housing with the removal of the sales tax.

The Chairman: Mr. Howe, you have the floor.

Mr. Howe: Mr. Chairman, the Minister has made a great point of the fact that this new bill will increase competition in Canada, and by increased competition we will reduce the price of drugs to the consumer. I well remember during the Harley Committee hearing that Mr. Henry posed this question to him, "Does increased competition necessarily reduce prices?", and if I remember correctly he answered at that time, "No, it does not". It is right in the record.

As far as this increased competition is concerned, Mr. Chairman and Mr. Minister, I do not think this is going to do these great things for the poor people of Canada and bring the price of drugs down to the extent that is being spoken of all over the country. I think we should take a very close look at this legislation to see if there is some way that we could possibly amend it to bring about the situation are all trying to achieve; that is, provide cheaper drugs in Canada.

You know what happens with respect to competition today. There is competition in every product that is manufactured in Canada today and it has not brought the prices down. The cost of living has not been reduced in five years. Competition has not done this. It is high government spending and high government taxation that have done it. However, Mr. Chairman, the Minister has given the impression that increased competition will do what it is expected it will do and reduce the prices, and I am not sure that it will.

After all, the drug firms that are already in Canada are not going to sit back and let some foreign manufacturer come in and take all their business away from them without a battle, and that battle will cost somebody a lot of

[Interprétation]

comptes rendus. Ces discussions commencent à me fatiguer. Le prix élevé des articles n'est pas nécessairement tributaire des taxes du gouvernement. Nous avons un exemple de cela ici. Lorsqu'on a éliminé la taxe, cela n'a eu aucun effet sur le prix des médicaments. On a profité de cela pour augmenter les prix.

M. Howe: Je croyais qu'ils avaient été réduits.

Le président: Messieurs, à l'ordre. Monsieur Saltzman?

M. Saltzman: Ce serait la même chose pour l'habitation.

Le président: Monsieur Howe?

M. Howe: Le ministre a insisté sur le fait que ce nouveau bill accroîtra la concurrence au Canada. En augmentant la concurrence, nous allons réduire le prix des médicaments pour le consommateur. Dans le rapport de la commission Harley, M. Henry a demandé si une augmentation de la concurrence amenait nécessairement une diminution des prix. On a alors répondu négativement.

En ce qui concerne l'intensification de la concurrence, monsieur le président, je ne pense pas que cela va nécessairement réduire les prix que doivent assumer les pauvres du Canada. Je crois que nous devrions étudier de très près cette mesure législative pour voir s'il y a un moyen de présenter des modifications pour fournir aux Canadiens des produits pharmaceutiques qui coûtent moins chers.

En ce qui concerne la concurrence, vous savez ce qui arrive aujourd'hui. Il y a de la concurrence pour tous les produits qui sont fabriqués au Canada aujourd'hui, mais cela n'a pas nécessairement fait baisser les prix. Le coût de la vie n'a certainement pas été réduit depuis cinq ans, en raison des dépenses et des taxes trop élevées du gouvernement. Cependant, monsieur le président, le ministre a donné l'impression que la concurrence accrue aura précisément ce résultat et réduira les prix. Je ne pense pas que ce soit le cas.

Les compagnies de produits pharmaceutiques qui existent déjà au Canada ne vont pas laisser certains fabricants étrangers venir leur enlever leur marché sans une guerre, et cette guerre devra être payée par quelqu'un. Ce

[Text]

money. Who will pay it? It will be the consumer of drugs who will pay for the cost of the promotional campaign that will go on. Also, Mr. Chairman, the increase in the cost of postage on second class mail—throwaway mail—which is the means by which people sell their product today, is going to increase the cost of drugs in Canada.

The Chairman: Do you have any other questions, Mr. Howe?

Mr. Basford: That really was not a question, it was a statement, and one which I object to, Mr. Howe. I am amused at the idea of a spokesman for the Conservative party attacking the concept of competition, as you have. Mr. Henry and I, who are interested in the Combines Investigation Act, of course...

Mr. Howe: I am not attacking it, Mr. Minister, I am just pointing out the true facts of life.

Mr. Basford: ...have noted on a number of occasions that even when there is competition it does not necessarily result in lower prices, and this is quite a correct statement. However, without competition you just have no hope unless you want to have a socialized drug industry. If that is what the Conservative party is advocating, that is fine. I wish they would state that as a matter of policy.

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The Chairman: Order, gentlemen.

Mr. Basford: We have put forward some policies to help reduce the cost of drugs and this is only part of them. I have been careful to explain that it is part of a program. We hope that it will be effective; we hope that it will have a beneficial effect on the price of drugs. We are taking other measures. I have explained that we are determined to reduce the cost of drugs. I only wish that those people who attack this measure so violently and vigorously, and have caused it to be in one Parliament and then in another Parliament, would come up with some other measures. There have been some members of this Committee who have come up with other measures and I have not foreclosed those proposals.

Mr. Monteith: On a point of order, Mr. Chairman, I understand that the Minister's predecessor was very pleased to have the bill talked out at the last Parliament.

Mr. Basford: I think there is absolutely no foundation for that statement.

[Interpretation]

sera les consommateurs des médicaments qui devront payer la note de la campagne de publicité qui sera lancée. De plus, l'augmentation des droits de franchise du courrier de deuxième classe fera augmenter le prix des médicaments.

Le président: Avez-vous d'autres questions monsieur Howe?

M. Basford: Ce n'était certainement pas une question, c'était plutôt un commentaire auquel je ne suis pas d'accord, monsieur Howe. Je trouve un peu ridicule qu'un porte-parole du parti conservateur s'attaque au concept de la concurrence. M. Henry et moi sommes intéressés à la Loi relative aux enquêtes sur les coalitions, et nous...

M. Howe: Je ne l'attaque pas, monsieur le ministre. Je ne fais qu'exposer les faits.

M. Basford: ...avons constaté, à plusieurs reprises, que, même lorsqu'il y a concurrence il n'y a pas nécessairement diminution de prix. Cette déclaration est fondée. Mais, sans concurrence, on n'a aucun contrôle, à moins d'avoir une industrie pharmaceutique étatisée. Si c'est ce que préconise votre parti, j'aime rais qu'il le déclare officiellement.

Le président: Messieurs, à l'ordre.

M. Basford: Nous avons établi des politiques en vue de faire baisser le coût des médicaments. Ceci ne constitue qu'un élément du programme. Nous espérons que ce programme sera efficace; nous espérons que ceci aura des effets utiles pour faire baisser le prix des médicaments. Nous prenons d'autres mesures afin de faire baisser le prix des médicaments. Je voudrais seulement que ceux qui attaquent cette mesure avec tant de violence et tant de vigueur présentent d'autres mesures. Il y a des députés qui ont formulé d'autres propositions et je les étudie.

M. Monteith: J'invoque le Règlement. Je crois comprendre que le prédécesseur du ministre a été très satisfait de voir que le Bill n'a pas été adopté lors de la dernière Législature.

M. Basford: Je crois que cette déclaration n'est pas fondée.

[Texte]

Mr. Rynard: Mr. Chairman, I think this just proves the need for making sure, because they did change the previous bill and this is an admission that they could improve it, and surely this is what we are trying to do for the Canadian people.

Mrs. MacInnis (Vancouver-Kingsway): I cannot go along with reasoning that is really too dubious. Mr. Howe stated a few moments ago that if the last time the government's bill had had the safety clauses in it, and that sort of thing, it would have gone through quickly and we would not be faced with it again this time. Now that the safety clauses have been put in, wherein lies the further objection? I am at a loss to understand now what objections there are on the part of Mr. Howe and others with him to the bill. The last time it was because of the absence of safety clauses, but now they are there. What is the objection now to it?

Mr. Howe: The premise is the Harley Committee report of early 1966, which is almost three years ago. In our world of today knowledge doubles every four years. There have been some tremendous innovations and changes in the drug industry in the last few years and it is for that reason...

Mrs. MacInnis (Vancouver-Kingsway): Yes, but prices are going higher.

Mr. Howe: ...I feel that we should have some...

The Chairman: Will you please address the Chair rather than argue between yourselves. Let us get back to the bill.

Mr. Foster?

Mr. Foster: Mr. Chairman, thank you very much. This is the first opportunity I have had to speak during the day and I am a member of the Committee.

I understood that we were to let the first clause stand and deal with it at the end. Is that not the correct procedure?

The Chairman: That is only when it is the title or a short explanation.

Mr. Foster: We do not have that here?

The Chairman: No, it is a long one.

Mr. Foster: In any event, I think that the majority of this Committee would like to proceed with the clause by clause study. We discussed calling in expert witnesses, and we have an expert on patents here today. If it is in order I would move that we proceed with the clause by clause study.

[Interprétation]

M. Rynard: Ceci prouve qu'il est nécessaire de s'assurer que cette question peut être améliorée. Nous voulons le meilleur pour le peuple canadien.

Mme MacInnis (Vancouver-Kingsway): C'est assez douteux. M. Howe a dit, il y a quelques minutes, que si ces dispositions de sécurité avaient été incluses dans le dernier Bill, il aurait été adopté plus rapidement. Mais je ne puis pas imaginer quelles objections M. Howe pourrait trouver en ce qui concerne le bill. On a ajouté ces dispositions de sécurité qui étaient réclamées. Que veut-on, maintenant?

M. Howe: D'abord, le rapport Harley a été soumis il y a presque trois ans, au début de l'année 1966. A une époque comme la nôtre, les connaissances doublent à tous les quatre ans, et les découvertes récentes font que...

Mme MacInnis (Vancouver-Kingsway): Oui, mais les prix montent.

M. Howe: Je pense que nous devrions avoir...

Le président: Veuillez vous adresser au président au lieu de discuter entre vous. Revenons-en au bill. Monsieur Foster?

M. Foster: Monsieur le président, je vous remercie. C'est la première fois que je puis prendre la parole depuis que je fais partie du Comité.

J'ai cru comprendre que nous laisserons l'article 1 de côté, pour y revenir à la fin. N'est-ce pas là la voie normale?

Le président: S'il s'agit du titre ou d'une explication très brève.

M. Foster: Tel n'est pas le cas?

Le président: Non, l'article 1 est long.

M. Foster: Je crois que la majorité des membres du Comité voudrait aborder l'étude du bill, article par article. Nous avons discuté de la possibilité de convoquer des experts; or nous avons un expert des brevets aujourd'hui. Si le Règlement le permet, je propose que nous passions à l'examen du Bill article par article.

[Text]

The Chairman: I have a motion, gentlemen.

Mr. Guilbault moves that this committee start immediately the discussion of Bill C-102, clause by clause, in accordance with the new rules of procedure relating to Standing Committees of the House.

Some hon. Members: Agreed.

Mr. Monteith: Mr. Chairman, before you put the motion may I say something.

I think this would be most irregular until the Steering Committee has met and made a decision on the witnesses. I think you would be committing a grave error if you followed this procedure.

In addition, I have a general question, which has not been asked, to elicit information from the witnesses presently here.

Mr. Guilbault: I would like to say something to clarify my motion. I pursue exactly the same goal as others. I would like this bill carefully scrutinized and studied in depth, but I feel that to attain this goal we should study the bill clause by clause. If we invite witnesses on a general study of the bill what are we going to ask them?

• 1655

However, if we invite witnesses on a clause by clause study then we can question them on a precise clause, thereby eliciting real information. Let no one think that I am in favour of less study on the bill. That is not the idea at all. I contend that we will be able to study the bill in more depth by going into it clause by clause—and we can also invite witnesses if we wish.

The Chairman: Are there any questions?

Mr. Rock: Mr. Chairman, first of all you must realize that this bill is simply to allow importation into Canada. The law presently is that when a compulsory licence is granted the drug has to be manufactured in Canada. The provisions were designed in such a way as to establish manufacturing in Canada. As I said, as the law stood in the past these compulsory licences more or less forced manufacturing in Canada. Now, with all the amendments, we are taking this away, and that is the reason for all these safety measures and everything else, which are good, in the bill.

Mr. Basford: That is not entirely true, Mr. Rock.

[Interpretation]

Le président: J'ai une motion, proposée par M. Guilbault, avec l'appui de M. Forget, à l'effet que ce Comité commence immédiatement l'étude article par article du bill C-102, en conformité des nouveaux règlements de la Chambre des communes.

Des voix: Adopté.

M. Monteith: Je crois que ceci serait tout à fait régulier avant que le comité directeur ait pris une décision au sujet des témoins. Je crois que nous commettrions une grave erreur en procédant de cette façon.

Il y a également une autre question qui n'a pas été posée, et que j'adresserais au témoin qui se trouve ici avec nous.

M. Guilbault: Je veux donner des explications au sujet de ma motion. Je vise les mêmes objectifs que les autres. Moi aussi je veux que le bill soit étudié attentivement, mais je crois que pour atteindre ces objectifs, il nous faut maintenant étudier le bill article par article.

Si nous invitons des témoins au stade de l'étude du bill en général, à quoi cela va-t-il servir? Que leur demanderons-nous? Nous pourrions inviter les témoins lorsque nous aurons abordé l'étude du bill, article par article, et leur poser alors des questions précises, et obtenir les renseignements adéquats. Je ne voudrais pas qu'on s'imagine que je crois que nous pourrions étudier le bill plus en profondeur si nous procédons article par article, et à ce moment-là nous pourrions inviter des témoins si nous le désirons.

Le président: Avez-vous des questions?

M. Rock: Vous devez vous rendre compte que le bill en question est un bill visant simplement à permettre l'importation au Canada. La loi qui existe à l'heure actuelle, prévoit que lorsqu'un permis obligatoire est accordé, le produit pharmaceutique doit être fabriqué au Canada. Les dispositions de cette loi avaient pour but d'assurer la fabrication au Canada.

Avec ces permis obligatoires, tel que la loi les exigeait auparavant, on a obligé les fabricants à fabriquer les médicaments au Canada. C'est ce que nous tentons d'éliminer, et c'est la raison pour laquelle vous ajoutez toutes ces mesures de sécurité au bill. Si ce n'est pas le cas, qu'en est-il?

M. Basford: Ce n'est pas exactement le cas.

[Texte]

Mr. Rock: Well, if it is not then...

Mr. Basford: You asked me a question and I would like to answer it without interruption.

Section 41 was put in the Patent Act in 1923 and it was copied verbatim from the British legislation at that time. It was thought at that time that it meant that you could have compulsory licensing for both domestic manufacturing and imports. It is believed that that was the intention of the legislation in 1923.

Some time after the war the then Commissioner of Patents ruled that this interpretation of the Act was that it did not allow compulsory licensing for imports and therefore since that ruling by the Commissioner of Patents the Act has only been interpreted to allow compulsory licensing for domestic manufacture.

Therefore, what we are doing in this bill, in my view, is simply clearing up what the legislature intended to do in 1923. We are allowing compulsory licensing for domestic manufacturing, which is allowed in the present Act; we are making it abundantly clear that it includes compulsory licensing for importation and we are also changing slightly the system of granting compulsory licences in order to avoid and prevent the years and years of delay that could be caused and has been caused in application for some compulsory licensing. I refer to the fact that the Commissioner can grant an interim licence, which is based entirely on a recommendation of the Harley Committee that there be a procedure to assure that there not be delay in the granting of compulsory licences.

I do not know whether or not the Commissioner of Patents wants to add to my analysis of what this bill does. Of course we also deal with the Trade Marks Act, which I have not gone into, somewhat along the same lines.

Mr. Rock: Well do you not feel that I was partly right—

The Chairman: Mr. Rock, we are discussing the motion. Have you anything to add to the motion before us?

Mr. Rock: I do not think I have a right to discuss the motion because I am not a member. I am just pleading my case to allow witnesses.

Mr. Monteith: Mr. Chairman, before you put the motion I have a general question for Dr. Chapman having to do, generally speaking, with counterfeit drugs. I think this would be apropos our discussion and I would beg leave to put my question prior to your putting the motion.

[Interprétation]

Mr. Rock: Si ce n'est pas...

M. Basford: Vous n'avez posé une question et j'aimerais y répondre sans interruption. L'article 41 de la *Loi sur les brevets* a été ajouté à la loi en 1923. C'était une copie exacte de la loi britannique en vigueur alors. On croyait à ce moment-là qu'il fallait adopter un système de permis obligatoires pour les produits fabriqués au pays et pour les produits importés. On croit que c'était le but de la loi en 1923.

Après la guerre, le commissaire des brevets a interprété la loi comme n'autorisant pas les permis obligatoires pour les importations. Depuis lors, la loi a été interprétée comme mesure ne permettant les permis obligatoires que dans le cas des produits fabriqués au Canada.

Nous voulons donc par ce bill rétablir ce qu'on voulait faire en 1922. Le Bill C-102 prévoit l'émission de permis obligatoires pour les produits locaux, comme dans la présente loi. Il prévoit aussi précisément l'émission des permis obligatoires dans le cas de l'importation, et modifie le système d'émission des permis obligatoires afin d'éviter les délais de plusieurs années qui se sont produits dans certains cas.

Je veux également dire que dans certains cas, le commissaire peut accorder un permis provisoire, mesure établie à la suite d'une recommandation de la Commission Harley, et qui aurait pour but d'assurer qu'il n'y ait pas de délai.

Je ne sais pas si le commissaire des brevets veut ajouter quelque chose à ce que j'ai dit. Ce bill touche aussi à la *Loi sur les marques de commerce*, dont je n'ai pas parlé.

M. Rock: Ne croyez-vous pas que j'avais raison?

Le président: Monsieur Rock, nous sommes à discuter la motion. Avez-vous quelque chose à ajouter là-dessus?

M. Rock: Pour ce qui est de la motion, je n'ai rien à ajouter, je ne suis pas membre du Comité. Je voudrais simplement qu'on permette la venue de témoins.

M. Monteith: Avant de passer à la motion, j'aurais une question à adresser au docteur Chapman, au sujet des produits pharmaceutiques contrefaits. Cette question se rattache à notre discussion et j'aimerais en parler avant le vote.

[Text]

The Chairman: If you want to do so, sir, proceed.

Mr. Monteith: Dr. Chapman, could you enlighten us? All I have heard are rumours but I will have to admit that to a large extent there have been counterfeit drugs on the market. This became prevalent some time last year. Perhaps in some cases action has been taken, in others it is still pending, and so on. Could you comment on that for us?

Dr. Chapman: Mr. Chairman, I could give a summary of the situation.

In February 1968 an officer of the firm of Hoffmann-La Roche Limited in Montreal informed an officer of the Food and Drug Directorate verbally that they had heard rumours that pharmacists in the Province of Quebec were purchasing and selling a five milligram counterfeit tablet of their tranquilizing drug known under the brand name of Valium and the generic name of diazepam.

On March 26 Dr. Lewis Brand asked a question about the matter in the House of Commons. The Directorate immediately contacted Hoffmann-La Roche and found that they had conducted an intensive investigation into this matter, the details of which were given to the Directorate in a letter of April 2, 1968. The Directorate at once initiated an independent investigation, with the assistance of the RCMP. It was confirmed that counterfeit Valium tablets were being sold, that they were being peddled to pharmacists and physicians in unlabelled plastic bags and bottles, and we have information that 15 pharmacists and eight physicians purchased this product in unlabelled bottles and in plastic bags and carried it into those professions in that manner.

Hoffmann-La Roche confirmed that the tablets were not made by any Roche production units in other countries. The Food and Drug Directorate was very quickly able to confirm that the products had not been manufactured by Hoffmann-La Roche in Canada. We could not tell, of course, whether or not they had been manufactured by Hoffmann-La Roche in some other country and been imported into Canada.

[Interpretation]

Le président: Comme vous voudrez, monsieur.

M. Monteith: Docteur Chapman, pouvez-vous nous éclairer? J'ai eu vent de rumeurs voulant qu'une grande quantité de faux médicaments soit en circulation, surtout l'an dernier. Peut-être a-t-on pris des mesures dans certains cas: dans d'autres il y a peut-être une action en cours.

Pourriez-vous nous donner des éclaircissements à ce sujet?

M. Chapman: Monsieur le président, je vais vous donner un résumé de la situation.

Au mois de février 1968, des gens de la société Hoffmann-La Roche ont informé la Direction des aliments et drogues qu'ils avaient entendu une rumeur selon laquelle des pharmaciens de la province de Québec vendaient une imitation d'un de leurs tranquillisants, connus sous le nom de Valium.

Le 26 mars, le docteur Lewis Brand a posé une question à ce sujet à la Chambre des communes. La Direction a communiqué avec la Société Hoffman-La Roche, et a constaté que cette société avait mené une enquête poussée au sujet de cette affaire, et en nota les résultats. La Direction a ensuite entrepris une enquête avec l'aide de la Gendarmerie royale. On a confirmé le fait que de fausses pilules Valium étaient vendues sur le marché. Les tablettes portaient la marque «Roche» et ressemblaient beaucoup au valium; elles n'avaient pas été volées à la compagnie, mais c'était une contrefaçon qui se rapprochait beaucoup du produit fabriqué par La Roche. Par des analyses faites aux laboratoires de la Direction des aliments et drogues, on a constaté que l'élément actif présentait un degré de qualité et d'efficacité satisfaisant. Par conséquent, cette drogue ne présentait aucun danger pour la santé en général. On les vendait aux médecins et aux pharmaciens dans des sacs de plastique, des bouteilles non étiquetées, et nous savons que quinze pharmaciens et huit médecins ont acheté ce produit dans des bouteilles non-étiquetées et dans des sacs de plastique et de cette façon introduits sur le marché.

La Société Hoffman-La Roche a confirmé que les pilules n'étaient pas fabriquées par une autre compagnie Roche dans d'autres pays. La Direction des aliments et drogues a pu confirmer très rapidement que les produits n'avaient pas été fabriqués par Hoffman-La Roche au Canada, mais on n'a pas pu dire, évidemment, s'ils l'avaient été par cette compagnie dans d'autres pays et importés au Canada par la suite.

[Texte]

The tablets were marked with the Roche insignia and closely resembled valium in size and appearance.

They had not been stolen from lots produced by Roche, but were produced under a counterfeit operation using a formulation and a tablet die punch similar to those of Roche. By analysis carried out in laboratories of the Food and Drug Directorate, the active ingredient was shown to be of a satisfactory degree of purity and the potency was satisfactory. Therefore, the counterfeit drug did not represent a hazard to health.

This evidence was all collected and was discussed with the Department of Justice. One individual was charged under section 9(1) of the Food and Drugs Act for selling counterfeit valium tablets.

Mr. Monteith: Was this a retailer?

Dr. Chapman: No, sir; this was the peddler who had sold the drug to the pharmacists and the physicians.

A guilty plea was entered and a total fine of \$175 was set.

A second charge against a second individual was dismissed on January 13, 1969, for the reason that there was reasonable doubt that the person involved knew that the tablets were counterfeit at the time of the offence.

A third charge is scheduled for hearing on January 31, 1969.

Mr. Monteith: Other than this valium has there been any other instance of counterfeit drugs in Canada?

• 1705

Dr. Chapman: No, sir; this is the only instance of which we are aware; and I am sure that we would have been aware of any other cases of counterfeiting in Canada.

I should point out that there have been more than a hundred cases confirmed in the United States.

The Chairman: Are you ready for the motion, or are there further questions?

Mr. Monteith: Mr. Chairman, if you propose to put the motion away I just say that I consider it would be a travesty of proper procedure to have a vote on this at the moment.

M. Thomas (Maisonneuve): Monsieur le président, M. Monteith prétend que la motion est une moquerie. Or moi, de mon côté, je trouve que notre démarche est une moquerie. C'est notre quatrième réunion, et nous ne sommes pas plus avancés. Si mon minutage est bon, je crois que nous entendrons parler

[Interprétation]

Cette preuve a été faite et portée à l'attention du ministère de la Justice. Une personne a été accusée en vertu de l'article 91 de la Loi sur les aliments et drogues de vendre un produit contrefait.

M. Monteith: Était-ce un détaillant?

M. Chapman: C'était la personne qui a vendu cette drogue au pharmacien et au médecin, elle a plaidé coupable et une amende de \$175 a été imposée. Une deuxième accusation portée contre un second individu a été rejetée le 13 janvier 1969, pour la simple raison qu'il y avait des doutes que la personne impliquée savait qu'il s'agissait d'une contrefaçon au moment du délit. Une troisième accusation a été portée et la cause sera entendue le 31 janvier 1969.

M. Monteith: Outre le cas de la pilule valium, y a-t-il eu d'autres fausses drogues au Canada?

M. Chapman: C'est le seul cas que nous connaissons et je suis certain que nous aurions été mis au courant, la chose se fût-elle produite. Je tiens à souligner qu'il y a plus de cent cas qui ont été confirmés aux États-Unis.

Le président: Êtes-vous prêts à la mise aux voix? Y a-t-il d'autres questions?

M. Monteith: Si vous voulez mettre cette question aux voix à ce moment-ci, je veux vous dire que ce serait se moquer des règles de procédure.

Mr. Thomas (Maisonneuve): Mr. Chairman, Mr. Monteith says that the motion is a mockery. In so far as I am concerned, I think that our proceedings are a mockery. It is the fourth time we meet and we have not gotten anywhere. Next, we may hear about visits to companies to count the number of people

[Text]

de visites dans les compagnies, pour y compter le nombre de gens, puis diviser par deux pour savoir combien il y a de têtes, et ainsi de suite.

Pourquoi sommes-nous ici? Il y a eu une motion; je ne connais pas les règlements, mais si nous en avons le droit, suivons la motion, puis nous procéderons.

Mr. Rynard: Mr. Chairman, I have only one comment on this. You are going to put yourself in quite a position. You have accepted that they can make representations to you and that the question of witnesses will be considered by the steering committee. It is completely wrong for you now to put a vote after what you have said and accepted.

The Chairman: The Chairman can do nothing other than accept a motion if it is made according to the orders. The motion has been moved and seconded. I have no other choice than to put it before you.

Mr. Rynard: Before you put it, perhaps Dr. Chapman could tell us what firm was involved in the counterfeiting. Was it an American firm? Who was supplying the valium?

Dr. Chapman: Mr. Chairman, this has not been established. On the basis of the evidence available to us it appears that it was produced in Canada.

Mr. Rynard: How was it recognized? Was it by its solubility, or by its chemistry? How was it discovered that it was counterfeit if the stamp and everything else was correct?

Dr. Chapman: Mr. Chairman, looking at the tablets under the microscope you could tell that they were not the Hoffman-La Roche product.

Mr. Rynard: In other words, the granules were of a different size?

Dr. Chapman: The die was not quite the same and the appearance of the tablet was not quite the same.

Chemical analysis indicated that the color that had been used was not the one that was present in the Hoffman-La Roche product produced in Canada; and Hoffman-La Roche were able to assure us that this color was not used in any of their tablets produced in any other country in the world.

Mr. Rynard: I have just one further question. Who discovered that it was counterfeit?

Dr. Chapman: Hoffman-La Roche.

[Interpretation]

employed there and then have their number divided by two to find out how many heads there are, and so forth. Why are we here? We have had a motion: I do not know the regulations, but if we are entitled to do so let us follow up the motion and then we shall proceed.

M. Rynard: Je n'ai qu'un commentaire à faire, monsieur le président. Vous allez vous placer dans une situation difficile. Vous avez convenu qu'ils pouvaient faire des recommandations et que cette question au sujet des témoins sera étudiée par le comité directeur. Vous avez tort de procéder à la mise aux voix après ce que vous avez dit et approuvé.

Le président: Je n'ai rien d'autre à faire qu'à accepter cette motion si elle est faite suivant les règles. La motion a été proposée et appuyée et je n'ai pas d'autre alternative que de la mettre aux voix.

M. Rynard: Avant de la mettre aux voix, je me demande si le docteur Chapman, pourrait nous dire quelle est la compagnie qui a vendu cette fausse drogue? Est-ce une société américaine? Qui était le fournisseur de valium?

M. Chapman: Ceci n'a pas été établi; à la suite des renseignements dont nous disposons, il semble que cette drogue a été fabriquée au Canada.

M. Rynard: Comment s'en est-on rendu compte? Était-ce par sa solubilité ou au point de vue chimique? Comment a-t-on pu constater que la drogue était fausse?

M. Chapman: Il était facile de se rendre compte, en regardant ces pilules au microscope, qu'il ne s'agissait pas d'un produit Hoffman-La Roche.

M. Rynard: En d'autres mots, les granules étaient de grandeur différente

M. Chapman: La couleur n'était pas tout à fait la même, l'apparence était quelque peu différente.

Du point de vue de l'analyse chimique, on a constaté que la couleur qui avait été utilisée n'était pas la même que dans le produit Hoffman-La Roche au Canada, et ils ont pu nous assurer que cette couleur n'était pas utilisée dans aucun autre pays du monde.

M. Rynard: J'ai une autre question. Qu'est-ce qui s'est aperçu que cette drogue était une imitation?

M. Chapman: Hoffman-La Roche.

[Texte]

Mr. Rynard: The firm whose product was being counterfeited?

Mr. Chapman: That is correct. I might add, Mr. Chairman, that I think this is quite normal. It is perfectly obvious that when the Hoffman-La Roche salesmen visited these stores and physicians and began to ask questions they felt that something was wrong, because these people were not purchasing their product; and they found out, of course, that these physicians and pharmacists had purchased, supposedly, valium tablets.

Mr. Rynard: The detailmen will be getting plugged in on that one!

The Chairman: Gentlemen, are you ready for the question?

M. Émard: Monsieur le président, au sujet de la résolution, êtes-vous prêt à accepter la suggestion de M. Saltsman, à l'effet que le vote soit retenu jusqu'à ce qu'on ait étudié tous les articles et que vous ayez décidé si les témoins doivent apparaître, oui ou non.

• 1710

Le président: Le président n'a rien d'autre à faire que de soumettre au vote la motion présentée.

M. Émard: Si j'ai bien compris, quand la résolution a été présentée pour la première fois par M. Saltsman, elle était sous forme d'amendement.

Le président: Je ne pense pas que M. Saltsman ait présenté un amendement. Il a tout simplement fait une remarque.

M. Émard: D'accord.

Mr. Saltsman: I should perhaps make it clear that I put that forward in the hope that we could reach some agreement. Apparently that was not possible. Therefore, I intend to support this motion.

The Chairman: Lady and gentlemen, are you ready for the question?

Mr. Monteith: Mr. Chairman, I wish to move as an amendment that the Committee adjourn until the steering committee has reported.

An hon. Member: That is not an amendment.

The Chairman: That is a new motion.

Mr. Perrault: Members should know more about procedure than to advance that kind of proposal. It is a "stall".

[Interprétation]

M. Rynard: Ce sont eux qui ont découvert qu'il s'agissait d'une fausse drogue?

M. Chapman: Oui, c'est juste. Et je me permettrai d'ajouter, monsieur le président, que je crois qu'il est tout à fait normal, il était tout à fait évident, que lorsque les vendeurs de la compagnie Hoffman-La Roche ont visité ces magasins et ces médecins, ils se sont aperçus qu'il y avait quelque chose qui n'allait pas, étant donné qu'ils n'achetaient pas leur produit, et ils ont découvert que ces médecins et pharmaciens avaient acheté ce qu'ils croyaient être des comprimés valium.

M. Rynard: Ceci va sûrement intéresser certaines catégories de personnes.

Le président: Êtes-vous prêts pour la mise aux voix?

Mr. Émard: Mr. Chairman, regarding the resolution, may I ask if you are ready to accept the suggestion by Mr. Saltsman to withhold the vote until all the clauses have been studied and you have decided whether or not the witnesses should appear.

The Chairman: I think the motion should be put. I have no other choice.

Mr. Émard: If I have understood properly, when the resolution was presented the first time by Mr. Saltsman it was in the form of an amendment.

The Chairman: I do not believe that Mr. Saltsman has presented an amendment. He just made a comment.

Mr. Émard: I see.

M. Saltsman: Je devrais peut-être faire remarquer que j'ai fait cet avancé dans le but d'en arriver à une entente à ce sujet.

Le président: Êtes-vous prêts pour le vote?

M. Monteith: Je voudrais proposer un amendement à l'effet que jusqu'à ce que le comité directeur ait fait rapport, la séance soit levée.

Une voix: Ce n'est pas un amendement.

Le président: C'est une nouvelle motion.

M. Perreault: Les membres du Comité devraient en savoir plus au sujet de la procédure que de faire une telle proposition. C'est du piétinement.

[Text]

An hon. Member: That is in your book.

Mr. Monteith: Oh, stop that nonsense!

The Chairman: Are you ready for the question?

Motion agreed to.

The Chairman: Shall Clause 1 carry?

Mr. Saltsman: Mr. Chairman, I would like to direct my question to the Commissioner of Patents and ask him what is involved when a patent is applied for and granted. Does the person making that application have to list the complete process of the drug for which he is making a patent application? In other words, by looking at the patent application could someone duplicate that drug?

Mr. Laidlaw: Mr. Chairman, in answer to Mr. Saltsman's question the description, as I would like to call it, or the specification which sets out the actual process in the manufacture of the drug must be sufficiently specific and detailed to allow anyone else skilled in that particular art to accomplish the same results.

Mr. Saltsman: In other words, by looking at patents they would be able to duplicate that particular product.

Mr. Laidlaw: That is correct.

Mr. Saltsman: The question then arises in the case of new drugs, why does an applicant have to go through the whole clinical testing if he is able to duplicate the drug from the patent description?

Mr. Laidlaw: I think the answer to that question lies in the manner of manufacture at the pilot stage. The specification in so far as the application for the patent is concerned pulls out a product, so to speak, that can be done in the laboratory. When one goes into a mass scale procedure through a pilot plant process, and so on, there may be other little features requiring know-how which cannot be put into a particular patent application, and this is why the Food and Drug Directorate would come into a situation of that kind.

• 1715

Mr. Saltsman: I see. Is this different from taking out a patent for a machine? If a machine is patented or a design of some type is patented, usually by examining the patent the person making that examination can duplicate the machine. In the case of a drug you say that may not be true. By examining the patent he may not be in a position to manufacture that drug because other things are

[Interpretation]

Une voix: C'est dans notre livre.

M. Monteith: Non. Mettons fin à tout cela.

Le président: A l'ordre, s'il vous plaît. Ceux qui sont en faveur de la motion? Ceux qui s'y opposent?

La motion est adoptée.

Le président: L'article 1 est-il adopté?

M. Saltsman: Monsieur le président, je voudrais poser ma question au commissaire des brevets, et lui demander ce que cela comporte lorsqu'on demande un brevet et qu'il est accordé. Est-ce que la personne qui demande le brevet doit décrire le procédé complet de fabrication du médicament qu'elle veut faire breveter? Autrement dit, est-ce qu'il suffirait d'examiner la demande de brevet pour pouvoir copier la fabrication du médicament?

M. Laidlaw: Monsieur le président, pour répondre à cette question, je dirais que la description qui donne le procédé exact de fabrication du médicament doit être assez précise et détaillée pour permettre à quiconque est compétent dans ce domaine de fabriquer le même produit.

M. Saltsman: Autrement dit, en consultant le brevet, on peut reproduire le médicament.

M. Laidlaw: C'est exact.

M. Saltsman: Mais alors, dans le cas des nouveaux médicaments, pourquoi un requérant doit-il procéder à tous les essais cliniques, puisqu'il peut reproduire le médicament d'après le brevet?

M. Laidlaw: Je pense que la raison en est le procédé de fabrication au stade expérimental. La description donnée dans la demande de brevet permet de reproduire le médicament en laboratoire. Lorsque l'on passe à la fabrication en masse par un procédé expérimental en usine, il peut y avoir d'autres petits détails qui exigent du savoir-faire et que l'on ne peut décrire dans la demande de brevet. Voilà pourquoi la Direction des aliments et drogues interviendrait dans une situation de ce genre.

M. Saltsman: Je vois. Ce n'est pas la même chose qu'obtenir un brevet pour une machine? Lorsque l'on fait breveter une machine, par exemple. Il suffit généralement de consulter le brevet pour pouvoir reproduire la machine. Dans le cas des médicaments, vous dites que cela ne s'applique pas forcément. En examinant le brevet, on peut ne pas être en mesure de fabriquer le médicament, parce

[Texte]

involved besides the actual knowledge of the ingredients or the pilot plant statement.

Mr. Laidlaw: Yes, this happens in all cases, really, of biological or chemical processes where a temperature change at a certain specific time might have a particular influence. I do not think it changes the character, so to speak, of the drug but it allows its manufacture in bulk, for example, to be proceeded with in exactly the same way as the original process.

Mr. Saltsman: I was just wondering—and I see Dr. Chapman is looking at some material; he may wish to answer as well in which case I would be very pleased—why the position is not taken when a patent application is made to see that the processes, these things that are not now visible, are placed on the record.

Mr. Laidlaw: I think perhaps, Mr. Chairman, Mr. Saltsman misunderstands the exact system. When an inventor comes forward with a patent application he does the best he can in the few 7, 10 or 15 pages available to him to declare his process in writing which eventually becomes public knowledge and this is the basis, of course, for the whole system. As I said, he has probably produced—I am talking about a drug; it could be anything—a device or a process sufficient for his purposes in proving that he has introduced a new art and therefore he is entitled to a monopoly award.

When he gets beyond that stage and the patent issues he has got to develop his invention for which he has been granted a patent and the Patent Act allows him, for example, three years, realizing that it takes quite a considerable length of time to get out of your experimental stage for which you were awarded the patent and get into a production stage.

Mr. Saltsman: Thank you. Perhaps I might direct this question to Dr. Chapman. It was my understanding from the evidence you gave, Doctor, before the Committee that there was something like a sort of virtual 5-year protection period on a new drug. I have been told that the difficulty for smaller manufacturers to get into the field is really in this area of new drug consideration, that the necessity to do clinical testing on their part is a serious inhibition—I believe you pointed this out yourself, Doctor—on their ability to get in and compete with the new drugs on the market.

[Interprétation]

qu'il y a d'autres facteurs en cause: il ne suffit pas de connaître les ingrédients.

M. Laidlaw: Oui, en fait, c'est ce qui se produit dans tous les cas de procédés biologiques ou chimiques où un changement de température à un certain moment précis peut avoir une certaine influence. Je ne pense pas que cela modifie les caractéristiques fondamentales du médicament, mais cela permet de la fabriquer en masse selon un procédé exactement semblable au procédé exactement semblable au procédé original.

M. Saltsman: Je me demandais simplement, et je vois que le docteur Chapman consulte ses documents, alors peut-être voudra-t-il répondre lui aussi, pourquoi on ne demande pas à la personne qui fait une demande de brevet de préciser les procédés, ceux qui ne sont pas encore indiqués.

M. Laidlaw: Je crois, monsieur le président, que M. Saltsman ne comprend pas très bien le système. Lorsqu'un inventeur présente une demande de brevet, il fait tout son possible, dans les 7, 10 ou 15 pages dont il dispose, pour expliquer par écrit son procédé, qui est finalement diffusé publiquement; et c'est là, bien sûr, le fondement du système. Je le répète, il a sans doute produit, je parle ici d'un médicament, n'importe quoi, mais il pourrait s'agir d'un dispositif ou un procédé qui lui suffit pour prouver qu'il a vraiment inventé quelque chose de nouveau et qu'il mérite donc qu'on lui accorde un monopole.

Si on lui décerne ensuite un brevet, il doit mettre au point l'invention qu'il a fait breveter, et la Loi sur les brevets lui accorde par exemple, trois ans, car on se rend compte qu'il faut un temps considérable pour passer du stade expérimental, pour lequel on vous accorde le brevet, au stade de la production.

M. Saltsman: Merci. Je pourrais peut-être poser cette question au docteur Chapman. J'avais cru comprendre, docteur, d'après votre témoignage devant le comité qu'il y avait en pratique une sorte de protection pendant cinq ans, sur un nouveau médicament. On m'a dit que la difficulté qu'avaient les petits fabricants à pénétrer dans ce domaine provenait justement du problème que posent les nouveaux médicaments, et que la nécessité pour eux de faire des essais cliniques les empêchait sérieusement, comme, je pense, vous l'avez dit vous-même, docteur Chapman, de pénétrer sur le marché et de soutenir la concurrence des nouveaux médicaments.

[Text]

Is there any way of speeding up this process so we could get competition injected sooner by entry of these smaller manufacturers?

Dr. Chapman: Mr. Chairman, I do not think there is any way of doing this unless we relax our requirements relating to the safety and effectiveness of the drug.

• 1720

The definition of a new drug, and I will only include really the significant words, is: a new drug means a drug that has not been sold as a drug in Canada for sufficient time and in sufficient quantity to establish in Canada the safety and effectiveness of that substance for use as a drug. Our experience has simply indicated that it takes at least five years before the product has reached a stage where we can say that it has been sold in Canada for sufficient time and in sufficient quantity to establish its safety and effectiveness.

Mr. Saltsman: Therefore, it seems that this legislation proposed before us now, these changes in the Patent Act, if they are to prove effective are only going to be effective for those drugs which have been on the market for five years or longer. This five year new drug category almost excludes the possibility of effective price competition on a new drug as long as it is classified as a new drug.

Dr. Chapman: Mr. Chairman, the only alternative, of course, is to have the second company submit the necessary pharmacological and clinical tests and this has been done in a number of cases.

Mr. Saltsman: Thank you, doctor.

The Chairman: Mr. Fortin?

M. Fortin: Monsieur le président, le commissaire des brevets pourrait-il nous dire quels liens existent actuellement entre le commissaire des brevets et la direction des aliments et drogues? Quel genre de collaboration y a-t-il entre les deux services?

Mr. Laidlaw: Mr. Chairman, if I may answer that question, in reality there is no collaboration, in the strict sense of the word, except that will be in the regulations, in that if I, in my position as Commissioner, receive an application I am required forthwith to notify the Food and Drug Directorate about this particular application, with all the details that come in.

[Interpretation]

Ne pourrait-on accélérer le processus de sorte que la concurrence pût entrer en jeu plus rapidement grâce à la pénétration des petits fabricants sur le marché.

M. Chapman: Monsieur le président, je ne crois pas qu'il y ait moyen d'y arriver, à moins de relâcher nos exigences en ce qui concerne la sécurité et l'efficacité des médicaments.

Un nouveau médicament se définit ainsi, et je donnerai simplement les mots importants. Un nouveau médicament, c'est un médicament qui ne s'est pas vendu au Canada depuis assez longtemps et en quantité suffisante pour que l'on ait eu le temps d'établir au Canada la sécurité et l'efficacité de cette substance en tant que médicament. Notre expérience passée a simplement indiqué qu'il faut au moins cinq ans avant de pouvoir dire qu'un médicament s'est vendu au Canada pendant assez longtemps et en quantité suffisante pour que l'on puisse établir sa sécurité et son efficacité.

M. Saltsman: Il semble donc que le projet de loi que nous étudions, que ces modifications de la Loi sur les brevets, ne seront efficaces que pour les médicaments qui sont sur le marché depuis cinq ans ou plus. Cette catégorie de nouveaux médicaments datant de cinq ans ou moins exclut presque la possibilité d'une concurrence efficace sur le prix d'un nouveau médicament, tant qu'il est considéré comme tel.

M. Chapman: Monsieur le président, la seule autre possibilité, bien sûr est de demander à la seconde société de présenter les résultats des essais pharmacologiques et cliniques nécessaires, et cela s'est fait dans certains cas.

M. Saltsman: Merci, docteur.

Le président: Monsieur Fortin?

Mr. Fortin: Mr. Chairman, I should like to question the Commissioner of Patents. Could he tell us what the links are—the relationship between the Commissioner of Patents and the Food and Drug Directorate? What co-operation exists between the two departments, the two services?

M. Laidlaw: Il n'y a pas de collaboration au sens propre mais si, à titre de commissaire aux brevets, je reçois une demande, je dois en avvertir la Direction des aliments et drogues et lui transmettre tous les détails pertinents. Je puis dire que par le passé, lorsque nous recevions une demande pour l'émission de licences obligatoires, il existait une très étroite collaboration entre le Commissaire aux

[Texte]

I might say, perhaps, to clarify that, that in the past, under the present legislation, where applications were made for compulsory licences to manufacture there was very close collaboration between the Commissioner of Patents and the Food and Drug Directorate on applications of any kind, merely to ensure that in no circumstances could there be any possibility of confusion, or a difference of opinion.

M. Fortin: La sécurité et la qualité du produit sont-elles vérifiées par le commissaire des brevets ou par la Direction des aliments et drogues?

M. Laidlaw: This is actually of no concern to the Commissioner of Patents. It is not within his jurisdiction, or his province, to look at the safety features or quality features of the particular drug. This is solely within the jurisdiction, and properly so, of the Food and Drug Directorate.

The Commissioner of Patents merely issues the licence unless he sees some good reason to the contrary for not issuing such licence.

M. Fortin: Je vous remercie. J'aimerais maintenant poser une question au docteur Chapman. La Direction des aliments et drogues est-elle informée à l'avance de la mise en marché d'un produit nouveau? L'inspection est-elle exigée pour les nombreux médicaments fabriqués en vertu d'ententes spéciales?

• 1725

Dr. Chapman: Mr. Chairman, may I ask for a further explanation of the special agreement? I believe you mentioned drugs made under special agreement. Is this a voluntary agreement between a firm that holds the patent and a second firm?

M. Fortin: Il s'agit d'accords volontaires entre le fabricant et la Direction des aliments et drogues, en vue du respect de la loi. Faute de temps, on conclut une entente spéciale. D'ailleurs, le rapport du Comité ad hoc, demandé par le ministère de la Santé nationale et du Bien-être social, et déposé en 1965, je pense, parle de ces ententes spéciales à propos justement de ces permis obligatoires.

Dr. Chapman: I presume, Mr. Chairman, this is what is known as a voluntary agreement between a firm which holds the patent and a second firm which produces this drug.

However, irrespective of whether there is a voluntary agreement, or a compulsory licence has been issued, there is really no relationship between the issuance of a patent and the

[Interprétation]

brevets et la Direction des aliments et drogues, ceci pour éviter toute possibilité de confusion ou d'émission d'opinions divergentes.

Mr. Fortin: Is the security and the quality of the product checked by the Commissioner of Patents or the Food and Drug Directorate?

M. Laidlaw: Ceci ne regarde absolument pas le Commissaire aux brevets. Il ne lui appartient pas de s'inquiéter de l'aspect sécuritaire ou des qualités des médicaments. Ceci relève uniquement et à juste titre, d'ailleurs, de la Direction des aliments et drogues. Le Commissaire aux brevets, ne fait simplement qu'émettre la licence, à moins qu'il y ait de bonnes raisons, évidemment, de ne pas le faire.

Mr. Fortin: I thank you. I should like to ask a question to Dr. Chapman. Is the Food and Drug Directorate advised before a new product comes on the market and is there mandatory inspection the many drugs manufactured under special agreements?

M. Chapman: J'aimerais savoir, monsieur le président, ce qu'on entend par «accords spéciaux»? Je crois que vous avez parlé de médicaments fabriqués d'après des accords spéciaux. S'agit-il d'une entente volontaire intervenue entre le détenteur du brevet et une autre entreprise?

Mr. Fortin: I mean voluntary agreement between industry and the Food and Drug Directorate so as to respect the Act, but because of lack of time they would have a special agreement. There is a report tabled in 1965 I think and this report has to do with these compulsory licences.

M. Chapman: Je crois que c'est ce qu'on entend par entente volontaire entre une société qui détient un brevet et une deuxième société qui fabrique le médicament. En tout cas, que ce soit un accord volontaire ou que ce soit une licence obligatoire qui a été émise, il n'y a pas de relation entre l'émission d'un brevet et la vente du médicament conformément

[Text]

sale of the drug under the Food and Drugs Act. If the drug is sold it must meet all requirements of the Food and Drugs Act and regulations.

If this legislation passes, the Commissioner of Patents will be required to give notice of an application for compulsory licence to the Department of National Health and Welfare and to any other prescribed department or agency of the Government of Canada. This will give us an opportunity to review the whole situation—the manufacturing facilities and controls—and if we are not satisfied that that drug does meet all the requirements of the Food and Drugs Act and regulations we can have our inspectors waiting at the door the day that the first package is sold. Therefore, we can stop its sale even if a compulsory licence has been issued.

M. Fortin: En d'autres termes, les échantillons des nouveaux produits préparés par une nouvelle entreprise font-ils l'objet d'une analyse, actuellement?

Dr. Chapman: Mr. Chairman, there is no requirement that a firm must submit a sample of a drug which it is producing to the Food and Drug Directorate prior to its sale. However, we have not encountered any case of a firm actually producing a product and applying for a compulsory licence, refusing to give a sample of the drug to us so that we could examine it prior to sale.

M. Fortin: Les entreprises ayant l'intention de conclure des ententes spéciales ou disons, de conclure une entente, c'est-à-dire d'obtenir une licence obligatoire, doivent-elles fournir à la Direction des aliments et drogues un pré-avis?

Dr. Chapman: Mr. Chairman, if it is an application for a compulsory licence the Commissioner of Patents notifies us. If it is a voluntary agreement between two firms there is no requirement that they notify us other than under the drug notification regulations, which require that, within 30 days of placing any drug on the market, the firm so doing must notify the Food and Drug Directorate and provide detailed information about that product.

The Chairman: Mr. Foster.

M. Fortin: Monsieur le président la Direction des aliments et drogues fait-elle des essais cliniques.

[Interpretation]

ment à la Loi sur les aliments et drogues. Si le médicament est vendu, il doit répondre à toutes les exigences de la loi sur les aliments et drogues et du règlement qui accompagne cette loi.

Si cette loi est adoptée, le Commissaire aux brevets devra, lorsqu'une demande sera faite pour une licence obligatoire, avertir le ministère de la Santé nationale et du bien-être social et tout autre ministère ou agence. Ceci nous permettra de vérifier l'ensemble de la situation, ainsi que les méthodes de fabrication et de contrôle. Si nous ne sommes pas convaincus que ce médicament répond à toutes les exigences de la Loi et du règlement des aliments et drogues, nous pouvons demander à nos inspecteurs de se tenir aux aguets lorsque le premier paquet sera vendu. Nous pouvons donc en interdire la vente même si une licence obligatoire a été émise.

Mr. Fortin: In other words, are samples of new products prepared by a new firm subjected to analysis, I mean under the present system not under the new Act.

M. Chapman: Monsieur le président, rien n'oblige une firme qui produit un médicament à en remettre un échantillon à la Direction des aliments et drogues, avant sa mise en vente. Il ne s'est toutefois produit aucun cas où une firme, qui produisait un médicament et qui avait demandé qu'on lui accorde une licence à cet effet, ait refusé de nous donner un échantillon de ce médicament afin que nous puissions l'examiner avant sa mise en vente.

Mr. Fortin: Do firms which intend to make special agreements, let us say not special, but an agreement to get compulsory licences would advise the Food and Drug Directorate beforehand?

M. Chapman: Monsieur le président, s'il s'agit d'une demande pour une licence obligatoire, le Commissaire aux brevets nous avertit. S'il s'agit d'une entente volontaire entre deux firmes, rien ne les oblige à nous avertir, si ce n'est, sous l'empire des règlements sur les médicaments, l'obligation qui revient à la firme qui met un produit sur le marché, d'en avertir dans les 30 jours la Direction des aliments et drogues en lui transmettant des renseignements détaillés sur le produit en question.

Mr. Fortin: Mr. Chairman, I am sorry but I have not finished. Does the Food and Drug Directorate do clinical tests?

[Texte]

Dr. Chapman: No, Mr. Chairman, we do not have facilities for clinical testing. The only clinical testing that might be carried out under the auspices of the Food and Drug Directorate would have to be through a research contract. We have funds available for such testing, as I have previously indicated to this Committee, and we are doing a certain amount of clinical testing, but it is under contract.

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M. Fortin: Avez-vous suffisamment de...

Le président: Je voudrais faire remarquer aux membres que nous étudions l'article 1, et qu'ils doivent s'en tenir autant que possible aux termes qui sont en marge afin, encore une fois, d'éviter de nous détourner de la question principale, le *Patent Act*.

M. Fortin: Monsieur le président, j'accepte vos remarques, mais dans les notes explicatives de l'article 1, il est écrit:

La présente modification a pour objet:
(a) d'étendre le pouvoir actuel du commissaire des brevets d'accorder des licences en vertu des brevets couvrant les médicaments, pour lui permettre d'accorder des licences d'importation de médicaments sous toute forme.

Je voudrais connaître exactement les liens qu'il existe entre les deux services, afin de m'assurer qu'il s'agit bien de sécurité et de qualité des médicaments. Alors, si je viole un règlement, monsieur le président, disons que j'ai terminé.

Le président: Monsieur Fortin, avez-vous fini?

M. Fortin: Je viole un règlement monsieur le président.

Le président: Avez-vous d'autres questions?

M. Fortin: J'en aurai d'autres, mais à d'autres articles.

Le président: Merci, monsieur Fortin. Monsieur Foster?

Mr. Foster: My question is for the Commissioner of Patents. On line 19 of page 2 it says:
...good reason not to grant such a licence;

What are the normal reasons that you would not grant a licence?

Mr. Laidlaw: Mr. Chairman, if for example the applicant was obviously operating what might be described as a fly-by-night operation, with no substance to it, I think in that

[Interprétation]

M. Chapman: Nous n'avons pas, monsieur le président, les installations nécessaires pour effectuer ces vérifications. Les seuls essais cliniques qui pourraient se faire sous les auspices de la Direction des aliments et drogues devraient l'être dans le cadre d'un contrat de recherches. Nous possédons les fonds nécessaires pour ces essais, comme je l'ai déjà dit au Comité. Nous effectuons un certain nombre d'essais cliniques, mais ces travaux sont toujours affermés.

Mr. Fortin: Do you have enough...

The Chairman: I would like to point out to the members of the Committee that we are now at clause 1. Therefore they should stick as far as possible I think to the contents of the clause as indicated in the marginal note. We should not digress from the main question which is the Patent Act in this case.

Mr. Fortin: Mr. Chairman, I accept your suggestion, but nevertheless in the Explanatory Notes of Clause 1 we read as follows:

The purpose of this amendment is (a) to extend the present authority of the Commissioner of Patents to grant licences under patents relating to medicines, to permit the Commissioner to grant licences to import medicines in any form;

I am trying to establish what relationship there is between the two services so as to be sure that we are indeed dealing with the security and the quality of the medicines. As I am breaking the regulations let us say that I have finished, Mr. Chairman.

The Chairman: Have you finished, Mr. Fortin?

Mr. Fortin: I am breaking the regulations, Mr. Chairman.

The Chairman: Do you have any other questions?

Mr. Fortin: I will have more questions to put when we come to other clauses.

The Chairman: Thank you, Mr. Fortin. Mr. Foster?

M. Foster: Ma question s'adresse au Commissaire des brevets. A la ligne 19, page 2, on parle de raisons qui empêcheront le commissaire d'accorder un permis: quelles seraient ces raisons, quels seraient ces motifs?

M. Laidlaw: Monsieur le président, si, par exemple, le requérant avait une entreprise improvisée qui ne semblerait pas très sérieuse, qu'il n'aurait pas toute la matière

[Text]

event I would see good reason that he should not be awarded a licence.

Mr. Foster: My second question revolves around the "the amount of royalty" on page 1 line 18. Does the person holding a patent suggest to you the amount of royalty that a new licensee should pay, do you establish this yourself, or how is this arrived at?

Mr. Laidlaw: Mr. Chairman, it should be pointed out to the Committee that up to the present time I have never awarded a licence, having not been long enough in this particular office, but my predecessor in this office took the view that the applicant and the patentee should if possible get together and decide what an appropriate royalty would be. You can imagine that this did not always work, whereupon the Commissioner would definitely, at his own discretion, fix the royalty. Of course, if the patentee was not satisfied he could apply to the Exchequer Court.

Mr. Foster: Was this then paid to the Commissioner and then through the Commissioner to the original patent holder, or was it paid directly?

Mr. Laidlaw: No, the licence would set out specifically all the terms that the applicant would have to abide by and these conditions may limit, if the licence is only awarded for one year, the amount that the applicant could produce, it would fix the royalty and all the detailed terms that would apply.

Mr. Foster: But in the case of a new situation, where we are trying to bring down the price of drugs, if the Commissioner felt that the patent holder was asking too much—say a nickel a pill or something like this—does the Commissioner have the right to say no, that the amount will only be one cent per pill and this will cover your cost of developing this patent.

Mr. Laidlaw: The Commissioner, Mr. Chairman, has a statutory obligation to follow, which is set out in the bill, but he must bear in mind the research element that was involved, the lowest cost to the public, and then any other factors that may be prescribed by Order in Council. But he has a statutory obligation to perform.

Mr. Foster: That is all, Mr. Chairman.

The Chairman: Dr. Rynard, do you have a supplementary?

Mr. Rynard: Mr. Chairman, I just wanted to ask the Commissioner if he has a commit-

[Interpretation]

première requête, à mon sens, ce serait une bonne raison pour ne pas accorder le permis.

M. Foster: Ma seconde question intéresse la question des droits. Le détenteur d'un brevet a-t-il le droit de vous suggérer la proportion des droits qui devra être payée au moment du permis ou est-ce que c'est vous-même qui déterminez les droits l'importance des droits?

M. Laidlaw: Il convient de signaler au Comité, monsieur le président, que jusqu'ici je ne suis pas au bureau depuis assez longtemps pour vous donner une réponse précise, mais je puis vous dire que mon prédécesseur, à mon présent poste, estimait que le requérant et le breveté devraient avoir un entretien privé pour déterminer quelle serait la proportion éventuelle des droits.

Le Commissaire a le droit discrétionnaire de fixer équitablement les droits. Si le breveté n'est pas satisfait, il peut toujours faire appel à la Cour de l'Échiquier.

M. Foster: Est-ce que ces droits sont versés au commissaire et le commissaire les remet-il au détenteur du brevet?

M. Laidlaw: Le permis détermine expressément toutes les modalités qu'il faut respecter, que doit respecter le requérant. Les dispositions peuvent préciser que le permis n'est valable que pour un an, peuvent déterminer le degré d'utilisation du requérant. On détermine toutes les modalités des droits.

M. Foster: Mais, comme nous cherchons à faire diminuer les prix des drogues, si le commissaire estime que le détenteur demande trop, le breveté demande trop de droits, le commissaire a-t-il le droit, est-il habilité à dire: "le montant exigé est trop élevé"?

M. Laidlaw: Le commissaire, monsieur le président, est obligé de respecter les dispositions du bill ou de la Loi, mais il ne doit pas oublier deux choses: l'élément recherche qui est en cause, les prix les moins élevés possible pour le public et tout autre facteur qui peut être mentionné dans les décrets du conseil. Il a des fonctions à accomplir selon les dispositions de la Loi.

M. Foster: C'est tout, monsieur le président.

Le président: Avez-vous une question complémentaire?

M. Rynard: J'allais simplement demander au Commissaire si le Comité est là pour l'ai-

[Texte]

tee to help, advise and to weigh the evidence, or does he have to do this himself.

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Mr. Laidlaw: Mr. Chairman, under the terms of this bill it is a quasi judicial hearing in fact and the Commissioner presides over the application that is being made. As any court would, he might have advisers to assist him in coming to any conclusion, but this is a matter of his own concern. He can consult experts, if he so wishes, but in the end it is his final decision, his statutory duty and his sole responsibility which can either be approved of or disapproved by going to a higher court.

Mr. Basford: I think, Mr. Commissioner, that you would like me to add that the Commissioner has all the powers of someone under the Inquiries Act to call in whatever additional evidence he may require that does not come to light as a result of this quasi judicial process.

Mr. Rynard: On a supplementary, have any cases gone to the Exchequer Court and, if so, what have been the results.

Mr. Laidlaw: I must assure you, Mr. Chairman and Dr. Rynard, that my predecessor has been very successful. Quite a number of cases have gone from the Commissioner's decision to the Exchequer Court of Canada and almost invariably they have been upheld.

Mr. Ritchie: Mr. Commissioner, it has been stated that compulsory licensing has been so slow that it tended to discourage voluntary licensing and that more voluntary licensing would have resulted in more competition in the drug industry, which is our aim. Now is this in lines 20 to 25 a change in the old method of awarding compensation?

Mr. Laidlaw: Mr. Chairman, to answer the question, it would be the precise wording except for one word. The old Act said:

...the Commissioner shall have regard to the desirability of making the food or medicine available to the public at the lowest possible price consistent with giving to the inventor due reward for the research leading to the invention...

that has been changed to

...giving to the patentee...

[Interprétation]

der, le conseiller ou si c'est lui-même qui arrête ces décisions?

M. Laidlaw: En réponse à cette question, monsieur le président, aux termes de la mesure à l'étude, le commissaire préside une séance judiciaire, c'est lui qui est responsable de l'étude de la requête qui a été faite, il peut avoir des conseillers pour l'aider, cela dépend de son jugement, il peut consulter les experts, les spécialistes s'il le désire, mais, en dernière instance, c'est lui-même qui arrête cette décision, conformément aux obligations que lui prescrit la Loi. On peut évidemment désapprouver sa décision en s'adressant à un tribunal supérieur.

M. Basford: Il convient peut-être que j'ajoute que le commissaire a tous les pouvoirs d'un juge ordinaire ou d'un tribunal judiciaire, notamment de convoquer d'autres témoins.

M. Rynard: Une question complémentaire. Est-ce que des causes ont déjà été présentées à la Cour de l'Échiquier?

M. Laidlaw: Mon prédécesseur a eu beaucoup de succès dans ce domaine et il y a eu bon nombre de causes d'appel de sa décision et, presque toujours, la Cour de l'Échiquier a maintenu sa décision.

M. Ritchie: Monsieur le président, on a dit que les permis obligatoires ont été si réduits que les requérants de permis facultatifs en ont été découragés et que nous aurions eu beaucoup plus de concurrence si nous avions eu un système facultatif de permis, ce à quoi nous visons d'ailleurs.

Est-ce qu'on songe à modifier le régime d'indemnisation par rapport à l'ancienne méthode d'indemnisation?

M. Laidlaw: Pour répondre à la question de M. Ritchie, je crois que le libellé est exactement le même. Sauf dans le cas d'une expression, l'ancien bill disait que:

Le commissaire devait tenir compte de l'opportunité de rendre l'aliment ou le médicament accessible au public au plus bas prix possible tout en accordant à l'inventeur une juste rémunération pour les recherches qui ont conduit à l'invention...

Ceci a été changé à

...en accordant au breveté

[Text]

because it was considered, I believe, when Bill C-190 was before the House that under modern conditions the inventor generally speaking is an employee of a particular pharmaceutical industry and is already being paid as part of his duties to invent and bring new drugs out on the market, that he already receives his reward and the proper interpretation would be on the word "patentee".

Mr. Ritchie: You have just returned from the United Kingdom where, I understand, they have worked out a more satisfactory method of awarding royalties that is more acceptable to all concerned. Have you any comments? You did state that the legislation was somewhat different, but do they in effect receive substantially more royalties than here?

Mr. Laidlaw: Mr. Chairman, I think that is correct. On a comparative basis I think the royalties received in the United Kingdom on this type of application would be higher than would be awarded in Canada. There is no question about that.

Mr. Ritchie: If the royalties awarded were higher do you think there would be more voluntary licensing—that a larger company, carrying a different line, would be more interested in a competitor or the original patentee giving it out, knowing that somebody will ask for a compulsory licence, and if it is higher it is in his economic interest to even promote a competitor. Do you think this would happen?

Mr. Laidlaw: Mr. Chairman, I would hesitate to answer that question because it seems to me to be an economic one and I have never really given that any consideration. I would prefer the economists to reply to that.

Mr. Basford: I think I should point out to Dr. Ritchie, Mr. Chairman, that subclause (4) concludes with the words:

...and for such other factors as may be prescribed.

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This is in there for a very specific reason. As you know, the Economic Council of Canada is considering a reference by the government on the Patent Act generally—patents, copyrights and trademarks. My predecessor invited the Economic Council to address itself to this specific question of royalties and, therefore, the power to make further regulations, in the words

[Interpretation]

Car lorsque le bill C-190 a été étudié à la Chambre, on a jugé que dans les conditions modernes l'inventeur est un employé d'une industrie pharmaceutique quelconque et qu'il est déjà rémunéré, cela fait partie de ses fonctions, pour cette invention.

Déjà il est récompensé sous forme de rémunération et, par conséquent, le terme est juste; en l'occurrence, c'était le terme «breveté» pour remplacer «inventeur».

Mr. Ritchie: Vous êtes revenu récemment du Royaume-Uni où, je crois, on a mis au point un meilleur régime de distribution de droits. Vous avez dit que la loi était quelque peu différente. Est-ce que les brevetés reçoivent beaucoup plus de droits pour le système obligatoire de permis?

M. Laidlaw: Je crois que c'est exact, monsieur le président.

Comparativement, les droits reçus au Royaume-Uni pour ce genre de requête sont plus élevés qu'ils ne le sont au Canada. Cela ne fait pas de doute.

Mr. Ritchie: Si les droits qui sont accordés sont plus élevés, pensez-vous qu'il y aurait plus de permis volontaires? Est-ce qu'une grosse compagnie préférerait avoir des concurrents, sachant que quelqu'un a demandé un permis obligatoire? Il serait peut-être très économique pour la compagnie d'avantager un concurrent. Est-ce que cela pourrait se produire?

M. Laidlaw: Monsieur le président, j'hésite à répondre à cette question qui me semble d'ordre économique et, vraiment, nous ne l'avons pas examinée. Je crains que je doive me référer en ce moment à un économiste.

M. Basford: Je tiens à signaler, monsieur le président, que le paragraphe 4 mentionne

et pour les autres facteurs qui peuvent être prescrits.

Mon prédécesseur avait invité le Conseil économique du Canada qui, comme vous le savez sans doute, considère une révision, une refonte totale, de la part du gouvernement, de la Loi sur les brevets, à s'occuper de la question.

Mon prédécesseur a invité le Conseil économique du Canada à se pencher sur cette question des droits d'invention, où le droit de faire d'autres règlements dans le contexte de l'expression

[Texte]

and for such other factors as may be prescribed.

will allow the Governor in Council to add such other factors as may be appropriate, will permit an adjustment of the royalties when we have the Economic Council of Canada's report, and will allow us to accommodate the clause to the recommendations of the Council if those recommendations are appropriate.

Mr. Ritchie: May I ask then, Mr. Chairman, whether any thought has been given to raising these royalties along the lines of promoting more voluntary licensing, particularly with respect to large firms and injecting more competition into our drug industry.

Mr. Basford: Well, some thought has been given to raising them, because some people urged that they be raised. My answer to that is that we have left the Bill open with those words in order to receive a report from the Economic Council, which is examining the whole question of patents and their economic effect in Canada and has been invited to address itself to this specific question.

Mr. Ritchie: Mr. Chairman, I would like to ask the Commissioner whether in his opinion the United Kingdom were perhaps better off, or were handling this better than we were? Was he able to form any opinion?

Mr. Laidlaw: Mr. Chairman, I really could not form any opinion other than that of an ordinary layman in this respect. Their act is specific and therefore it is interpreted in a special way; our act is specific and must be interpreted in another way.

Mr. Ritchie: I would also like to ask how you will arrive at the research leading to the invention. Most of these new drugs will be coming from foreign countries. How will you ask these companies to bring forward figures, or how would you check on the figures they bring forward, to show how much it cost them for the research leading up to this drug?

Mr. Laidlaw: Mr. Ritchie has asked a very difficult question. I am a mere government official and I have no knowledge at this moment whether this Bill is going to be enacted. If it is enacted, at that time I shall have to consider these things, but at the moment I feel it is beyond my competence to consider in advance of legislation being enacted.

Mr. Basford: Mr. Ritchie, I might add to that answer by referring to what the Com-

[Interprétation]

et pour les autres facteurs qui peuvent être prescrits.

Peut être déterminé, de permettre à un gouverneur en conseil d'ajouter à la liste les motifs ou les facteurs qu'il jugera pertinents. Cela permettra le rajustement des droits. Lorsque nous aurons le rapport du Conseil économique du Canada, nous pourrions peut-être rattacher l'article aux recommandations du Conseil, si ces recommandations sont pertinentes.

Mr. Ritchie: Puis-je demander au ministre, monsieur le président, si on a songé à augmenter ces redevances en vue de favoriser le système des permis volontaires et d'intensifier la concurrence dans notre industrie des produits pharmaceutiques.

Mr. Basford: Oui, on y a songé car certaines personnes nous ont exhortés à le faire. En réponse à cette demande, nous avons laissé cette expression dans la Loi en attendant de recevoir le rapport du Conseil économique qui étudie toute la question des brevets et de leurs répercussions économiques au Canada, et qui a d'ailleurs été chargée d'étudier cette question.

Mr. Ritchie: J'aimerais demander au commissaire, monsieur le président, si, à son avis, il estime que le système du Royaume-Uni est meilleur que le nôtre? A-t-il une opinion là-dessus?

Mr. Laidlaw: Je regrette, je n'ai pu me former une opinion plus précise que celle de l'homme moyen. Notre Loi est interprétée d'une telle façon, la leur est interprétée d'une façon différente.

Mr. Ritchie: Comment peut-on en venir aux recherches menant à des inventions? La plupart de ces nouveaux produits pharmaceutiques viennent de pays étrangers. Comment pourriez-vous vérifier les chiffres qu'on vous présente pour montrer ce que coûtent les recherches donnant lieu aux inventions.

Mr. Laidlaw: M. Ritchie pose une question fort difficile, monsieur le président. Je ne suis qu'un fonctionnaire et j'ignore en ce moment si le bill va être adopté ou non. S'il est adopté, il faudra alors que je tienne compte de cet aspect de la question, mais, à l'heure actuelle, il me semble que cela dépasse ma compétence d'étudier à l'avance les lois qu'on va adopter.

Mr. Basford: Je peux peut-être vous aider à répondre. Revenons sur ce qu'a dit M. le com-

[Text]

missioner said; his hearings were of a quasi-judicial nature. We would expect in any application for a compulsory licence that the application would be opposed by the patentee, who would be a Canadian. I think we can rest assured that the patentee in opposing the application for the compulsory licensing would assure that every possible fact the Commissioner could take into account would be in front of the Commission.

Mr. Ritchie: Mr. Chairman, I have one last question of the Minister on this clause. Will "other factors" include promotional cost?

Mr. Basford: I cannot speak for the Commissioner but he said that he acts, of course, in accordance with his statutory duty—which is to follow the words of the act about the desirability of medicine available to the public at the lowest possible price, consistent with giving to the patentee due reward for the research leading to the invention.

The Chairman: Are you finished, Mr. Ritchie?

Mrs. MacInnis (Vancouver-Kingsway): It is this point that interests me, too, about Clause 1, because I am wondering what criteria—I am not going to say "will you have" because you say that it is going to be new. However, have there been criteria in the Department for measuring the factor of getting the drug available to the public at the lowest possible price? How do you measure that? Has there been any criteria for that?

Also, how is due reward for the research leading to the invention measured? Is it just left to the Commissioner to sort of make a snap judgment, such as, well, the other competitors are charging this and if the other competitor is charging this amount that is the measure of what the lowest possible cost is.

● 1745

Has it been measured against what the other competitors are selling the drug for? How does the Commissioner measure?

Mr. Laidlaw: Mr. Chairman, to answer Mrs. MacInnis' question, he can only take into consideration what is said before him by the applicant and by the patentee. Each has a directly opposing interest and each, as the Minister has explained, is producing all evidence that can be produced before him. It is only on factors produced before him orally or on statements in writing that he can base his decisions. At that stage I think he does the best he can to be as fair as he can to both

[Interpretation]

missaire plus tôt, notamment que ces séances, ces auditions sont d'ordre quasi judiciaire. Le Canadien détenteur du brevet peut toujours s'opposer et vous pouvez être sûr que lorsqu'on s'oppose à une requête de permis obligatoire, le détenteur s'assure que le commissaire connaît tous les aspects de la question.

M. Ritchie: Une dernière question sur cet article. Est-ce que, dans les autres facteurs, on comprendra les frais de publicité, ou de réclame?

M. Basford: Je ne veux pas me faire le porte-parole du commissaire, mais il a dit qu'il s'en tenait aux dispositions de la Loi, savoir de mettre à la disposition de la population des médicaments qui coûtent le moins cher possible et tenir compte des recherches qui ont donné lieu à l'invention.

Le président: Avez-vous terminé, monsieur Ritchie?

Mme MacInnis (Vancouver-Kingsway): Il y a un point qui m'intéresse à l'article 1. Je me demande quel critère vous pouvez avoir. Est-ce qu'on a certains critères pour mesurer le fait de mettre les médicaments à la disposition de la population au plus bas prix possible?

De même, comment mesure-t-on la prime qui va au chercheur qui a fait une découverte? Est-ce qu'on laisse cela au commissaire? Si un concurrent exige un certain prix et un autre concurrent un autre prix, c'est là qu'on choisit le critère?

A-t-on tenu compte de l'objectif des concurrents? Pourquoi ils vendent leurs médicaments? Comment le commissaire mesure-t-il cela?

M. Laidlaw: Eh bien, monsieur le président, pour répondre à la question du député, on ne peut que tenir compte des faits que fournissent le détenteur du brevet et le requérant, puisque les deux ont des intérêts contradictoires et vont évidemment produire toutes les preuves possibles et inimaginables. Ce n'est que compte tenu des faits qu'on nous présente soit verbalement soit dans des déclarations écrites qu'il peut arrêter sa décision. Je crois qu'à ce stade il fait de son mieux

[Texte]

parties, knowing, of course, that his judgment or his discretion as he exercises it is appealable.

Mrs. MacInnis (Vancouver-Kingsway): Then there is no independent yardstick that the Commissioner has, apart from these two people?

Mr. Laidlaw: I think that would be a correct assumption.

Mrs. MacInnis (Vancouver-Kingsway): There are no sort of specific advisers that the Commissioner is obligated to consult. For instance, if you are talking about the lowest possible price to the public, the Commissioner does not have to consult any representatives of the public or sectors other than these two people?

Mr. Laidlaw: Mr. Chairman, I think the answer is that he is obligated to use his best discretion. He can bring in experts or consult with experts; he can consult with any person he wishes before he makes or gives his judgment.

Mrs. MacInnis (Vancouver-Kingsway): Then how do you determine the reward for the research leading to the invention? There must surely be some measure that is used?

Mr. Laidlaw: There is, in fact, no measure used. It is almost impossible to get a measure based on the particular reading that is in the Act at present and still remains in the Act. It is giving the patentee due reward for the research leading to the invention. The courts have determined what the invention is. The invention means, in fact, the bulk product, the active ingredient that was the sole object of the invention. He bases his price on that.

In this respect, and in answer to another question, under this present legislation he does not take into consideration anything that happens after that such as promotional costs the patentee acquires unless, of course, as the Minister has pointed out, these factors are prescribed by Order in Council, in which case he is obligated to take those factors into consideration as well.

Mrs. MacInnis (Vancouver-Kingsway): It seems to me, Mr. Commissioner, that you have a fearful and awful responsibility to have to do that all by yourself.

Mr. Laidlaw: Mr. Chairman, I have not slept for six months.

Some hon. Members: Oh, oh.

[Interprétation]

pour être aussi juste que possible envers les deux parties, sachant, bien entendu, que sa décision ou que son jugement discrétionnaire est sujet à appel.

Mme MacInnis (Vancouver-Kingsway): Il n'y a donc pas de critères que peut suivre le commissaire outre les dires de ces deux personnes?

M. Laidlaw: Je crois que non.

Mme MacInnis (Vancouver-Kingsway): Il n'y a pas un groupe de conseillers que le commissaire est obligé de consulter. Le commissaire n'est pas tenu de consulter des représentants du public, par exemple des secteurs intéressés, outre les deux parties en cause.

M. Laidlaw: La réponse à une telle question, monsieur le président, c'est que le commissaire est obligé de faire de son mieux et peut fort bien consulter des spécialistes en la matière; il peut consulter n'importe quelle personne avant d'arrêter sa décision.

Mme MacInnis (Vancouver-Kingsway): Monsieur le président, pourquoi alors mentionne-t-on des recherches donnant lieu à l'invention?

M. Laidlaw: Il n'y a aucun critère fixe, prédéterminé. Il est presque impossible de mesurer d'après des critères ou des règles fixes fondés sur ces dispositions qui correspondent à l'expression, aux recherches donnant lieu à invention; il faut évidemment récompenser le détenteur pour les recherches qui ont donné lieu, qui ont permis l'invention; invention, ici, signifie le produit ou l'ingrédient qui a été l'objet de l'invention. Le prix est fondé là-dessus.

En réponse à une autre question, la loi actuelle ne tient pas compte de ce qui se produira après, comme les frais de promotion que le détenteur pourra assumer, à moins que ces facteurs ne soient déterminés par décret du conseil. Alors le commissaire devra en tenir compte.

Mme MacInnis (Vancouver-Kingsway): Monsieur le commissaire, il me semble que vous avez là une responsabilité très grande, que vous devez tout faire cela vous-même.

M. Laidlaw: Je n'ai pas dormi depuis 6 mois, monsieur le président.

Des voix: Vrai?

[Text]

Mrs. MacInnis (Vancouver-Kingsway): It would seem to me it might be well for this Committee to perhaps consider the advisability of getting a little help or a few regulations to make help available. I do not know at this stage what it would be, but it seems to me that is a tremendous sort of responsibility to put on one czar.

An hon. Member: Maybe he says his prayers regularly.

The Chairman: Mrs. MacInnis, are you finished?

Mrs. MacInnis (Vancouver-Kingsway): Yes, thank you.

Mr. Rynard: Mr. Chairman, I believe the Minister said that the Economic Council would be making a report. I wonder when that report is going to be in? Is it going to be in so that we on this Committee may have a look at it? What is the story on this?

Mr. Basford: At the risk of annoying the doctor, I am inclined to think we might not get the Economic Council report before we pass this Bill.

Mr. Rynard: I do not know why you think it would annoy me, Mr. Basford.

Mr. Basford: I sincerely hope that will not be the case. I do not expect the report from the Economic Council until late 1969 or 1970.

Mr. Rynard: On this particular point about drugs?

Mr. Basford: On patents, yes.

Mr. Rynard: Yes, on patents. Not until then?

Mr. Basford: Yes.

Mr. Rynard: You will not know until then what the report is?

Mr. Basford: That is why this part is in the regulations.

Mr. Rynard: I wonder if I could ask, Mr. Chairman...

[Interpretation]

Mme MacInnis (Vancouver-Kingsway): Peut-être le Comité devrait-il songer à vous aider à élaborer des règlements pour que vous soyez secondé dans vos efforts? Il me semble que c'est là une responsabilité monstre.

Une voix: Peut-être prie-t-il régulièrement?

Le président: Avez-vous terminé, madame MacInnis?

Mme MacInnis (Vancouver-Kingsway): Oui, merci.

M. Rynard: Monsieur le président, le ministre a dit, sauf erreur, que le Conseil économique du Canada allait présenter un rapport. Je me demande quand ce rapport va nous être présenté? Est-ce que notre Comité pourra l'étudier, en prendre connaissance?

M. Basford: Au risque de décevoir le docteur Rynard, je dois dire que nous ne l'aurons peut-être pas avant l'adoption du bill.

M. Rynard: Je ne sais pas pourquoi vous croyez que cela puisse me décevoir.

M. Basford: J'espère sincèrement que ce ne sera pas le cas. Mais je ne pense pas que le rapport du Conseil économique du Canada puisse être présenté avant peut-être la fin de 1969 ou 1970.

M. Rynard: Sur cette question ou sur les médicaments?

M. Basford: Sur les brevets.

M. Rynard: Sur les brevets. Pas avant?

M. Basford: Non.

M. Rynard: Vous ne saurez pas, évidemment, quelles sont les vues du Conseil économique?

M. Basford: C'est la raison pour laquelle ce passage reste dans les règlements.

M. Rynard: Je me demande, monsieur le président...

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Mr. Basford: Excuse me, doctor, one of the reasons is that we felt we were not competent to make a judgment on what additional factors should be included, particularly when the Economic Council was considering the whole question of patents and royalties.

M. Basford: La raison de cet état de choses, c'est que nous estimions que nous n'avions pas compétence pour ajouter d'autres pratiques, notamment, lorsque le Conseil économique se penche sur toute cette question des brevets et des redevances.

[Texte]

Mr. Rynard: I had an idea, Mr. Chairman, that it was to be in some time in February. Perhaps I was quite wrong in that.

Mr. Basford: February of this year?

Mr. Rynard: Yes.

Mr. Basford: No. I am hopeful of getting a report from the Economic Council on combines, as another part of this whole reference, not in February, but shortly thereafter, I hope.

Mr. Rynard: Then Mr. Chairman, I would like to ask how many manufacturers are operating Canadian patents that were patented in Canada originally and are in operation today?

Mr. Basford: I do not know whether we have figures on patents actually being worked or not. I will let the Commissioner speak in a minute. The figure we have, however, is that 95 per cent of the patents in Canada are owned outside of Canada; they are foreign-owned patents. This leaves 5 per cent which are Canadian-owned. I do not think we have any statistics. I do not think any would be possible to come by. But I will let Mr. Laidlaw answer for that. We have no idea how many of that five per cent are being worked.

Mr. Laidlaw: Mr. Chairman, the Minister is correct that we have no figures on the situation after a patent issues and if a monopoly is outstanding. There are no figures available as to whether or not the process of that patent is being worked. The Minister is correct in saying that 95 per cent of all the issued patents, and this applies to pharmaceuticals as well, are foreign-owned or foreign-created, and in certain cases they assign. For instance, the foreign corporation may assign its patent right in Canada to its Canadian subsidiary; it may not. It may licence its Canadian subsidiary; it may not. This is the situation.

Mr. Rynard: Mr. Chairman, could Mr. Laidlaw tell us how many have been assigned and how many have been otherwise handled, as he suggested?

Mr. Laidlaw: Mr. Chairman, I have no information on that.

Mr. Rynard: I wonder if we could have information on that. I bring this point up because it has to do with the development of research. If we are going to give patents here and if we are going to have people develop them here, it naturally follows that we are going to have more research. This is the point Dr. Ritchie was making and which you were going along with, that when you give them

[Interprétation]

M. Rynard: J'avais l'impression que le rapport allait être présenté en février de cette année.

M. Basford: Février de cette année?

M. Rynard: Oui.

M. Basford: Non, j'espère obtenir un rapport du Conseil économique sur les coalitions, peut-être pas en février, mais un peu plus tard.

M. Rynard: Monsieur le président, combien de fabricants font affaire grâce à des brevets canadiens?

M. Basford: J'ignore si nous avons des chiffres sur les brevets qui sont en vigueur présentement; les statistiques dont nous disposons en ce moment montrent que 95 p. 100 des brevets au Canada appartiennent à des étrangers et 5 p. 100 à des Canadiens. Je pense qu'il serait impossible d'obtenir une ventilation. Nous ignorons combien de ces 5 p. 100 sont exploités. Je laisse M. Laidlaw répondre.

M. Laidlaw: Je crois que le ministre a raison. Nous n'avons aucun chiffre sur la situation après l'émission d'un brevet et nous ignorons s'il y a un monopole. Il n'y a pas de chiffres pour montrer si l'article ou le processus breveté est effectivement exploité. Le ministre a tout à fait raison de signaler que 95 p. 100 de tous les brevets y compris les produits pharmaceutiques, appartiennent à des étrangers. Et dans certains cas, la société étrangère peut assigner ces droits de brevets à sa filiale canadienne ou non selon le cas, ou elle peut lui émettre un permis ou non; telle est la situation.

M. Rynard: Monsieur le président, je me demande si M. Laidlaw peut nous dire combien de sociétés étrangères ont assigné leurs brevets, ou procédé autrement.

M. Laidlaw: Je n'ai aucun renseignement là-dessus.

M. Rynard: Je me demande si nous pourrions en obtenir car ce qui nous intéresse, c'est toute la question des recherches. Si nous allons accorder des brevets qui seront mis au point ici, il s'ensuit que nous devons avoir de plus en plus de recherches. C'est ce que M. Ritchie a fait remarquer, on estime que si on leur accorde plus de fonds, on hausse sa valeur, mais on encouragera aussi les recher-

[Text]

more money it increases the value of it, but you might get more research. I am sure this is the point the Minister was making in his bill; he hopes to develop more research.

Mr. Laidlaw: Mr. Chairman, I think it might be a fairly painstaking job in a sense, a lengthy job. We could supply the information from assignments recorded in the patent office against drugs. It would be difficult to determine which of the drugs are prescription drugs or other drugs—drugs of another character, over-the-counter drugs. That is one point.

The second point would be that no licences need be registered in the patent office, and we would have no information as to the licensing aspect of a patent.

Mr. Basford: Mr. Chairman, the Watkins Report commented on the complete lack of information in this regard.

Mr. Rynard: Yes, I realize this.

Mr. Basford: It pointed out that that information was very much needed. I think the Economic Council is not just concerned with pharmaceuticals. But this is what they had been asked to look at, the place of the patent system in Canada, what it has done and what it should do. They will be seeking this information and trying to give us some guidance in that regard.

Mr. Rynard: I realize that, Mr. Minister. I was just hoping that we could have got some of that here. In a country like Australia, which in some ways is comparable to our own country, I was wondering what the patent rights are there, and how they compare with what we have in Canada. Could the Minister or Mr. Laidlaw tell us that?

• 1755

Mr. Basford: I think the Commissioner might have a better chance of telling you than I.

Mr. Laidlaw: Mr. Chairman, my answer to that question is going to be rather odd. I have heard—but it is just a rumour; I have had nothing cross my desk yet—that some changes are being made in the patent act in Australia with respect to this type of thing. But I do not have the information, at least not at the moment. I could get this information.

Mr. Rynard: Mr. Chairman, could we ask Mr. Laidlaw if he would look up this infor-

[Interpretation]

ches; je suppose que c'est l'objectif visé par le ministre dans son projet de loi, encourager la recherche.

M. Laidlaw: Monsieur le président, ce serait un travail très laborieux et très long. Nous pourrions obtenir les renseignements en consultant les cessions de brevets visant les produits pharmaceutiques au Bureau des brevets. Il sera peut-être difficile de déterminer lesquels de ces produits pharmaceutiques sont des médicaments qu'on ne vend que sur ordonnance ou les médicaments qu'on vend sans ordonnance.

Il se peut d'ailleurs qu'aucun brevet n'ait été inscrit au Bureau des brevets et nous n'aurions donc aucun renseignement à ce sujet.

M. Basford: Monsieur le président, le Rapport Watkins a déjà fait des commentaires sur le manque de renseignements à cet égard.

M. Rynard: Oui, je sais.

M. Basford: Il a fait ressortir la nécessité de ces renseignements. Il me semble que le Conseil économique ne se préoccupe pas seulement de produits pharmaceutiques mais on leur avait demandé précisément d'étudier le système des brevets, ses réalisations et ses attributions possibles. Ils font une étude à ce sujet et nous fourniront les renseignements voulus pour nous orienter.

M. Rynard: Je le sais, monsieur le ministre. J'aimerais cependant qu'on nous les transmette. Si nous prenions un pays comme l'Australie, par exemple, qui est assez semblable au nôtre, je me demande ce qui en est des droits de brevets et si cela peut se comparer à la pratique ici au Canada? Est-ce que le ministre ou M. Laidlaw pourrait nous renseigner?

M. Basford: Le commissaire est plus en mesure de répondre.

M. Laidlaw: Voici, je vais vous donner une réponse plutôt bizarre. J'ai entendu dire qu'on se prépare à faire des changements en Australie à ce sujet. Mais, je n'ai pas de renseignements en ce moment, quoique je pourrais en obtenir.

M. Rynard: On pourrait peut-être demander à M. Laidlaw d'obtenir ces renseigne-

[Texte]

mation and let us have it some time during our procedures?

Mr. Laidlaw: I would do that, Mr. Chairman.

The Chairman: Shall clause 1 carry?

Mr. Émard: Mr. Chairman I would like to ask Mr. Laidlaw a question. Have you tried to evaluate the role that the...

Je vais le dire en français parce qu'il y a des mots que je ne connais pas. Avez-vous essayé d'évaluer le rôle des brevets comme facteur du prix élevé des médicaments au Canada?

Mr. Laidlaw: No, Mr. Chairman. I am afraid that again falls into an economic category. It would be very difficult for me within my particular competence to give any opinions about it, but I am quite sure my colleagues here would be glad to elaborate on it.

Mr. Basford: The Restrictive Trade Practices Commission recommended that they should be done away with altogether. The Hall Commission recommended that what we are doing in this bill should be tried for five years, and if it did not work patents should be done away with altogether. The Harley Report recommended that we should have this bill. All of them had looked at the question.

Mr. Émard: Yes, but have you come up with certain facts to show us, for instance... Comment dit-on brevet, en anglais?

A mon avis, les brevets doivent avoir une certaine influence économique sur le coût des médicaments. Le comité Harley et plusieurs autres ont recommandé d'enlever les brevets, probablement parce qu'ils majorent le prix des drogues. Dans quelle proportion les brevets majorent-ils le prix des drogues, en avez-vous une idée?

Mr. Basford: I think I dealt with this on Tuesday. We cannot give you a precise figure. What the commissions came to the same conclusion on was that drug prices in Canada were unduly high. I mentioned on Tuesday that one economist, brought to the Harley Committee by the Province of Alberta, said this kind of action would reduce the price by 50 per cent. The Department has been careful to avoid coming up with any such figure, because through this measure we are creating more competitive conditions in the industry and we hope it will have an effect on drug prices. We are fairly sure it will have some effect, but to what extent, we do not know.

[Interprétation]

ments et de nous les transmettre plus tard au cours de nos délibérations?

M. Laidlaw: Oui, je le ferai bien volontiers.

Le président: Est-ce que l'article 1 est adopté?

M. Émard: Monsieur le président, je voudrais demander à M. Laidlaw s'il a essayé d'évaluer le rôle...

I'll say it in French because there are words I don't know. Have you tried to determine to what extent patents are responsible for the high cost of drugs in Canada?

M. Laidlaw: Non, monsieur le président, je pense que ceci tombe dans une autre catégorie économique et qu'il serait très difficile pour moi de formuler une opinion à ce sujet-là. Je suis certain que mes collègues ici seraient plus en mesure de répondre.

M. Basford: La Commission d'enquête sur les pratiques restrictives du commerce a dit qu'il faudrait se débarrasser de tout cela. La Commission royale d'enquête Hall a recommandé de mettre à l'essai pendant cinq ans ce que nous faisons, et que si cela ne marche pas, de laisser tomber. La Commission Harley a recommandé l'adoption de ce bill. Ils ont tous étudié cette question.

M. Émard: Avez-vous des faits à nous présenter? How do you say "brevet" in English? Patents must affect the cost of drugs. The Harley Committee and various others have recommended the removal of patents, probably because they increase the cost of drugs. Do you have any idea how much patents do raise drug prices?

M. Basford: Je pense que nous avons parlé de cela mardi; nous ne pouvons pas vous donner de chiffres précis. La Commission est arrivée à la même conclusion, que le prix des médicaments au Canada est trop élevé. J'ai mentionné mardi qu'un économiste, envoyé au Comité Harley par la province de l'Alberta, a dit que cette mesure pourrait diminuer le prix de 50 p. 100. Et le ministère a bien pris soin d'éviter de présenter un tel chiffre parce que cette mesure créera une plus forte concurrence dans l'industrie et nous espérons qu'elle influencera le prix des médicaments; mais il est impossible de prévoir dans quelle mesure.

[Text]

Mr. Émard: Do you think that the present Canadian royalty award compensates the patent holder for the expense that he has incurred for the research?

Mr. Basford: The bill says that the royalty is such as to give to the patentee due reward for his research, leading to the invention. Some patentees have told me, as I am sure they told you, that they want compensation in the royalty for the capital cost, and for promotional expenses of establishing a new drug. Some have said they want compensation if they have invented something; in which case the value to society should be measured in royalty. I explained to Dr. Rynard that we are leaving the Act as it was, and have the royalties reward the inventor or the patentee for his research, and such other factors as the Governor in Council may prescribe.

• 1800

The Economic Council might well come out and say that the patentee should be rewarded for his capital investment, or for his promotional costs in creating and developing a market for this drug, or if it is an invention of great value to society, that he should be compensated for it. I have no idea what the Economic Council is going to say. When it gives its opinion, we will have to sit down and determine whether or not we will agree with its opinion.

Mr. Émard: Following what Mr. Laidlaw said before, do you not believe that certain factors should be specified by Order in Council to facilitate the task of establishing the amount of money that should be given out for patents. For instance, I have here a report that was presented on Bill C-190 by Hoffman-La Roche, and they recommended:

Issuance by the Government of clear and concise rules and guidelines to the Commissioner of Patents (or any other person) and so on

And they had in there, for instance:

- (a) contents of application;
- (b) form in which it is to be presented;
- (c) service on patentee and other interested parties;
- (d) advertising of application;
- (e) contents and form of opposition;

(f) oral hearing and/or cross-examination;

(g) matters to be considered by the Commissioner;

(h) ground(s) for refusal;

[Interpretation]

M. Émard: Croyez-vous que les redevances compenseront les détenteurs de brevets pour les recherches qu'ils ont faites?

M. Basford: Le projet de loi dit que la redevance constitue une juste compensation pour les recherches qui ont mené à l'invention. Certains brevetés m'ont dit, et ils vous l'ont peut-être dit aussi, qu'ils s'attendent évidemment à ce que les redevances compensent pour les immobilisations, les dépenses de publicité, et ainsi de suite. Certain veulent des compensations pour une invention; les redevances pourraient évaluer la valeur de l'invention pour la société en général. J'ai expliqué au Dr. Rynard que nous ne modifions pas la Loi et que ces redevances sont la récompense de l'inventeur ou du breveté pour ses recherches, et certains autres facteurs liassés à la discrétion du gouverneur en conseil.

Le Conseil économique peut même nous dire qu'il faut compenser les immobilisations du breveté ou l'aider à payer les frais de publicité qu'entraîne la commercialisation de son produit, et que, s'il s'agit d'un médicament d'une grande valeur pour la société, il soit compensé en conséquence. Lorsqu'il nous présentera son rapport, il faudra déterminer si nous sommes d'accord avec lui.

M. Émard: D'après ce que dit Monsieur Laidlaw, ne croyez-vous pas qu'il faudrait préciser certains facteurs, par un arrêté en conseil, afin de simplifier la tâche relative à l'établissement de cette somme d'argent à verser pour les brevets. J'ai ici copie d'un rapport présenté sur le Bill C-190 par la compagnie Hoffman-LaRoche et dans lequel elle recommande:

La publication, pour le gouvernement, de règles et de conseils clairs et précis à l'intention du Commissaire aux brevets (ou de toute autre personne)...

Ce rapport traite entre autres:

- (a) du contenu de la demande;
- (b) de la façon de la présenter;
- (c) du détenteur du brevet et des autres parties intéressées;
- (d) de la publication de la demande;
- (e) de l'opposition à la demande, de son contenu et de la façon de la présenter;
- (f) de la présentation verbale et/ou du contre-interrogatoire;
- (g) des questions que doit étudier le Commissaire;
- (h) de la raison (les raisons) qui peut (peuvent) entraîner un refus;

[Texte]

(i) ground(s) for revocation of a licence and procedure to be followed;

(j) elements to be included in royalty;

(k) terms of licence;

Mr. Basford: Most of the things that brief mentions would be totally inappropriate to have in a statute—the form of hearings, the type of hearings, this sort of thing. They are covered in sub-clause (14) which establishes the right to make regulations covering such things as:

(c) respecting the form and manner in which an applicant or patentee may make representations to, and adduce evidence before, the Commissioner. . .

and so on. The bill establishes the general principle that the Commissioner will receive an application, that he will adjudicate on that application, that parties will be heard on the application. Those matters of form that that brief spells out are quite properly matters to be contained within regulations. It is a common procedure under all sorts of other acts that the form of presentation and so on is determined by regulation.

I disagree with the brief. We have not accepted this suggestion of the brief relative to, I think it was, sub-paragraph (j), that other matters should be included in royalty. We have left that because of the Economic Council of Canada's study. We have left that also to be prescribed by regulation, if we accept the recommendations or whatever the Economic Council of Canada says about it.

Mr. Émard: Mr. Chairman, it is 6.05 p.m. Shall we call it 6 o'clock?

The Chairman: Do you have another committee, Mr. Émard?

Mr. Émard: No, but are you willing to carry on?

The Chairman: Is it the wish of the Committee that we carry on?

M. Thomas (Maisonnette): Monsieur le président, M. Émard semblait être à peu près le dernier orateur avant l'adoption; s'il y en a d'autres, et si ce n'est pas trop long, nous pouvons peut-être attendre. Nous aurons au moins la consolation d'en avoir passé un.

Le président: L'article 1 est-il adopté?

M. Émard: Je n'ai pas fini, monsieur le président. L'usage n'est-il pas, quand un bill

[Interprétation]

(i) de la raison (les raisons) qui peut (peuvent) entraîner la révocation d'une licence et de la procédure à suivre en pareil cas;

(j) des éléments à inclure au chapitre des redevances;

(k) de la durée de la licence;

M. Basford: La plupart des choses que vous avez mentionnées seraient tout à fait inappropriées dans une loi. Elles sont prévues au paragraphe 14 qui permet l'établissement de règlements

c) concernant la forme et la manière selon lesquelles un demandeur ou un breveté peut présenter des observations et produire la preuve devant le commissaire

et ainsi de suite. La loi établit que le commissaire reçoit les demandes, qu'il rend une décision à leur sujet et que les parties en cause pourront présenter leurs arguments lors de l'étude de la demande. Ces suggestions que contient le mémoire touchent des questions qui relèvent des règlements. La procédure normale, quel que soit le domaine touché par la loi, veut que la procédure à suivre pour la présentation des demandes soit établie dans les règlements.

Je ne suis pas d'accord avec le mémoire. Nous avons rejeté cette suggestion du mémoire au sujet de l'alinéa j) qui traite des autres aspects qui devraient être inclus dans les redevances. Nous l'avons laissée de côté en raison de l'étude du Conseil économique du Canada. Nous avons également décidé de l'inclure dans les règlements si nous acceptons les recommandations ou tout ce que peut nous dire, à ce sujet, le Conseil économique du Canada.

M. Émard: Il est 6 heures 15, monsieur le président.

Le président: Devez-vous assister à la séance d'un autre comité, monsieur Émard?

M. Émard: Non. Avez-vous l'intention de continuer?

Le président: Le Comité est-il d'accord pour que nous continuions?

Mr. Thomas (Maisonnette): Mr. Chairman, I thought Mr. Émard was the last speaker before the adoption; if there are others, and they do not take too long, we could wait maybe. We shall at least have the consolation of having adopted one.

The Chairman: Shall clause 1 carry?

Mr. Émard: I am not through yet, Mr. Chairman. Is it not customary when a bill is

[Text]

est présenté au comité, de différer l'acceptation de l'article 1, de passer aux autres articles puis de revenir si parfois on le veut? Cela nous donnerait la chance, par exemple, de revenir sur l'article 1, au cas où vous décideriez que certains témoins devraient être entendus.

Le président: D'après l'article 75 du nouveau règlement, si l'article est court, on peut en rapporter l'étude à plus tard; mais lorsque c'est un article aussi important que l'article 1 du bill C-102, on ne peut pas le faire d'après les nouveaux règlements, règlement numéro 75.

M. Émard: Merci, monsieur le président.

• 1805

Le président: L'article 1 est-il adopté?

M. Émard: Une autre question s'il vous plaît. Je n'ai pas l'intention comme je vous ai dit, de faire prolonger les débats éternellement.

Monsieur le ministre, votre intention est-elle après que ce bill aura été adopté, de suivre la même procédure pour les brevets de toutes les autres industries ou bien vous limiterez-vous aux brevets de l'industrie pharmaceutique?

Mr. Basford: The original Section 41 of the Patent Act brought in in 1923 related to patents on foods and drugs. We are leaving the situation with regard to the granting of compulsory licences on food exactly as it is today, and we are only amending that portion relative to drugs or medicines, as it is plainly said in the bill. With regard to all the rest of the Patent Act I have no intention of making any amendments whatsoever. I have made that very clear. The question of patents is before the Economic Council of Canada in a reference made two years ago to report to the government in light of the government's long-term economic objectives to report on patents, copyright and trade marks.

My predecessor made it clear, I have made it clear, that we have no intention of amending, for example, the Combines Investigation Act or the Patent Act or the Copyright Act, or the Trade Marks Act until we have those reports. We do not believe in piecemeal amendment of the Act, so that when the report of the Economic Council of Canada comes in, we will have to study that report, hear representations from those concerned with the report and, depending on what the report says, revise the Patent Act. That is all

[Interpretation]

presented to a Committee, to defer adoption of clause 1 and move on to the other clauses and come back later on if we like? This would enable us, for instance, to come back to clause 1 in case you were to decide that certain witnesses should be heard.

The Chairman: According to Standing Order 75 of the new Standing Orders, if clause 1 is short, consideration of it may be delayed. But when it is a clause that is as important as this Clause 1 of Bill C-102, we cannot do as you propose according to Standing Order 75.

Mr. Émard: Thank you, Mr. Chairman.

The Chairman: Shall clause 1 carry?

Mr. Émard: Still another question please. I do not intend to be too long on this.

I ask a question to the Minister. After the adoption of this bill, do you intend to adopt the same procedure for all patents of all other industries, or do you want to concentrate only on drugs patents?

M. Basford: L'article 41 du texte original de la *Loi sur les brevets* adopté en 1923 traitait des brevets sur les aliments et les drogues. Nous ne modifions en rien la situation qui prévaut actuellement pour l'émission de licences obligatoires sur la nourriture. Nous ne faisons qu'amender cette section qui traite des médicaments ou des drogues, tel qu'indiqué dans le bill. Pour ce qui est du reste de la *Loi sur les brevets* je n'ai nullement l'intention d'y apporter des modifications. La question des brevets est présentement étudiée par le Conseil économique du Canada à qui le gouvernement a demandé à la lumière de ses objectifs à long terme, de lui présenter un rapport sur les brevets, les droits d'auteurs et les marques de commerce.

Mon prédécesseur a été clair à ce sujet et je l'ai également été: nous n'avons pas l'intention de modifier la *Loi sur les coalitions*, la *Loi sur les brevets*, la *Loi sur les droits d'auteur* ou la *Loi sur les marques de commerce* tant que nous n'aurons pas ces rapports. Il ne faut pas faire de petites modifications ici et là. Quand nous aurons le rapport du Conseil économique du Canada, il faudra l'étudier dans son ensemble, entendre les intéressés et selon ce qu'en dira le rapport, nous réviserons peut-être la *Loi des brevets*. J'ignore ce

[Texte]

in the future. I have no idea what the Economic Council of Canada is going to have to say about patents.

I am making a rather lengthy answer because one of the charges made against me is that this is the beginning of the end of the Patent Act system, and, at one point, the Pharmaceutical Manufacturers Association of Canada endeavoured to line up 100 or more leaders in the business community by getting them believing that this was an attack on the patent system, and that the patents they held, which had nothing to do with drugs, were going to go out the window. That is all nonsense, utter nonsense, and baseless propaganda. This amendment relates to the patents on drugs.

I made it very clear that we are not making further amendments until we have the report of the Economic Council of Canada.

Clause 1 agreed to.

Mr. Rynard: Mr. Chairman, I would like to bring back a Basic Principle. I was on the Harley Committee, on the steering committee of that Committee, and one of their fundamental principles was that:

the Committee's conclusions must be such that any of its recommendations, if adopted, should continue to maintain a proper balance between industry and consumer and take into consideration the importance of continued and increased scientific research in Canada. No recommendations could be considered, which, although designed to lower drug prices in Canada, might produce drugs of questionable safety or have a detrimental effect upon other aspects of the Canadian economy.

The question I would like to ask of Mr. Laidlaw is: is industry consulted before patents are granted or drugs allowed in or given their compulsory licence?

Mr. Laidlaw: I would think, Mr. Chairman, that once the passage of this bill takes place, in so far as the importation of any particular drug is concerned it is a matter solely between the applicant and the patentee.

• 1810

Mr. Rynard: Then I would take it that industry and research are not considered?

Mr. Laidlaw: Yes, of course, they are considered, but not considered in general. It is a

[Interprétation]

que le Conseil économique nous dira au sujet des brevets.

Ma réponse est longue parce qu'on a dit, entre autres choses, que c'était la fin de la *Loi sur les brevets*. A un moment donné, l'Association des manufacturiers de produits pharmaceutiques du Canada a tenté de faire croire à une centaine de dirigeants du monde des affaires que c'en était fini du système des brevets et que les brevets qu'ils détenaient, qui n'étaient nullement reliés au domaine des médicaments, seraient perdus. C'est tout à fait sans fondement. Cette modification concerne uniquement les brevets sur les médicaments. C'est très clair. Nous n'apporterons pas d'autres modifications avant de recevoir le rapport du Conseil économique du Canada.

L'article 1 est adopté.

M. Rynard: J'aimerais revenir sur une question de principe. J'ai fait partie du comité Harley, de son comité directeur. L'un de ses principes fondamentaux était que

ses conclusions doivent être telles que, s'il arrivait que l'une de ses recommandations soit adoptée, il faudrait maintenir l'équilibre approprié entre l'industrie et le consommateur et tenir compte de l'importance de continuer et d'accroître la recherche scientifique au Canada. Ainsi, on ne devrait retenir aucune recommandation qui, même si elle a pour objet de réduire le prix des produits pharmaceutiques au Canada, pourrait en même temps affecter défavorablement l'innocuité des médicaments et avoir un effet nuisible sur d'autres aspects de l'économie canadienne.

La question que j'aimerais poser à M. Laidlaw est la suivante: est-ce que l'industrie est consultée avant que les brevets soient accordés, avant de permettre l'importation de médicaments ou avant que ne soit accordée la licence obligatoire?

M. Laidlaw: Une fois que le bill aura été adopté, et en ce qui concerne l'importation d'un produit quelconque, ce sera du seul ressort du requérant et du breveté.

M. Rynard: Donc, l'industrie n'est pas consultée?

M. Laidlaw: Nous le faisons, mais pas de façon générale. Il s'agit simplement d'une

[Text]

straight application for possibly one single drug from one single patentee.

Mr. Rynard: Do you consult industry or research on its ramifications? Who advises you on this?

Mr. Laidlaw: I can if I so choose.

Mr. Rynard: Will you choose?

Mr. Laidlaw: I hesitate to answer this question at the moment because I have never given it this type of consideration.

Mr. Rynard: I rather agree with Mrs. MacInnis. You have some awesome power there. If you do not have somebody to help and advise you on this you could become a real czar.

Mr. Laidlaw: It may be that on dark nights I will have to look behind me!

Mr. Rynard: I merely raised that point to make it very clear that the industry may not be consulted or research may not be considered when you grant that patent.

Mr. Laidlaw: Research must be considered.

Mr. Rynard: I wanted to make abundantly clear that this was a specific recommendation of the Harley Committee. That is all I sought to do.

Clause 1 agreed to.

On clause 2: *Time limit deemed extended.*

Mr. Saltzman: Mr. Chairman. We have made some progress. We have carried one clause. Perhaps that is something we should be grateful for. Before going on to clause 2 may I suggest that we adjourn at this time, and, at the same time, indicate to you, Mr. Chairman, that at an appropriate point I will be moving a small amendment to the Patent Act. This is not for debate. It is merely to give the Committee and the Minister a chance to think about it.

That Section 19 of The Patent Act, extending the right of the Crown in the name of the Government of Canada to use patented inventions "paying to the patentee such as the Commissioner reports to be a reasonable compensation for the use" thereof be expanded to include provincial governments and their agencies.

I understand this to be one of the recommendations of The Royal Commission on Health Services.

[Interpretation]

requête pour une seule drogue et provenant d'un seul détenteur de brevet.

M. Rynard: Est-ce que vous consultez l'industrie ou les services de recherches sur ses ramifications? Qui vous conseille en cette matière?

M. Laidlaw: Je le puis si je le désire.

M. Rynard: Est-ce que vous le désirerez?

M. Laidlaw: J'hésite à répondre à cette question immédiatement, car je n'ai pas encore réfléchi longuement.

M. Rynard: J'aborderais dans le même sens que madame MacInnis; je crois que vous avez là de vastes pouvoirs et s'il n'y a personne qui vous aide et vous avise, vous pourriez facilement devenir un vrai tsar.

M. Laidlaw: C'est possible que je doive me surveiller et faire attention.

M. Rynard: Je voulais simplement vous signaler que l'industrie ne sera peut-être pas consultée, ou les services de recherches peut-être même pas considérés lors de l'attribution d'un brevet.

M. Laidlaw: On doit considérer la recherche.

M. Rynard: Et c'était là précisément une recommandation de la commission Harvey; c'est tout.

L'article 1 est adopté. A l'article 2, le délai est censé prorogé.

M. Saltzman: Je crois que nous avons fait certain progrès: nous avons adopté un article. Nous devrions nous entre féliciter. J'aimerais proposer que nous ajournions maintenant le débat, mais avant, monsieur le président, je vous signale que je proposerai un amendement, à la Loi sur le brevet; je ne veux pas engager maintenant le débat, c'est tout simplement pour donner au comité et au ministre l'occasion d'y songer. Voici le texte:

Que l'article 19 de la Loi sur les brevets, donnant à la Couronne au nom du gouvernement du Canada, le droit d'utiliser des inventions brevetées en payant à leur propriétaire des redevances jugées raisonnables par le Commissaire comprennent aussi les gouvernements provinciaux et à leurs agences.

C'était, je crois, une recommandation de la Commission royale d'enquête sur les services

[Texte]

This is by way of notice only Mr. Chairman.

The Chairman: Shall Clause 2 carry?

Mr. Émard: I beg your pardon, Mr. Chairman. There is a motion on the floor, and I do not think it is debatable.

The Chairman: I do not think it is a motion.

Mr. Émard: Yes, there is a motion, I heard very distinctly this time. It is a motion.

Mr. Saltsman: It was a suggestion to the Chair to consider adjournment. However, I will do whatever the Committee wishes.

Mr. Basford: I am not speaking on the motion to adjourn, but I should point out that unfortunately Mr. Laidlaw has to go to Paris next week...

Mr. Émard: Did you say unfortunately?

Mr. Basford: ...to attend an international copyright convention. If we meet on Tuesday it will be impossible for Mr. Laidlaw to be here. It is a rather important conference and he could not be excused.

I do not know whether or not the Committee is planning to meet tomorrow morning for an hour and a half before Mr. Laidlaw leaves, but even if it were next week I am sure there are a few of us here who know something about patents and could answer the questions.

The Chairman: Shall we sit tonight?

Mrs. MacInnis (Vancouver-Kingsway): Mr. Chairman, may I suggest that, in all fairness, the Steering Committee ought to meet before we have another session?

The Chairman: Is that agreed by everyone?

Mr. Basford: For my own information and that of the officials may I ask whether the Steering Committee will be meeting before our next sitting on Tuesday?

The Chairman: Yes, sir. It is my intention to call a meeting of the Steering Committee within the next 24 hours.

Gentlemen, the meeting is adjourned until Tuesday, February 4, 1969 at 11 a.m.

[Interprétation]

de Santé. C'est simplement un avis de résolution, monsieur le président.

Le président: L'article 2 est-il adopté?

M. Émard: Monsieur le président, je crois que nous sommes saisis d'une motion qui ne doit pas faire l'objet d'un débat.

Le président: Ce n'était pas une motion, je crois.

M. Émard: Oui, c'est une motion, j'ai entendu très distinctement cette fois, c'est une motion.

M. Saltsman: Monsieur le président, c'était une suggestion quant à l'ajournement du débat. Je suivrai cependant la volonté du Comité.

M. Basford: Je ne parle pas maintenant de motion d'ajournement, mais M. Laidlaw, doit malheureusement se rendre à Paris la semaine prochaine...

M. Émard: Avez-vous dit malheureusement?

M. Basford: Pour participer à une conférence internationale sur les droits d'auteur. Si nous nous réunissons mardi, M. Laidlaw ne pourra pas venir témoigner. C'est une conférence très importante, et qu'il ne peut manquer. Que le comité veuille ou non se réunir demain matin, une heure et demie avant le départ de M. Laidlaw, je suis sûr qu'à la réunion de la semaine prochaine, certains d'entre nous qui sommes au courant de la question des brevets pourront répondre à vos questions en son absence.

Le président: Siégerons-nous ce soir?

Mme MacInnis (Vancouver-Kingsway): Le comité directeur, à mon avis, devrait se réunir avant notre prochaine séance.

Le président: Est-ce que tout le monde est d'accord?

M. Basford: Pour ma propre gouverne et celle des fonctionnaires, puis-je savoir si le comité directeur se réunira avant la prochaine séance du Comité, mardi prochain?

Le président: Oui, je vais convoquer une réunion du comité directeur au cours des prochaines 24 heures. Messieurs, la séance est levée jusqu'au mardi matin 4 février à 11 heures.

OFFICIAL BILINGUAL ISSUE

FASCICULE BILINGUE OFFICIEL

HOUSE OF COMMONS

CHAMBRE DES COMMUNES

First Session

Première session de la

Twenty-eighth Parliament, 1968-1969

vingt-huitième législature, 1968-1969

STANDING COMMITTEE

COMITÉ PERMANENT

ON

DE LA

**HEALTH, WELFARE AND
SOCIAL AFFAIRS**

**SANTÉ, DU BIEN-ÊTRE SOCIAL
ET DES AFFAIRES SOCIALES**

Chairman

M. Gaston Isabelle

Président

MINUTES OF PROCEEDINGS
AND EVIDENCE

PROCÈS-VERBAUX ET
TÉMOIGNAGES

No. 13

TUESDAY, FEBRUARY 4, 1969

LE MARDI 4 FÉVRIER 1969

Respecting

Concernant

BILL C-102,

Le BILL C-102,

An Act to amend the Patent Act, the
Trade Marks Act and the Food and
Drugs Act.

Loi modifiant la Loi sur les brevets, la Loi
sur les marques de commerce et la Loi
des aliments et drogues.

Appearing:

Ont comparu:

Minister of Consumer and
Corporate Affairs
Parliamentary Counsel

Hon. Stanley Ronald Basford
M. Maurice Ollivier, Q.C.

Ministre de la Consommation
et des Corporations
Conseiller parlementaire

WITNESSES—TÉMOINS

(See Minutes of Proceedings)

(Voir Procès-verbaux)

L'Imprimeur de la Reine, Ottawa, 1969

The Queen's Printer, Ottawa, 1969

STANDING COMMITTEE ON
HEALTH, WELFARE AND
SOCIAL AFFAIRS

Chairman
Vice-Chairman

M. Gaston Isabelle
Mr. Steve Otto

and Messrs.
et Messieurs

COMITÉ PERMANENT DE LA
SANTÉ, DU BIEN-ÊTRE SOCIAL
ET DES AFFAIRES SOCIALES

Président
Vice-président

¹ Allmand,
² Boulanger,
Forget,
Fortin,
Gendron,
Godin,

Guilbault,
Haidasz,
Howe,
Mrs. MacInnis (M^{me}),
³ McBride,
Monteith,

Ritchie,
Robinson,
Rynard,
Saltsman,
Thomas (*Maisonneuve*),
Yewchuk—(20).

(Quorum 11)

La secrétaire du Comité:
Gabrielle Savard
Clerk of the Committee.

Pursuant to S.O. 65(4) (b)

Conformément à l'article 65(4)b) du
Règlement

¹ Replaced Mr. Francis on February 3.

¹ Remplace M. Francis le 3 février.

² Replaced Mr. Foster on February 3.

² Remplace M. Foster le 3 février.

³ Replaced Mr. Perrault on February 4.

³ Remplace M. Perrault le 4 février.

(Text)

MINUTES OF PROCEEDINGS

TUESDAY, February 4, 1969.

(16)

The Standing Committee on Health, Welfare and Social Affairs met this day at 11.10 o'clock a.m. The Chairman, Mr. Gaston Isabelle, presided.

Members present: Mrs. MacInnis, and Messrs. Boulanger, Forget, Gendron, Godin, Guilbault, Haidasz, Howe, Isabelle, McBride, Monteith, Otto, Ritchie, Robinson, Saltsman, Thomas (*Maisonneuve*), Yewchuk—(17).

Other Members present: Messrs. Émard and Watson.

Appearing: The Hon. Stanley Ronald Basford, Minister of Consumer and Corporate Affairs; Mr. Maurice Ollivier, Parliamentary Counsel.

Witnesses: Mr. D. H. W. Henry, Q.C., Director of Investigation and Research, Combines Investigation Act, Department of Consumer and Corporate Affairs; Dr. R. A. Chapman, Director General, Food and Drug Directorate, Department of National Health and Welfare.

The Committee resumed consideration of Bill C-102, An Act to amend the Patent Act, the Trade Marks Act and the Food and Drugs Act.

The Chairman presented the Third Report of the Subcommittee on Agenda and Procedure as follows:

The Subcommittee recommends:

1. That where it had been directly approached by those who wanted to appear as witnesses, the Secretary inform them of the Committee's resolution of January 28;
2. That a letter be sent to Dr. Darrach including a copy of Bill C-102, ac-

(Texte)

PROCÈS-VERBAL

Le MARDI 4 février 1969.

(16)

Le Comité permanent de la Santé, du Bien-être social et des Affaires sociales se réunit aujourd'hui à 11 h. 10 de l'avant-midi sous la présidence de M. Gaston Isabelle.

Présents: M^{me} MacInnis, MM. Boulanger, Forget, Gendron, Godin, Guilbault, Haidasz, Howe, Isabelle, McBride, Monteith, Otto, Ritchie, Robinson, Saltsman, Thomas (*Maisonneuve*), Yewchuk—(17).

Autres députés présents: MM. Émard et Watson.

Ont comparu: L'hon. Stanley Ronald Basford, ministre de la Consommation et des Corporations; M. Maurice Ollivier, conseiller parlementaire.

Témoins: M. D. H. W. Henry, Q.C., directeur du Bureau des enquêtes et recherches, Loi relative aux enquêtes sur les coalitions, ministère des Affaires de la Consommation et des Corporations; D^r R. A. Chapman, directeur général de la Direction des aliments et drogues, ministère de la Santé nationale et du Bien-être social.

Le Comité reprend l'étude du Bill C-102, Loi modifiant la Loi sur les brevets, la Loi sur les marques de commerce et la Loi des aliments et drogues.

Le Président présente le Troisième rapport du sous-comité du programme et de la procédure qui se lit comme suit:

Le sous-comité recommande:

1. Que dans le cas où ceux qui désirent témoigner devant le Comité communiquent directement avec le sous-comité, la secrétaire fasse tenir aux intéressés copie de la résolution passée le 28 janvier;
2. Qu'une lettre soit adressée au D^r Darrach en y ajoutant un exemplaire

knowledging his telegram and asking if Dr. Ford, Dr. Pernarowski and himself are in possession of brand new evidence, in accordance with the Committee's resolution of January 28th, and relevant to the said Bill;

3. That the chairman contact the Chairman of the Economic Council regarding his availability to answer questions of an economic nature.

On motion of Mr. McBride, seconded by Mr. Robinson, the Third Report of the Subcommittee was adopted unanimously.

In accordance with notice given at the previous meeting, Mr. Saltsman proposed the following amendment:

"That Section 19 of The Patent Act, extending the right of the Crown in the name of the Government of Canada to use patented inventions paying to the patentee such as the Commissioner reports to be a reasonable compensation for the use, thereof be expanded to include provincial governments and their agencies."

The Chairman ruled the amendment out of order.

On clause 2

Mr. Saltsman moved that proposed section 84 be amended by adding thereto after subsection (3) the following subsection:

"(4) The Minister shall, as soon as possible, for the end of each fiscal year, prepare a report on the administration of this Act during that fiscal year and shall cause such a report to be laid before Parliament forthwith, upon the completion thereof, or if Parliament is not sitting on any of the first fifteen days, next thereof that Parliament is sitting."

The Parliamentary Counsel was heard after which the Chairman ruled the amendment out of order.

du Bill C-102, pour accuser réception de sa dépêche et lui demander si le D^r Ford, le D^r Pernarowski et lui-même sont en mesure d'apporter des éléments entièrement nouveaux, suivant la résolution adoptée le 28 janvier, et pertinents au Bill C-102.

3. Que le Président communique avec le Président du Conseil Économique pour lui demander s'il serait disponible pour répondre aux questions touchant le domaine économique.

Sur la proposition de M. McBride, appuyé par M. Robinson, le Troisième Rapport du sous-comité est adopté à l'unanimité.

Suivant l'avis donné à la réunion précédente, M. Saltsman propose l'amendement ci-dessous:

«Que l'article 19 de la Loi sur les brevets, qui accorde à la Couronne agissant au nom du gouvernement du Canada le droit d'utiliser des inventions brevetées en payant au breveté pour l'utilisation de l'invention, la somme que, dans un rapport, le Commissaire estime être une indemnité raisonnable, soit étendue de façon à comprendre les gouvernements provinciaux et leurs organismes.»

Le Président déclare l'amendement non recevable.

A l'article 2

M. Saltsman propose que l'article 84 soit modifié en y ajoutant, après le paragraphe (3), le paragraphe suivant:

«(4) Le Ministre doit, aussitôt que possible, pour la fin de chaque année financière, préparer un rapport sur l'application de la présente Loi au cours de ladite année et faire déposer sans délai ce rapport au Parlement dès son achèvement, ou si le Parlement n'est pas alors en session, l'ur quelconque des quinze premiers jours où il siège par la suite.»

Le Conseiller parlementaire est consulté après quoi le Président déclare l'amendement non recevable.

After debate, clause 2 carried.

On clause 3

Mr. Henry explained what the amendment to the Trade Marks Act is designed to do and was questioned thereon.

Dr. Chapman also supplied information.

At 12.30 p.m., the Vice-Chairman took the Chair.

The questioning continuing, at 1.00 o'clock p.m. the Vice-Chairman adjourned the meeting to 11.00 o'clock a.m. Thursday, February 6.

Après discussion l'article 2 est adopté.

A l'article 3

M. Henry donne des explications sur le but des modifications proposées à la Loi sur les marques de commerce et il est interrogé.

Le D^r Chapman fournit aussi des explications.

A 12 h. 30 le vice-président prend le fauteuil.

L'interrogatoire n'étant pas terminé, à une heure de l'après-midi le vice-président ajourne la séance à 11 heures du matin jeudi le 6 février.

La secrétaire du Comité,
Gabrielle Savard,
Clerk of the Committee.

[Texte]

EVIDENCE

(Recorded by Electronic Apparatus)

Tuesday, February 4, 1969

• 1114

The Chairman: Gentlemen, I now see a quorum. I will open the meeting.

We are resuming consideration of Bill C-102. Before we do so I wish to inform the Committee that the Subcommittee on Agenda and Procedure met on Friday and agreed to present its third report. It is as follows:

(See Minutes of Proceedings.)

Is there any discussion on the report?

M. Émard: Monsieur le président, je n'ai parlé d'aucun témoin dans ma lettre. M. Rock en a peut-être parlé, mais pas moi.

Le président: Vous avez fait, si je me souviens bien, six ou sept recommandations.

M. Émard: Oui, mais je n'ai parlé d'aucun témoin.

Le président: Non, mais il se dégageait une impression de la lettre, à savoir que vous vouliez plus de détails sur les conséquences économiques.

M. Émard: D'accord, d'accord.

The Chairman: Is there any further discussion on the report? If not, may I have a motion for its adoption?

Mr. McBride: I so move.

Motion agreed to.

On clause 2: *Time limit deemed extended.*

Mr. Monteith: Mr. Chairman, before we start to consider the Bill again may I ask if any action has been taken as a result of the Subcommittee's report?

The Chairman: No, sir; we were waiting for the approval of the Committee to proceed with the its recommendations.

Mr. Monteith: It is proposed to hold the preamble open? You are suggesting that we go right through the Bill and complete it even through these people have not yet been contacted?

The Chairman: No; but I, as Chairman, as was recommended, cannot contact the Chair-

[Interprétation]

TÉMOIGNAGES

(Enregistrement électronique)

Le mardi 4 février 1969

Le président: Messieurs, je vois que nous avons quorum. La séance est ouverte.

Nous allons reprendre l'étude du bill C-102. Mais avant que de ce faire, j'aimerais vous informer que le sous-comité du programme et de la procédure s'est réuni vendredi et a décidé de présenter le rapport suivant:

(Voir le procès-verbal.)

Mr. Émard: Mr. Chairman, I do not believe that I mentioned any witness in my letter. Perhaps Mr. Rock did so, but I certainly did not.

The Chairman: If I remember well, you made six or seven recommendations in your letter.

Mr. Émard: Yes, but I did not mention any witness as such.

The Chairman: No, but the letter gave the impression that you wanted to have more details on the economic consequences.

Mr. Émard: I agree.

Le président: Y a-t-il d'autres discussions du rapport?

Sinon, j'aimerais qu'on présente une motion en vue de l'adoption du rapport.

M. McBride: Je propose.

La motion est adoptée.

L'article 2—*Le délai est censé prorogé.*

M. Monteith: Avant de reprendre l'étude du bill, est-ce qu'on a pris des dispositions par suite du rapport du sous-comité?

Le président: Non, monsieur, car nous attendons l'approbation du comité pour appliquer ce rapport.

M. Monteith: On nous demande de réserver le préambule? Voulez-vous que nous complétions l'étude du bill même si ces gens n'ont pas encore été contactés?

Le président: Non. Mais, comme président, je ne puis inviter le président du Conseil

[Interpretation]

man of the Economic Council without consulting the Committee. If the Committee agrees, as it did, I will contact him this afternoon so that he can be with us in the near future.

Mr. Saltsman: Mr. Chairman, on a point of order. I indicated at our previous meeting that I intended to move an amendment to the Patent Act. Is it my understanding that you are moving off the Patent Act?

The Chairman: Not yet; we still have to pass Clause 2.

Mr. Saltsman: Of the Patent Act?

The Chairman: Do you wish to proceed with your amendment now?

Mr. Saltsman: Yes. Are copies of the amendment to the Patent Act available?

The Chairman: Shall I read it instead of passing it around?

Mr. Saltsman: Yes.

The Chairman: It is moved by Mr. Saltsman:

That Section 19 of The Patent Act, extending the right of the Crown in the name of the Government of Canada to use patented inventions "paying to the patentee such as the Commissioner reports to be a reasonable compensation for the use", thereof be expanded to include provincial governments and their agencies.

I thank Mr. Saltsman for having given me notice of the proposed amendment. I must however, rule it out of order because it is not relevant, is outside the scope of the Bill and introduces new matter foreign to that of the Bill as agreed to on first and second reading.

The effect of the amendment to section 41 of the Patent Act does not open the whole act to amendment and to the enacting of new clauses. If you want a reference, it is Article 402 of Beauchesne.

Shall Clause 2 carry?

• 1120

M. Émard: Monsieur le président, si certains des témoins apparaissaient devant le Comité après l'adoption définitive du bill, leur témoignage sera-t-il encore utile?

Le président: Leur témoignage serait très utile, monsieur Émard.

M. Émard: De quelle manière?

[Text]

économique sans consulter le comité. Si le comité consent, je vais me mettre en communication avec lui dès cet après-midi, afin qu'il soit présent à une prochaine séance du conseil.

M. Saltsman: J'en appelle au Règlement. J'avais indiqué à la dernière réunion que je comptais présenter un amendement à la *Loi sur les brevets*. Dois-je comprendre maintenant que nous quittons la *Loi sur les brevets*.

Le président: Non, il nous reste encore l'article 2 à étudier.

M. Saltsman: De la *Loi sur les brevets*?

Le président: Voulez-vous présenter votre amendement dès maintenant?

M. Saltsman: Oui. Est-ce qu'il y a des copies de l'amendement à la *Loi sur les Brevets*, disponibles?

Le président: Puis-je vous en donner lecture, ou dois-je distribuer le texte?

M. Saltsman: Lisez, s'il vous plaît.

Le président: Il est proposé par M. Saltsman:

Que l'article 19 de la *Loi sur les brevets*, donnant à la Couronne, au nom du gouvernement du Canada, le droit d'utiliser des inventions brevetées en payant au détenteur du brevet des redevances jugées raisonnables par le Commissaire comprenne aussi les gouvernements provinciaux et leurs agences.

Je remercie M. Saltsman d'avoir présenté l'avis d'amendement. Cependant, je dois le déclarer irrecevable car il ne se rattache pas au sujet touché par le bill, et présente des questions étrangères à la teneur du bill tel que lu en première et deuxième lecture.

L'amendement qui vise l'article 41 de la *Loi sur les brevets* n'ouvre pas la porte à des modifications de toute la loi, et ne donne pas lieu à de nouveaux articles. C'est prévu à l'article 402 de Beauchesne.

L'article 2 est-il adopté?

Mr. Émard: Mr. Chairman, if some of the witnesses should appear before the Committee could you tell us whether their testimonial would still be useful if the Bill is already carried?

The Chairman: Of course, their testimony would still be very useful, Mr. Émard.

Mr. Émard: How would it be useful?

[Texte]

Le président: De la meilleure manière possible, monsieur Énard

M. Énard: Ne trouvez-vous pas que c'est une procédure un peu inhabituelle? D'habitude, on entend les témoins avant que le bill soit accepté en Comité. Remarquez bien que je n'ai aucune objection à ce que le bill soit présenté ici pour adoption, à la condition que les témoins aient l'occasion de venir ici.

Mais, je trouve drôle quand même que ces témoins s'ils viennent, viendront après que tout aura été fait au Comité.

Le président: Monsieur Énard, je vous ferais remarquer que le comité directeur a tenté de trouver une solution au problème de l'audition des témoins. La base de notre raisonnement est assez simple: à date, depuis que cette Loi a été présentée, nous avons entendu 783 témoins. Ceux qui ont étudié le bill ne sont arrivés à cette version qu'après avoir entendu des témoins de tout le pays, de tous les partis, de toutes les tendances possibles.

Alors, nous avons décidé à votre demande et à la demande de tous ceux qui étaient présents, que le président devrait se mettre en contact avec le président du Conseil économique du Canada, afin qu'il nous donne quelques prévisions économiques en rapport avec le bill. C'est la seule chose non réglée devant le Comité et nous ferons tout notre possible pour que le président du Conseil vienne nous présenter ses réflexions devant ce projet de loi. J'espère que vous êtes satisfait, monsieur Énard?

M. Énard: Monsieur le président, je suis très content que vous ayez décidé de reconsidérer votre décision quant à l'audition de témoins, et je n'ai pas l'intention de discuter votre décision non plus. Mais il faut dire que les sept cents et quelque témoins ont été entendus avant que les articles du bill soient rédigés. Or, je pense que ce que vous avez fait est très bien et nous donnera l'occasion d'entendre les témoins et leurs réactions à certains articles de ce bill.

Le président: Merci, monsieur Énard.

Mr. Otto: Mr. Chairman, relative to that point, I think it should be put on the record that the change in the committee system is not going to deprive anyone of the opportunity of giving to the Committee worthwhile evidence on the bill before it.

The Steering Committee, composed of all parties, has gone over this matter and its

[Interprétation]

The Chairman: In the best manner possible, Mr. Énard.

Mr. Énard: Do you not believe that this is a rather unusual procedure? Usually, we hear the witnesses before carrying the Bill in Committee. Of course I have no objections to having the bill introduced here for adoption, as long as the witnesses will have the opportunity to come to testify before us. But I do find it somewhat curious that if these witnesses would come, it would be after we have finished our work.

The Chairman: Mr. Énard, I would like to point out that the Steering Committee has tried to find a solution to the problem of hearing witnesses. The basis of our reasoning is quite simple. Up to now, since this Act was introduced, we have heard 783 witnesses. Those who have considered the bill came to this opinion only after having heard witnesses from all parties, and of all possible tendencies.

Therefore, we have come to the conclusion, upon your request and that of all those who were present, that the Chairman should contact the Chairman of the Economic Council of Canada so as to obtain some economic forecasts relating to the bill. This is the only matter pending before the Committee, and we will do our best so that the Chairman of the Economic Council will come before us to present his own comments on this bill. I hope that you are satisfied with this, Mr. Énard.

Mr. Énard: Mr. Chairman, I am very glad that you have reconsidered your decision as far as the hearing of witnesses is concerned, and I will certainly not argue with you about your decision. But I must say that the 700 or more witnesses that were heard here were heard before the clauses of this bill were drafted. Now, I think that what you have done is certainly excellent and will give us the possibility of hearing the witnesses and their reactions to some of the clauses of this bill.

The Chairman: Thank you, Mr. Énard.

M. Otto: Monsieur le président, sur ce point précisément, je crois qu'il conviendrait de mentionner, dans le compte rendu de nos délibérations, que le changement apporté au système de comités ne doit pas priver qui que ce soit de venir présenter des témoignages en ce qui a trait à un bill.

Le Comité directeur, formé de députés de chaque parti, a bien étudié cette question et

[Text]

decision was reviewed by this Committee. It was agreed that the subject matter had been carefully examined by the Harley Committee, and there was discussion to the effect that anyone with new evidence—something new to add—could appear.

I also believe that the Chairman announced that the Pharmaceutical Manufacturers Association of Canada had withdrawn their request. Is that correct, Mr. Chairman?

The Chairman: That is correct.

• 1125

Mr. Otto: Whether this nor any other committee would deny anyone the right to produce new evidence pertinent to the bill, but we are discussing the bill and its subject matter.

It is not our intention to call outside witnesses to tell us how we shall legislate. We have been given evidence on the subject matter and have examined it and considered it, but consideration of it clause-by-clause, is not subject to any outside intervention.

Mr. Énard: Monsieur le président, monsieur le président...

Le président: A l'ordre, s'il vous plaît. Avez-vous quelque chose à ajouter? Je ne voudrais pas que...

Mr. Énard: Sûrement. Je tiens compte de ce que M. Otto a dit et je tiens à corriger quelques faits. Il dit qu'il n'a pas l'intention d'écouter des témoins de l'extérieur nous dire comment légiférer. Mais, est-ce que cela ne se fait pas dans chaque comité quand un bill est présenté? Chacun a sûrement l'occasion d'entendre des témoins de l'extérieur qui viennent après que le bill a été présenté.

Le président: Je vous rappelle au règlement, monsieur. Ce sont des discussions que nous avons déjà eues assez longuement, et j'aimerais bien, si vous le permettez, continuer, puisque nous pourrions débattre la question toute la journée et ne pas être plus avancés.

Votre comité directeur fait son possible pour plaire à tout le monde. Mais c'est encore le Comité qui est souverain et j'espère qu'il se rendra compte que si la tâche n'est pas souvent facile au comité directeur, elle l'est encore moins lorsque les honorables membres engagent des discussions ou en viennent à des débats qui peuvent être sans fin.

Mr. Saltsman: I have an amendment, Mr. Chairman, to Clause 2. I wish to add to

[Interpretation]

sa décision a été révisée par notre Comité.

On avait décidé que le sujet avait été bien étudié par le Comité Harley. On a aussi décidé que, si quelqu'un désirait apporter de nouveaux témoignages, il pourrait le faire. Je crois que le président a annoncé que l'Association canadienne des fabricants de produits pharmaceutiques a retiré sa demande. Est-ce exact?

Le président: C'est exact.

Mr. Otto: Notre Comité ne privera qui que ce soit de venir présenter de nouveaux témoignages se rapportant au Bill. Mais, nous en sommes à l'étude du bill et de son sujet. Nous ne comptons pas convoquer des témoins de l'extérieur pour nous dire comment nous allons légiférer. On nous a présenté des témoignages sur le sujet, mais l'étude d'une loi article par article n'est sujette à aucune intervention de l'extérieur.

Mr. Énard: Mr. Chairman, Mr. Chairman...

The Chairman: Order please. Do you have anything to add? I would not want to...

Mr. Énard: Certainly. I am aware of what Mr. Otto has said and I would like to correct a few facts. He says that he does not have the intention of hearing witnesses from the outside telling us how to legislate. But is this not a normal procedure for every Committee which is considering a bill? Everyone certainly has the opportunity to hear witnesses from outside after the bill has been introduced.

The Chairman: Order please. These are discussions that we have already carried to some length, and if you will allow me, I would like to proceed, since we could debate this question all day without making any headway.

Your Steering Committee is doing its best to please everybody. But the Committee remains sovereign and I hope that it will realize that if the task of the Steering Committee is not always easy, it is still harder when the honourable members of the Committee get involved in discussions which can go on forever.

M. Saltsman: J'ai un amendement à l'article 2. J'aimerais ajouter un nouveau paragraphe

[Texte]

proposed Section 84 in Clause 2 a new subsection (4) following subsection (3), the new subsection to read,

The Minister shall, as soon as possible, for the end of each fiscal year, prepare a report on the administration of this Act during that fiscal year and shall cause such a report to be laid before Parliament forthwith, upon the completion thereof, or if Parliament is not sitting on any of the first fifteen days, next thereof that Parliament is sitting.

The purpose of this amendment, Mr. Chairman, if I may be permitted a few words, is to ensure that Parliament has a chance to scrutinize very carefully the workings of the legislation.

As has been evident in the discussions before this Committee there is some doubt about how the legislation will work. Those of us who are for the changes and those who have some reservations about them would welcome the opportunity, particularly during the initial years that this legislation is in effect, of having a detailed report placed before Parliament so that we could make an analysis of the results of it and to permit Parliament to make changes or suggest changes year by year.

Speaking for myself—and I support these changes—I would like to have the opportunity of examining the working of this Act to ensure that the benefits supposedly inherent in it are actually there.

Mr. Robinson: Mr. Chairman, because we do not have a copy of the amendment could we have it read again?

• 1130

Mr. Basford: Before you make any ruling, Mr. Chairman, I thought it might be helpful if were to point out and read to the Committee Section 27 of the Patent Act, which reads,

The Commissioner...

—which would be the Commissioner of Patents—

...shall, in each year, cause to be prepared and laid before parliament a report of the proceedings under this Act...

—that is the patent Act—

...and shall, from time to time and at least once in each year, publish a list of all patents granted, and may, with the approval of the Governor in Council, cause such specifications and drawings as are deemed of interest or essential parts thereof, to be printed, from time to time for distribution or sale.

[Interprétation]

(4) à l'article 84 proposé dans l'article 2 du Bill, après le paragraphe (3). Voici ce nouveau paragraphe:

Le Ministre préparera, à la fin de chaque année financière, un rapport sur l'administration de cette Loi et fera en sorte que ce rapport soit déposé au Parlement, lorsqu'il sera complété, ou, si le Parlement ne siège pas, les 15 jours qui suivront l'ouverture de la session ou la reprise de la session.

Le but de cette modification, monsieur le président, si vous me permettez de donner quelques explications, est d'assurer que le Parlement puisse étudier très soigneusement les rouages de la Loi. Il ressort des discussions que nous avons eues au Comité, que nous avons certains doutes quant au résultat de la Loi. Ceux qui favorisent les changements et ceux qui ont certaines réserves au sujet de ces changements, se réjouiraient du fait qu'un rapport détaillé puisse être présenté au Parlement. Nous pourrions alors, au cours des quelques premières années après l'entrée en vigueur de la Loi, déterminer quels sont les résultats de l'application de cette Loi. Cela permettrait au Parlement d'apporter ou de suggérer les modifications à chaque année.

J'appuie ces modifications et j'aimerais pouvoir examiner les résultats de l'application de la Loi, afin que les avantages, qui sont sensés en découler, se concrétisent.

M. Robinson: Puisque nous n'avons pas une copie de l'amendement, serait-il possible d'en donner lecture de nouveau?

M. Basford: Avant que vous n'arrêtiez une décision, il me semble que je devrais signaler au Comité l'article 27 de la Loi sur les brevets:

Le Commissaire...

on parle de la Loi sur les brevets,

...chaque année, devra préparer et présenter au Parlement un rapport de l'activité découlant de cette Loi...

on parle de la Loi sur les brevets,

...et devra à l'occasion et au moins une fois par année, présenter la liste de tous les brevets accordés, et pourra, avec l'approbation du gouverneur en conseil, faire publier, à l'occasion, les détails et tableaux importants pour être distribués ou vendus.

[Text]

So there is already incumbent upon the Commissioner the duty to report to Parliament once a year.

Mr. Saltsman: I understand that this is the case. However, my amendment would be more specific than the existing clause in the Patent Act.

Mr. Boulanger: Mr. Chairman, could you read the amendment so we will all know what it contains?

The Chairman: Yes.

"The Minister shall, as soon as possible, for the end of each fiscal year, prepare a report on the administration of this Act during that fiscal year and shall cause such a report to be laid before Parliament forthwith, upon the completion thereof, or if Parliament is not sitting on any of the first fifteen days, next thereof that Parliament is sitting."

Are there any other discussions on the amendment?

Mr. Boulanger: Mr. Chairman, Mr. Saltsman claims that his amendment has a more specific bearing to Article 27. Could he explain?

Mr. Saltsman: I think that as it now stands the report that comes before Parliament covers the entire operation of the Patent Act. My concern at the moment is that we have a specific report on the operations of the changes that are being made, their economic effect and their effect on the lowering of prices in order to focus attention and to give this Act the kind of scrutiny it deserves.

Since it has been suggested that this is a major piece of legislation, since it has been pointed out that we are not really certain of the effects that it may have, I think it would be of great advantage to have this come before Parliament in a very specific way. In other words, I think the changes that we are contemplating voting on in this Committee should be examined separately from the operation of the entire patent system.

Mr. Ritchie: Mr. Chairman, I would like to ask Mr. Saltsman—I think maybe I can support him in this—if he envisaged there would be a report on the basis of any change in drug manufacture whether our safety regulations are adequate or should be increased, and such things as the Act detracting from introducing new drugs into the community or to the country? Is this your idea of what this would be?

[Interpretation]

Par conséquent, le commissaire doit faire rapport au Parlement une fois par année.

M. Saltsman: Je sais que c'est le cas. Cependant, mon amendement sera encore plus précis que l'article actuel de la *Loi sur les brevets*.

M. Boulanger: Monsieur le président, pouvez-vous donner lecture de l'amendement afin que nous en prenions tous connaissance?

Le président: Oui.

Le ministre, le plus tôt possible à la fin de chaque année financière, préparera un rapport sur l'administration de la Loi pour l'année financière écoulée et fera en sorte que ce rapport soit présenté au Parlement, à la fin de la préparation de ce rapport ou, si le Parlement ne siège pas, au cours des quinze prochains jours après la reprise de la session ou après le début d'une nouvelle session.

Y a-t-il d'autres questions sur l'amendement?

M. Boulanger: M. Saltsman prétend que mon amendement est plus précis que l'article 27 de la Loi, pouvez-vous expliquer ce que vous entendez par «plus précis»?

M. Saltsman: Dans le moment, le rapport qui est déposé devant le Parlement porte sur l'ensemble des activités visant l'administration de la *Loi sur les brevets*. Je voudrais que nous ayons un rapport distinct sur les changements qui sont effectués, leurs effets sur l'économie et sur les prix afin de centrer l'attention et faire de ce projet de loi l'examen minutieux qu'il mérite.

Puisque nous avons laissé entendre que c'était une mesure législative importante et que nous n'étions pas tellement certains des effets et des conséquences qu'elle pourra avoir, je pense que ce serait un grand avantage de la présenter au Parlement d'une façon bien précise. En d'autres termes, je pense qu'il faudrait que les changements que nous devrions approuver au sein du comité soient étudiés séparément de l'ensemble du système des brevets.

M. Ritchie: Monsieur le président, je voudrais poser une question à M. Saltsman. Je pourrais peut-être l'appuyer ici s'il envisage la possibilité d'un rapport sur tous les changements dans la fabrication des médicaments, sur la question du règlement visant la sécurité, et des problèmes comme de savoir si la Loi nuit à l'introduction de nouveaux médicaments? Est-ce que c'est ce que vous envisagez?

[Texte]

Mr. Saltzman: I would certainly hope that all the questions that have been raised by those in support of the bill and those who perhaps have had reservations about it would be covered in this report. For instance, you have raised a number of questions about the effectiveness of the safety measures. I think they should be reported on year by year. Other members have raised the question on the effect of investment or economic activity in their province. I think that should be examined year by year. This is why our position is that the specifics of the changes that are being made now deserve to be closely scrutinized outside of the general considerations of the Patent Act as they are examined in Parliament.

The Chairman: Mr. Otto.

• 1135

Mr. Otto: Mr. Chairman, this is a procedural question. The Minister has already said that this is covered by Section 27. I wonder whether Mr. Saltzman's amendment is not an amendment of Section 27, which this bill does not deal with.

If I read Section 84 correctly, it deals with a situation where there is a time limit extended, where the Patent Office is closed, and then the order made by the Minister during that interval has to be published, but I believe, Mr. Chairman, that Mr. Saltzman's amendment is really an amendment of Section 27. This is not what we are dealing with in this bill.

Mr. Saltzman: Mr. Chairman and Mr. Otto, I think it is quite obvious that this Committee does not have the authority to amend anything in this particular act which is not before us, and any attempt to amend Section 27 might run into the same kind of ruling that we had earlier this day. My concern is—and this is the reason it is tacked on to this section particularly—a specific report on the workings of the changes we are making rather than a report on the operations of the entire Patent Act and the events related to patents generally. I think this is important legislation—important enough to have a specific report on its workings, and this is why I am suggesting that it might be of some benefit to add a specific clause of reporting to this section, despite the fact that there is an over-all clause in the Patent Act.

The Chairman: Are there any other discussions on the amendment? Before your Chairman gives a ruling on this amendment I would like a very respected expert of the House of Commons who happens to be with us this morning to give his opinion.

[Interprétation]

M. Saltzman: J'espère que toutes les questions qui ont été soulevées par ceux qui appuient le projet de loi ou ceux qui auraient des réserves à son sujet, feraient toutes l'objet du rapport. Par exemple, vous avez posé des questions quant aux mesures de sécurité et leur efficacité. Je pense qu'il faudrait faire rapport à ce sujet tous les ans. D'autres députés ont soulevé des questions quant aux effets sur l'activité économique de leur province. Je pense que cela aussi devrait faire l'objet d'une révision annuelle. C'est pourquoi je suis d'avis que les changements apportés maintenant méritent d'être étudiés minutieusement en dehors des considérations générales de la *Loi sur les brevets* étudiées à la Chambre.

Le président: Monsieur Otto?

M. Otto: Monsieur le président, c'est une question de procédure. Le ministre vient de dire que l'article 27 traite de cette question. Je me demande si l'amendement de M. Saltzman n'est pas un amendement de l'article 27 dont le présent projet de loi ne traite pas.

Si je comprends bien l'article 84, je vois qu'il traite d'une situation où on proroge un permis, lorsque le Bureau des brevets est fermé; le décret du ministre à cet effet doit être publié. Mais, monsieur le président, je crois que l'amendement de M. Saltzman est, en fait, un amendement de l'article 27. Le projet de loi ne traite pas de cela.

M. Saltzman: Monsieur le président, et M. Otto, je pense que c'est parfaitement évident que le comité n'a pas l'autorité voulue pour amender quoi que ce soit dont il n'est pas saisi aux termes du présent projet de loi. Tout effort de modification de l'article 27 peut être frappé d'une décision comme celle qui a été rendue un peu plus tôt. Voilà pourquoi il est lié à cet article en particulier. Je réclame un rapport précis sur le fonctionnement des changements que nous allons apporter plutôt que sur l'application de la *Loi sur les brevets*. Je pense que c'est une mesure législative très importante, assez importante pour que nous ayons un rapport spécifique sur son fonctionnement. C'est pourquoi je crois que ce serait utile d'ajouter à cet article une disposition précise concernant les rapports, malgré la disposition générale de la *Loi sur les brevets*.

Le président: Y a-t-il d'autres questions sur l'amendement? Avant que le président ne rende sa décision sur l'amendement, je voudrais entendre un expert bien connu de la Chambre des communes, qui se trouve parmi nous aujourd'hui.

[Text]

Dr. P. M. Ollivier (Law Clerk and Parliamentary Counsel): Mr. Chairman, the order of reference to your Committee is the bill itself. In other words, you cannot go beyond what is in the bill. The first part of the bill, which deals with the Patent Act, is very limited. It deals with licences. To my mind the proposed amendment is out of order because it is not relevant and goes beyond the scope of the bill. You are asking something to apply to the whole Patent Act—not only to licences.

You are not asking that the Minister do or report something dealing only with licences. The subject matter of the bill has only to do with the granting of licences. If I may quote, in part, 406 of Beauchesne: amendments are out of order if they are irrelevant to the bill or beyond its scope, governed by or dependent upon amendments already negatived.

There are many other reasons that the amendment could be out of order but to my mind the main reason is that it applies to the whole Act whereas this bill applies only to a very limited part of the Act.

Mr. Saltsman: This is not my intention, Dr. Ollivier. I would hope that this amendment would apply to the specific changes that are being made—in other words the changes we in this Committee are being asked to vote upon rather than to the whole Act. The whole Act is covered; in other words there has to be a report on the operations of the whole Act.

I am concerned that there be a specific and separate report on the operations of these changes that we are being asked to vote on. It seems to me that there are some precedents for this.

Some departments do publish a report on their activities, yet within such a department specific activities of that department are reported separately. I am thinking of the Industrial Research and Development Incentives Act. In respect of this act I believe there is a separate report given to Parliament on its activities, although there is an over-all report by the department. I think there are others in the same category. For the same reason I would like to see a new clause added to this Act. These were new programs that were brought into force, the effects of which were not completely known, and I think it was felt at the time that it would be desirable to have a close scrutiny of those specific pro-

[Interpretation]

M. Ollivier (Légiste et Conseiller parlementaire): Monsieur le président, le mandat de ce comité est l'étude du projet de loi lui-même. Autrement dit, vous ne pouvez pas dépasser la portée du projet de loi. La première partie du projet de loi, qui traite de la *Loi sur les brevets*, est très restreinte, il s'agit de permis. D'après moi, l'amendement n'est pas recevable parce qu'il n'est pas pertinent et dépasse la portée du Bill. Vous voulez appliquer une mesure à toute la *Loi sur les brevets* et non pas seulement aux permis.

Vous ne demandez pas que le ministre fasse quelque chose ou fasse rapport sur quelque chose qui traite uniquement des permis. La portée du projet de loi est restreinte à l'émission des permis. Laissez-moi, par exemple, vous lire le commentaire 406 de Beauchesne:

Un amendement est irrégulier s'il

a) ne se rapporte pas au bill, ou s'il en dépasse la portée, ou s'il est inspiré par des amendements déjà rejetés ou s'il en dépend;

Il y a peut-être d'autres raisons pour lesquelles l'amendement est irrecevable, mais d'après moi, c'est que l'amendement s'applique à toute la Loi, alors que le projet de loi touche seulement un aspect particulier de la Loi.

M. Saltsman: Monsieur Ollivier, ce n'est pas du tout dans mon intention. Je souhaiterais que l'amendement s'applique à des changements précis qui sont effectués, par exemple, les changements qu'on nous demande d'approuver au sein du comité, plutôt qu'à toute la Loi. Il faudrait un rapport sur l'administration de toute la Loi.

Ce qui m'inquiète, c'est qu'il y aura un rapport distinct sur l'application des changements qu'on nous demande d'approuver. Il me semble qu'il y a déjà des précédents à l'appui.

Certains ministères publient effectivement un rapport sur leur activité, mais même dans ces ministères, certaines activités particulières font l'objet d'un rapport distinct. Je pense, par exemple, à la *Loi stimulant la recherche et le développement scientifiques*, qui présente un rapport spécial au Parlement sur sa propre activité même si le ministère prépare un rapport pour l'ensemble du ministère. J'en vois d'autres dans la même catégorie. Pour les mêmes raisons, je voudrais qu'on ajoute un nouvel article à la Loi. De nouveaux programmes ont été lancés dont les effets ne sont pas parfaitement connus et à l'époque, on jugeait qu'il serait souhaitable d'étudier en détail ces programmes et ces changements.

[Texte]

grams and those specific changes outside the framework of the over-all report of the department.

Dr. Ollivier: That is, the way you understand it but I do not think your amendment does that, because it says:

The Minister shall, as soon as possible, for the end of each fiscal year, prepare a report on the administration of this Act...

By doing that you are affecting every clause in the Act, and the whole Act itself.

• 1140

Mr. Saltsman: Would it be in order if we changed that to read "prepare a report on the administration of the changes of this act"?

I see your point, Doctor, that the wording as it now stands could be interpreted as referring to the entire act, which is not my intent. I am only concerned about the changes to the act that we are voting on in this Committee.

Mr. Robinson: Mr. Chairman, are we not dealing with amendments to three acts? As far as the subject matter is concerned, for this Committee we are dealing with three acts are we not?

The Chairman: It is not the subject matter that is referred. It is the bill itself.

Dr. Ollivier: The order of reference to a Committee, when you have a bill, is the bill itself. So your order of reference is not to deal with the Patent Act, with the Trade Marks Act, but with those clauses that you intend to amend, or new clauses that you intend to bring in. And if you make any amendments they have got to be relevant to those amendments to be part of it. You could not bring in any new matter that is not already provided for.

What you can do with a section is that you can vote for it, you can vote against it, or you can amend it. You cannot put all amendments to it, but there are certain amendments you can make to a clause which are relevant and which deal with the rest of it.

Mr. Saltsman: Would it be of assistance in terms of order to make the changes to the entire Act, to all the changes contained in this Act? I would be quite willing to make that change as well, to have a report on all the changes contained within this Act, a blanket clause that would cover all the changes referring to the three acts.

Dr. Ollivier: The trouble there is that Section 84 itself deals with the filing of documents

[Interprétation]

spécifiques en dehors du contexte du rapport général du ministère.

M. Ollivier: C'est peut-être votre intention, mais je pense que votre amendement n'atteint pas ce but, car vous dites:

Le ministre, le plus tôt possible à la fin de chaque année financière, préparera un rapport sur l'administration de la Loi...

Vous affectez ainsi tous les articles de la Loi et l'ensemble de la Loi elle-même.

M. Saltsman: Est-ce que ce serait possible que l'on modifie l'amendement pour qu'on dise: «rapport sur l'application des modifications de la présente loi.» Je comprends fort bien votre point de vue, Docteur. Les libellés actuels pourraient viser toute la loi. On pourrait l'interpréter comme cela, mais ce n'est pas du tout mon intention. Tout ce qui m'intéresse, ce sont les modifications apportées à la loi que nous devons approuver.

M. Robinson: Est-ce que l'on ne vise pas les modifications de trois lois? Pour ce qui est du mandat du Comité, est-ce qu'on n'étudie pas trois lois?

Le président: Oui, mais il ne s'agit pas de cela du tout. Il s'agit du bill lui-même.

M. Ollivier: Lorsqu'un projet de loi est déferé à un Comité, son mandat est d'étudier le projet de loi. Votre mandat n'est donc pas de traiter de la Loi sur les brevets, ou de la Loi sur les marques de commerce, mais des articles que vous voulez modifier ou de ceux que vous voulez ajouter. Et si vous faites des amendements, que ce soit pertinent à ces amendements. Vous ne pouvez pas soulever d'autres sujets, introduire d'autres sujets qui ne sont pas déjà déferés au Comité.

Vous pouvez voter pour ou contre ou modifier les articles qui vous sont soumis. Il y a certains amendements que vous pouvez faire à un article, s'ils sont pertinents.

M. Saltsman: Est-ce que ce serait possible, alors, est-ce que ce serait utile de faire des changements à la Loi tout entière ou d'appliquer l'amendement à tous les changements visés dans ce projet de loi? Ce serait un amendement général.

M. Ollivier: L'ennui, c'est que l'article 84 lui-même traite de documents qu'on peut

[Text]

and other acts that may be done on "a day when the Patent Office is closed for business." Well, I think it is stretching a point to think that you can add a subclause to that Clause 84, to say that there will be a review of the changes in the Act that are made at this present session by this present measure.

Mr. Saltsman: It had been my intention originally to try to find an area within this bill where I could put in a clause that would cover the entire changes that were contemplated in this bill. In other words, cover the Patent Act, the Trade Marks Act, and the Food and Drugs Act.

Dr. Ollivier: It might perhaps have been done on the first clause.

Mr. Otto: On page 4, subclause (13) it might have been done.

Dr. Ollivier: It might have been done, but now that that that clause is passed I do not see how we can remedy that situation. You cannot bring in a new clause if it ought to have been brought as an amendment to the clause that you have already passed.

Mr. Saltsman: I would like to stand on this amendment with that change, a report on the administration of the changes in this Act. And it would be my intention to move such a clause at the end of each one of the clauses, or move such a subclause at the end of each one of the clauses in this Act. There was one at the end of the Patent Act, one at the end of the Trade Marks Act, and one at the end of the Food and Drugs Act.

The Chairman: Are there any other comments on this?

Mr. Basford: If the amendment is before the Committee, I would like to say something on it.

Mr. Otto: Mr. Chairman, have you made a ruling on this yet?

The Chairman: Not yet. We are on the discussion of the amendment. Mr. Basford?

Mr. Basford: I just want to say something if the amendment is in order and is before the Committee.

The Chairman: Due to the fact that we have the good advice from one of the respected experts in this field, I must, for the same reason as the other one, rule your amendment

[Interpretation]

remplir «un jour où le Bureau des brevets est fermé». Je pense que l'on peut ajouter un paragraphe à l'article 84, disant qu'il y aura une révision des modifications apportées à la Loi, au cours de la présente session, en vertu de la mesure qui nous occupe.

M. Saltsman: Alors, je réserve mon amendement d'essayer de trouver un domaine, dans ce bill, où on pourrait insérer un article qui viserait tous les changements qu'on envisage dans le projet de loi. Autrement dit, qui affecterait la Loi sur les brevets, la Loi sur les marques de commerce et la Loi sur les aliments et drogues.

M. Ollivier: On aurait peut-être pu le faire à l'article 1.

M. Otto: Vous auriez pu le faire au paragraphe (13), page 4.

M. Ollivier: On aurait pu le faire, mais maintenant que l'article est adopté, je ne vois pas comment vous pouvez remédier à la situation. Vous ne pouvez pas introduire un nouvel article si vous l'avez déjà présenté comme amendement à un article que vous avez déjà approuvé.

M. Saltsman: J'avais d'abord l'intention dement sur le rapport relatif à l'application des modifications faites à cette Loi. Et je proposerais que l'on insère ce paragraphe à la fin de chaque article de la Loi. Il y en avait un à la fin de la *Loi sur les brevets*, de la *Loi sur les marques de commerce* et de la *Loi sur les aliments et drogues*.

Le président: Y a-t-il d'autres commentaires sur cette question?

M. Basford: Si le Comité est saisi de l'amendement, je voudrais dire quelques mots.

M. Otto: Monsieur le président, avez-vous rendu une décision?

Le président: Pas encore. Nous en sommes à la discussion de l'amendement. Monsieur Basford.

M. Basford: Je voudrais simplement dire quelque chose si l'amendement est conforme au règlement à l'étude.

Le président: Étant donné l'avis éclairé d'un de nos experts les plus reconnus dans ce domaine, je dois déclarer votre amendement irrecevable. Évidemment, vous pouvez tou-

[Texte]

out of order. Of course you could always appeal the decision made by the Chairman on this to this Committee, but for the time being I must rule it out of order, for the same reasons.

• 1145

Mr. Saltsman: Mr. Chairman, on a point of clarification. I do not want to see the Committee get bogged down in a long argument on procedure as to whether we can or cannot move an amendment. Otherwise I would appeal your decision to the Committee. But I am more interested in seeing us go ahead. We will have an opportunity of moving an amendment in the House at the appropriate moment.

I would hope that the decision that has been reached in this Committee, however, will not jeopardize our position in the House. And therefore I hope you will understand that I accept your decision under protest, and I hope without prejudice to our position in the House.

The Chairman: Shall Clause 2 carry?

Mr. Howe: Mr. Chairman, I am just wondering about the reference for the days that these offices can be closed. I notice that it comes up in the Trade Marks Act and it says:

...the Minister by order declares that it shall be closed for business.

What would they foresee that the Minister had to close the office for?

Mr. Basford: At the moment, under the present wording of the Act, there are certain time limits specified in the Patent Act and in the Trade Marks Act in which people can do certain things, or file certain applications. At the moment we have to keep the office open if that period ends, for example, on a Saturday or on a non-statutory holiday. We have to keep the Patent Office open to provide machinery for the Patent Bar to file their applications on a Saturday, if Saturday happens to be their last day. This is very awkward for us and very awkward for the Patent Bar, or members of the profession who practice in patent work.

This amendment has been requested by the Patent and Trademark Institute of Canada, and we are quite agreeable to it. It would allow us, if Saturday were the last day to file something, to keep the office closed on Saturday, and allow those applications to be filed on the next business day, on a Monday.

Mr. Howe: Of course, the clause stipulates that it is to be closed on Saturdays and holidays.

[Interprétation]

jours faire appel de la décision rendue par le président auprès du Comité, mais pour le moment, je dois la déclarer irrecevable.

M. Saltsman: Simplement pour demander des précisions, monsieur le président. Je ne veux pas que le Comité s'enlise dans une longue discussion sur la procédure, à savoir si on a le droit de proposer un amendement. Autrement, j'en appellerais de la décision du président. Je préférerais poursuivre nos travaux. Toutefois, j'aurai l'occasion de présenter un amendement en Chambre, au moment opportun.

J'espère que la décision prise par le présent Comité ne nuira pas à notre position en Chambre. Je suis sûr que vous comprendrez que j'accepte votre décision sous réserve, et, je l'espère, sans nuire à notre position en Chambre.

Le président: L'article 2 est-il adopté?

M. Howe: Voulez-vous m'expliquer pourquoi on mentionne les jours où on peut fermer les bureaux? Je vois que dans la Loi sur les marques de commerce, on en parle. Pourquoi les ministres seraient-ils forcés de fermer les bureaux, par exemple?

M. Basford: D'après le texte actuel de la Loi, il y a certains délais qui sont précisés dans la *Loi sur les brevets* et la *Loi sur les marques de commerce* durant lesquels les gens peuvent présenter des demandes. Dans le moment, nous devons garder les bureaux ouverts si la période finit un samedi ou un jour férié. Nous devons garder le bureau des brevets ouvert pour que les déposés aux brevets puissent présenter leurs demandes ces jours-là. C'est assez ennuyeux pour nous de même que pour les membres de la profession qui s'occupent des brevets.

Cet amendement a été présenté par le *Patent and Trademark Institute of Canada*, et nous sommes tout à fait d'accord. Cet amendement nous permettrait, si le délai fixé tombait un samedi, de fermer les bureaux en permettant de déposer les demandes de brevets le prochain jour ouvrable, c'est-à-dire le lundi suivant.

M. Howe: Mais je vois qu'ils seront fermés le samedi et les jours fériés.

[Text]

Mr. Basford: Heretofore we have not been able to do that.

Mr. Howe: What other days would you envisage that you would decide that it should be closed?

Mr. Basford: The two we have in mind would be Boxing Day and the day after New Year's Day.

Mr. Howe: They would not be included in the word "holidays".

Mr. Basford: No.

Mr. Howe: So New Year's Day and Boxing Day would be the only days you would envisage, outside of Saturdays and holidays, that the offices would be closed?

Mr. Basford: Yes.

Clause 2 carried.

The Chairman: Shall Clause 3 carry?

Mrs. MacInnis (Vancouver-Kingsway): Mr. Chairman, before you go any further, can I ask what we are going to hold open? We are going to hold open one spot until we hear the Chairman of the Economic Council of Canada, are we not? What are we going to hold open until we hear from him, because I think something should be held open.

The Chairman: It all depends what answer we are going to get from the chairman of the Economic Council of Canada.

Mrs. MacInnis (Vancouver-Kingsway): Yes, I know. But we have an answer before we finish the bill, do we not?

The Chairman: Maybe we could shelve Clause 3 if you want, and jump to Clause 4 and Clause 5 while the Food and Drug Directorate is here.

Mrs. MacInnis (Vancouver-Kingsway): I do not care what we do. It is foolish to say we are going to approach him and have him speak, and then finish off the bill in the meantime. We cannot do that. We have to hold something open, and I was just wondering what was your intention that we would hold open, and at what point?

The Chairman: If you will take a look at page 8, Mrs. MacInnis, you will see that we could proceed with Clause 5.

Mrs. MacInnis (Vancouver-Kingsway): You mean we should stop when we get up to Clause 5? We should go ahead now with Clauses 3 and 4?

[Interpretation]

M. Basford: Oui, mais jusqu'ici nous n'avons pas pu le faire.

M. Howe: Mais quel autre jour envisageriez-vous de fermer?

M. Basford: Nous songeons au lendemain de Noël et au lendemain du jour de l'An.

M. Howe: Alors, ils n'entreraient pas sous «jours fériés».

M. Basford: Non.

M. Howe: Donc, les lendemains de Noël et du jour de l'An seraient les seuls jours où les bureaux seraient fermés à part les jours fériés et les samedis?

M. Basford: Oui.

(L'article 2 est adopté.)

Le président: L'article 3 est-il adopté?

Mme MacInnis (Vancouver-Kingsway): Un instant. Avant de continuer, puis-je demander ce que nous allons garder ouvert? N'avons-nous pas dit que nous garderons un endroit ouvert en attendant la réponse du Président du Conseil économique du Canada?

Le président: Tout dépend de la réponse du président du Conseil.

Mme MacInnis (Vancouver-Kingsway): Oui, je sais, mais il nous faut une réponse avant de terminer l'étude du projet de loi, n'est-ce pas?

Le président: On pourrait peut-être réserver l'article 3 et passer aux articles 4 et 5 pendant que la Direction des aliments et drogues est ici.

Mme MacInnis (Vancouver-Kingsway): Peu m'importe ce qu'on fait, mais c'est ridicule de dire qu'on va l'aborder, lui demander de prendre la parole, et ensuite adopter le Bill avant qu'il ne vienne. On ne peut absolument pas faire ça. Il faut quand même qu'on laisse quelque chose sous réserve. Mais quoi et quand?

Le président: Si vous prenez la page 8, M^{me} MacInnis, vous verrez que nous pourrions passer à l'article 5.

Mme MacInnis (Vancouver-Kingsway): Vous voulez dire qu'il faudra s'arrêter à l'article 5? Et continuer avec les articles 3 et 4?

[Texte]

The Chairman: Instead of adjourning and waiting, we might as well proceed and do as much as we can.

Mrs. MacInnis (Vancouver-Kingsway): Just as long as something is left open, because we have to leave something open.

The Chairman: Shall we leave Clause 5 open?

Mrs. MacInnis (Vancouver-Kingsway): Yes.

The Chairman: Shall Clause 3 carry?

Mr. Otto: Mr. Chairman, I wonder if the Minister could explain just exactly what it means. I read the explanation which is even more confusing than the part on the left hand side. What is the purpose of the amendment to section 49A?

Mr. Basford: Mr. Chairman, I understand this clause and the difficulty members have in understanding it. Although I understand the effect of it, possibly for a more lucid explanation. I should call on Mr. Henry.

Mr. D. H. W. Henry (Director of Investigation & Research—Combines Investigation Act, Department of Consumer and Corporate Affairs): Mr. Chairman, it is perhaps quite difficult for anyone to give a simple and clear explanation, but I will try to do so.

It is a very technical amendment, and I would like to explain before I go on that it is so technical that when the bill was introduced as Bill C-190 the then Minister asked the Patent and Trademark Institute if they would make comments relative to the drafting.

The government wished to avoid any suggestion that the effects on the practice in the trade mark field went beyond the exact purpose of this revision.

The reason for the change in drafting that has occurred is to eliminate the possibility that unwarranted and undesired effects on the trade mark law should take place.

Therefore, as a technical matter, we have had the assistance of the Patent and Trademark Institute of Canada, who have been very helpful. I do not wish to suggest that they are supporting this provision, but they did what we asked them to do, that is, to help with the drafting so as to make it as clear and precise as possible to effect the purpose we had in mind.

I think I can perhaps best explain what the amendment is designed to do by saying that it

[Interprétation]

Le président: Au lieu d'ajourner et d'attendre. On pourrait peut-être tout simplement continuer pour en faire le plus possible.

Mme MacInnis (Vancouver-Kingsway): Oui, du moment qu'on laisse quelque chose sous réserve.

Le président: Oui, donc est-ce qu'on peut mettre l'article 5 sous réserve?

Mme MacInnis (Vancouver-Kingsway): Oui.

Le président: L'article 3 est-il adopté?

M. Otto: Monsieur le président, je me demande si le ministre pourrait nous l'expliquer exactement. J'ai lu l'explication qui m'embrouille encore plus.

Quelle est exactement la teneur de l'amendement 49(a)?

M. Basford: Je comprends la difficulté qu'ont les députés à comprendre cet article et je pense que même si je comprends les effets ou les conséquences, je vais demander à M. Henry de donner une explication claire.

M. D. H. W. Henry (Directeur des enquêtes et recherches, Loi des enquêtes sur les coalitions, Ministère de la Consommation et des Corporations): Bien, monsieur le président, c'est peut-être difficile pour tout le monde que de donner une explication simple et claire. Je vais essayer de le faire. De toute façon, c'est un amendement assez technique et je voudrais expliquer, avant d'aller plus loin, que cet amendement est tellement technique que lorsque le projet de loi a été déposé, le Bill C-190, le ministre de l'époque a demandé à l'Institut des brevets et des marques de commerce s'il voulait bien donner des explications à ce sujet.

Comme il s'agissait d'un sujet très spécialisé et très technique, le gouvernement voulait éviter de laisser entendre que l'on affecterait ainsi le domaine des marques de commerce et des brevets et qu'il fallait éviter ce genre de situation. Alors on a changé le texte afin d'éliminer des effets injustifiés et indésirables touchant la Loi des marques de commerce.

Donc, pour les questions techniques nous avons eu l'aide de l'Institut des brevets et des marques de commerce du Canada qui nous a beaucoup aidés. Je ne veux pas laisser entendre qu'ils appuient cette disposition, mais ils ont fait ce qu'on leur a demandé de faire, c'est-à-dire qu'ils nous ont aidés à la rédiger pour que l'article soit aussi précis et aussi clair que possible et réponde à notre intention. Maintenant, je pense que la meilleure façon c'est d'expliquer l'intention de l'amendement.

[Text]

will provide that the import of certain trade-marked pharmaceutical products will not infringe the Canadian trade mark on the products.

The effect of the trade mark system is clearly explained on page 45 of the Harley Report, if members wish to look at that at some stage. Perhaps you will forgive me if I read what they said. It is quite precise, and it gives the idea very well:

Earlier your Committee considered that regulations could not now be imposed that would prevent the use of brand names in the marketing and sale of drugs, as this could be out of character with present day commercial practice. Nevertheless, trade marks have an inhibiting influence on free and open competition in the pharmaceutical industry; and for this reason the Hall Commission recommended that the Trade Marks Act be amended to allow the importation of trade-marked drugs which have been produced by a company related to the Company owning or possessing the same Canadian trade mark, recognizing that trade mark law can influence the level of drug prices directly and indirectly. Under present law the Canadian subsidiary of a foreign parent company can prevent the importation of drugs into Canada if these bear trade marks identical to those owned and used by it. This, of course, eliminates entirely any possibility of legally importing brand name drugs which may be selling at lower prices outside Canada and which, in fact, may in many instances be identical to those drugs manufactured by the subsidiary from bulk active ingredients imported from the parent corporation.

That is their analysis of the problem and I think, it is a very succinct one.

The Harley Committee then entered into some further discussion about the pros and cons and the difficulties—points that had been made by various witnesses, including the Patent and Trade-mark Institute of Canada—and then they concluded by saying on page 46.

[Interpretation]

dement et la meilleure façon de le faire c'est de dire qu'il traite de l'importation de certains produits portant certaines marques de commerce, certains brevets, ne causeront pas de tort à la version canadienne du même produit.

Les avantages du système des marques de commerce sont clairement expliqués dans le rapport Harley, à la page 45. Si les députés veulent consulter ce texte. Excusez-moi, je vais vous lire ce qu'ils ont dit parce que c'est très précis et je crois que ça nous donne une très bonne idée de l'intention.

À la page 48, le comité Harley dit:

Le Comité a déjà jugé qu'on ne pouvait établir un règlement qui interdirait l'usage des marques de fabrique dans la mise en marché et la vente des médicaments, vu que cela serait contraire à la nature des pratiques actuelles de commerce. Néanmoins, les marques de commerce ont une influence préventive sur la concurrence libre et ouverte dans l'industrie pharmaceutique; et c'est pour cette raison que la Commission Hall a recommandé que la Loi sur les marques de commerce soit modifiée de façon à permettre l'importation de médicaments portant une marque de commerce, fabriqués par une société apparentée à une autre possédant la même marque de commerce canadienne, reconnaissant que la Loi sur les marques de commerce peut aussi influencer directement ou indirectement sur le niveau des prix des médicaments. En vertu de la loi actuelle, la filiale canadienne d'une société mère étrangère peut empêcher l'importation au Canada de médicaments, si ceux-ci portent une marque de commerce identique à celle qu'elle possède et qu'elle utilise. Il va de soi que cela élimine entièrement toute possibilité d'importer légalement des médicaments portant une marque de fabrique qui peuvent se vendre à meilleur compte en dehors du Canada et qui peuvent effectivement, dans bien des cas, être identiques aux médicaments que la filiale fabrique au moyen d'ingrédients actifs importés en vrac de la société mère.

C'est leur analyse, c'est très succinct, d'après moi. Toutefois, le Comité Harley a poussé plus avant sa discussion des avantages et des inconvénients. Des difficultés, des arguments ont été soulevés par différents témoins y compris l'Institut canadien des brevets et des marques de commerce.

[Texte]

• 1155

Your Committee considers that if such a recommendation were adopted little, if any, harm would actually be incurred by the more well established and well known owners or "registered users" of the trade marks concerned. Certainly, importation of identically trademarked drugs from abroad at lower prices would introduce open competition in the Canadian market with resulting benefit to the Canadian consumer.

Apart from what I stated at the beginning, that it will provide that the importer of certain trade-marked pharmaceuticals will not infringe the Canadian trademark on such products, perhaps it would be helpful if I were to explain that, like the patent system, a trade mark system is such that the owner of the trade mark in Canada—which may be a Canadian company operating in Canada, or a non-Canadian company operating abroad, which merely owns the trademark in Canada—can, in effect, put up a complete barrier to the import of the product by anybody else; and they do this by bringing an infringement action—that is civil action—against the person who is infringing the trade mark.

It is not against the law to bring it in; it is merely that there is a private right here, as under the Patent Act, and the owner of that right can proceed in a civil action to enforce that right against the infringer. Many such actions, under both the Trade Marks Act and the Patents Act, take place and this has an inhibiting effect on trade in the trade-marked product.

If I may, I would like to put the principle in this amendment in another way. What it does, in effect, is to say that a group of companies all of the same family—to take an example in which no insidious comparison or any point at all is being made—such as Hoffmann La Roche, a company well known to all of you, which has a parent company abroad and has subsidiaries in various countries, are all branch offices of the company; so that products trade-marked by the company, marked with the Hoffmann La Roche name, or the Hoffmann La Roche brand name, or a trademark which might be a symbol, are all to be regarded as coming from one company; because it is, in effect, the same operation, having the same standards and the same quality controls all over the world, as part of the policy of the company.

Et à la page 50, le rapport finit en disant:

Le Comité considère que, si une telle recommandation était adoptée, les détenteurs ou «usagers inscrits» bien connus des marques de commerce en cause en subiraient effectivement peu ou pas de détriment. Il est bien sûr que l'importation de médicaments portant une marque de commerce identique susciterait une concurrence ouverte sur le marché canadien et que le consommateur canadien en tirerait avantage.

Alors voici l'essentiel. A part de ce que j'ai dit au début, cet article va empêcher l'importation de certains produits pharmaceutiques et ne fera pas de tort aux marques de commerce canadiennes pour les mêmes produits. Toutefois, cela serait peut-être recommandable de vous expliquer que, comme le système des brevets, le système des marques de commerce est conçu de telle façon que le propriétaire de la marque de commerce au Canada, qui peut être une compagnie canadienne, forcément au Canada... ou une compagnie étrangère opérant à l'étranger qui détient des marques de commerce au Canada peut faire un obstacle complet à l'importation par qui que ce soit dudit produit. Et voici comment ils procèdent. On prend une action civile contre les personnes qui violent la Loi sur les marques de commerce.

Ce n'est pas tant sur l'infraction que la procédure porte mais bien plus le droit privé protégé par la Loi sur les brevets. Le propriétaire d'une marque de commerce peut prendre des mesures légales contre ceux qui violent cette loi, tant en vertu de la Loi sur les marques de commerce qu'en vertu de la Loi sur les brevets, et qui font du tort pour le produit qui porte la marque de commerce.

Alors je voudrais vous présenter d'une autre façon le principe de l'amendement. Il revient à ceci. Le groupe de compagnies appartenant toutes à la même famille, pour ne prendre qu'un exemple, sans faire d'allusion directe du tout, une compagnie que vous connaissez tous, Hoffmann-La Roche, qui a une filiale à l'étranger et des succursales dans de nombreux pays. Maintenant, en vertu de cet article. On suppose que toutes ces filiales, ces succursales sont considérées comme faisant partie de la même compagnie. Ainsi, un produit portant une marque de commerce de la compagnie par exemple, ou un symbole représentant la même Société est considéré comme provenant de la même compagnie parce qu'en fait ce sont les mêmes activités, les mêmes normes, la même qualité, le même contrôle à travers le monde entier, suivant la politique de ladite société.

[Text]

It is to put the family of companies in the position of the one company, in law, so that if a person imports into Canada a product from abroad it is not to be the subject of a trade mark action.

Let us say the parent of Hoffmann La Roche abroad happened to own the Canadian trade mark. There would be nothing in law to prevent any importer in Canada bringing that trade-marked product from abroad, manufactured by the parent company who owns the Canadian trademark, and importing it into Canada free of any trade mark infringement action.

If, on the other hand, the trade mark is owned in Canada by the Canadian Hoffmann La Roche company, that company can prevent anyone from bringing in from abroad a medicine which has been manufactured by the parent Hoffmann La Roche company.

As you understand, it is very technical, but because of that twist, where the Canadian owner is the Canadian company, there is the possibility of this complete barrier to trade through enforcement of the trade mark right.

● 1200

To cut through all the words of the amendment, it merely says that if a Canadian importer in Canada, such as a large drug wholesaling company, wishes to go to Switzerland and purchase from some source a shipment of pills, or medicine, manufactured by the Hoffmann La Roche company in Switzerland, trade-marked by it and probably packaged by it, and bring that into Canada, that is not to be regarded as an infringement.

There is no question here that this would authorize the importation of a counterfeit product, not marked or produced by the company itself but is perhaps by a competitor who is attempting to infringe the trade mark of the Hoffmann La Roche company abroad. There is no question of allowing in a counterfeit drug. It is only when it has been prepared and trade-marked, shall we say, by the parent of the whole family abroad that this is permitted.

If I go on I may start confusing everybody. Perhaps I should stop there. Members may wish to ask questions about it.

The Chairman: Order, please. Mr. Otto.

Mr. Otto: I understand Mr. Henry's explanation. The question is: does this clause actually say what you say it says? It seems to me, on reading the clause, I cannot even find the

[Interpretation]

Cet article permet qu'un groupe de compagnies soit légalement considéré comme une entité juridique, de sorte que vous pouvez importer au Canada un produit étranger, et lorsque vous le faites, vous êtes à l'abri, de poursuites juridiques possibles. Par exemple, vous avez Hoffmann-La Roche qui a une marque de commerce canadienne qui lui appartient. Bien, rien dans la loi n'empêcherait un importateur au Canada de faire venir un produit manufacturé par la compagnie mère ou une filiale de l'étranger, de l'importer au Canada sans qu'on puisse prendre les mesures contre cet importateur.

Toutefois, si le produit entre au pays par les soins de la compagnie Hoffmann-La Roche, Hoffmann-La Roche peut empêcher tout autre importateur de faire venir de l'étranger des produits qui sont manufacturés par une filiale de Hoffmann-La Roche. Vous comprenez c'est très technique. Mais voilà précisément où les propriétaires canadiens de la marque sont une société canadienne et peuvent, par conséquent, faire jouer le droit de la marque de commerce pour empêcher l'importation desdits produits.

Bref, en deux mots, l'amendement dit simplement que si l'importateur canadien, par exemple, un vendeur en gros de médicaments, désirait aller en Suisse et acheter un chargement de pilules de quelque source que ce soit ou de médicaments fabriqués par la compagnie Hoffmann-La Roche portant la marque de commerce de cette compagnie aux fins d'importation au Canada, cela ne doit pas être considéré comme un acte illégal. Il ne fait pas de doute que cet article autoriserait l'importation d'un produit qui n'a pas de marque de commerce, qui n'est pas fabriqué par la compagnie elle-même, qui provient peut-être d'une maison concurrente ou d'une compagnie ayant des intérêts opposés. Et il n'est pas question d'importer une contrefaçon. Ce n'est que lorsque le médicament aura la marque de commerce de la société mère de tout un groupe, d'une famille de compagnies qu'une telle chose est permise.

Si je continue je vais peut-être vous induire, non pas en erreur, pardon, mais vous plonger dans la confusion, ce serait peut-être mieux de m'arrêter et de vous laisser poser des questions.

Le président: A l'ordre, s'il vous plaît. Monsieur Otto.

M. Otto: Je crois comprendre les explications de M. Henry, mais la question qui se pose est la suivante: est-ce que cet article dit exactement ce que vous dites, car si je lis

[Texte]

verb, with all due respect to whoever proposed this. It is all very fine to say that you had experts draw this up, but are you sure the clause says what you want it to say? And how does it say this?

Mr. Henry: Mr. Chairman, Mr. Otto's question is a perfectly understandable one. May I start with the verb in the clause? The opening words set out the situation:

Where a company and the owner of a trade mark that is used in Canada by such owner in association with a pharmaceutical preparation—has the same effect, for all purposes of this Act, as a use of the trade mark—by such owner.

Mr. Otto: By the what?

Mr. Henry: By the owner. "Has the same effect, for all purposes of this Act, as a use of the trade mark or the confusing trade mark, as the case may be, by such owner."

Mr. Otto: If we just leave out "the confusing trade mark".

Mr. Henry: This adds, of course, to our confusion, obviously. But you must go back to the Trade Marks Act itself to understand what "use" means. Use takes place under Section 4 in the following circumstances:

A trade mark is deemed to be used in association with wares...
Which would be in association with the drug...

...if, at the time of the transfer of the property in or possession of such wares, in the normal course of trade, it is marked on the wares themselves or on the packages in which they are distributed or it is in any other manner so associated with the wares that notice of the association is then given to the person to whom the property or possession is transferred.

Now, what the Act says is that the trade mark is used when the product bearing the trade mark is sold to another person, shall we say. That constitutes use of the trade mark. The effect of the amendment is to say that when the trade marked drug is brought into Canada from the foreign source, again within the same family, the use of that mark, that is, the selling of the product with the mark on it,

[Interprétation]

bien cet article, je ne trouve même pas le verbe de la phrase. Il est facile de dire que cet article a été rédigé par des experts. Mais êtes-vous sûr que l'article dit exactement ce que vous dites?

M. Henry: Monsieur le président, je comprends que M. Otto pose cette question. Puis-je d'abord lui signaler le verbe dans cet article.

On lit au début:

«Lorsqu'une compagnie et le propriétaire d'une marque de commerce qui est employée au Canada par ce propriétaire, en liaison avec une préparation pharmaceutique...a, aux fins de cette loi, le même effet que l'emploi par le propriétaire de la marque de commerce...»

M. Otto: Par qui?

M. Henry: Par le propriétaire.

«...a, aux fins de la présente loi, le même effet que l'emploi par ce propriétaire, de la marque de commerce ou de l'autre marque de commerce qui crée la confusion avec ladite marque de commerce, selon le cas.»

M. Otto: Si on laisse simplement tomber l'expression «la marque de commerce qui crée la confusion».

M. Henry: Elle ajoute, évidemment, à la confusion. Il faut revenir à la *Loi sur les marques de commerce* pour comprendre ce qu'on veut dire par «utilisation.» L'utilisation est décrite à l'article 4, dans les circonstances suivantes:

Une marque de commerce est utilisée en liaison avec des produits, ou—dans ce cas—des médicaments,

si au moment du transfert de la propriété ou de la possession de ces produits dans le cours normal du commerce, la marque de commerce est, soit indiquée sur les produits ou sur l'emballage dans lequel ils sont distribués, soit associée de telle façon au produit qu'il faille avertir l'association du nom de la personne ou de la société à laquelle la possession ou la propriété est transférée.

En somme, la marque de commerce sert lorsque le produit qui la porte est vendu à une autre personne, par exemple, cela constitue une utilisation de la marque de commerce. L'amendement aura pour effet d'ajouter que lorsqu'un médicament portant une marque de commerce est importé au Canada d'une source étrangère, au sein de la même industrie, l'utilisation de la marque de com-

[Text]

is deemed to be "use" by the owner of the trade mark in Canada. In other words, he cannot infringe his own trade mark rights. Therefore you deem this to be use by him, which eliminates his right to bring an action against the importer.

Mr. Otto: In other words, what you are saying is that under this Section no one can claim that someone else is using a trade mark, because the presumption is that he himself is using it.

Mr. Henry: That is correct.

Mr. Otto: We are denying that anyone else exists. Is that correct?

Mr. Henry: That is right.

Mr. Otto: All right.

Mr. Henry: This can be lifted, which is the next subsection. This can be lifted for reasons of protecting the safety of the public in circumstances which the Minister of National Health and Welfare considers would constitute a hazard to health, because of the possible difference between a pill which is manufactured abroad, by the same family of companies, and one manufactured in Canada. Therefore, it is possible for this right to be removed by a certificate given by the Minister of National Health and Welfare. But subject to that, any person importing in these circumstances must do the things that are mentioned in subclauses (a) and (b): "is acquired by a person directly or indirectly from such company".

• 1205

That means, if we are dealing again with Hoffmann-La Roche, if I can use them as an example—perhaps they will not thank me for this—it would mean that you must buy it from Hoffmann-La Roche, or from one of Hoffmann-La Roche's distributors, in effect, in shall we say Switzerland or England.

The drug must be sold, distributed, or advertised for sale in Canada in a package bearing the name of that company and the name of that person as the distributor. So the name of the company of origin must be on the package, so that there is no confusion as to where it came from and who made it. Secondly, the name of the company that is distributing in Canada—namely the wholesaler, if that is what it is—must also be on the package. So that there is complete identifica-

[Interpretation]

merce, à savoir la vente du produit portant la marque de commerce, constitue une utilisation par le propriétaire de la marque de commerce au Canada.

Autrement dit, il ne peut pas faire enfreindre ses propres droits relatifs aux marques de commerce. Si on considère qu'il y a utilisation, on lui retire le droit d'intenter une action contre l'importateur.

M. Otto: Ce qui revient à dire que personne ne peut prétendre que quelqu'un d'autre utilise sa marque de commerce, car on suppose alors qu'il l'utilise lui-même.

M. Henry: C'est exact.

M. Otto: On nie donc l'existence du reste du monde, n'es-ce pas?

M. Henry: En effet.

M. Otto: Merci.

M. Henry: Passons au prochain paragraphe. Cette restriction peut être levée dans l'intérêt de la santé publique si le ministère de la Santé nationale et du Bien-être social considère qu'il y a menace à la santé, à cause de la différence entre la pilule fabriquée à l'étranger, par une entreprise du même groupe industriel, et celle qui est fabriquée au Canada. Il se peut que ce droit soit retiré par un certificat émis par le ministre de la Santé nationale et du Bien-être social. Moyennant cette réserve, tout personne qui importe dans de telles circonstances, des médicaments, doit se conformer aux exigences des dispositions mentionnées aux alinéas a) et b). «La drogue doit être acquise par une personne directement ou indirectement de ladite compagnie.»

Ce qui signifie, si je peux revenir à l'exemple de Hoffmann-La Roche, peut être que cette société ne sera pas très heureuse, qu'il faudrait évidemment acheter de la société Hoffmann-La Roche, ou d'un de ses distributeurs, soit en Suisse, soit ailleurs.

Et le médicament doit être distribué ou annoncé au Canada dans un emballage portant le nom de cette société et le nom du distributeur. Par conséquent, le nom de la société d'origine doit paraître sur l'emballage, de façon à éviter toute confusion quant à son origine. Le nom de la société qui assure la distribution au Canada, notamment le grossiste, doit paraître sur l'emballage, de sorte qu'il y ait identification complète de la source, ce qui est évidemment l'un des princi-

[Texte]

tion of the source of the product which, after all, is one of the main purposes of the trade mark system, that is to identify the source of the product.

Mr. Otto: I have one question on that. This amendment denies the fact of an existence of another person infringing on a trade mark. Does this exemption also extend to other acts?

Mr. Henry: No, it deals only with pharmaceutical products. Perhaps I misunderstood Mr. Otto's question, Mr. Chairman.

Mr. Otto: No. What we said in this section is that where anyone else is using somebody else's trade mark or patent or name, or whatever it is, he does not exist in law as far as the terms of the Patent Act are concerned, but he is still subject, I take it, to the Food and Drugs Act.

Mr. Henry: Oh, yes.

Mr. Otto: He cannot say that he does not exist, and that it says so right in the Act.

Mr. Henry: Not at all. He is still subject to the Food and Drugs Act, and to all other statutes.

Mr. Basford: Really, Mr. Otto, he exists. But he deems not to be infringing.

Mr. Otto: In the section it says he is deemed to be the same as the manufacturer. So if he put some impurities in it and he is prosecuted, he may say that he does not exist; it is the manufacturer.

Mr. Henry: Mr. Chairman, that is perhaps a telescopic way of putting it. Actually it says it "has the same effect" as use by the owner.

Mr. Chairman, it has been pointed out that perhaps I should again say that the product that is subject to this provision must be a product which is made by, or acquired directly or indirectly from, the company abroad. Let us call it the parent company abroad. In other words, it is manufactured within the family of companies who own the trade mark.

Mr. Otto: If that is the case, there is no purpose to the section. However, if you say it is fine I will not belabour the point.

Mr. Henry: There is a purpose in the section, Mr. Chairman, because as the Harley Committee pointed out, and as the law is, notwithstanding that it does come from a

[Interprétation]

paux objectifs du système des marques de commerce.

M. Otto: Une question à ce sujet. Cette modification nie l'existence d'une autre personne qui enfreint une marque de commerce. Est-ce que cette exemption s'applique aussi à d'autres produits?

M. Henry: Non. Il ne s'agit que de produits pharmaceutiques. J'ai peut-être mal compris la question de M. Otto.

M. Otto: Nous disons dans cet article que si quelqu'un d'autre utilise la marque de commerce ou le brevet d'une autre personne, il n'existe pas aux yeux de la Loi, du moins celle sur les brevets, mais il est encore assujéti à la *Loi sur les aliments et drogues*.

M. Henry: Bien sûr.

M. Otto: Cette personne ne peut pas dire qu'elle n'existe pas, et que la Loi le dit bien.

M. Henry: Non. Cette personne sera encore assujéti à la *Loi sur les aliments et drogues* et à toutes les autres lois.

M. Basford: Cette personne existe, mais on considère qu'elle ne commet pas une infraction.

M. Otto: Mais dans cet article, on dit que cette personne est considérée comme le fabricant, de sorte que s'il mêle des impuretés au produit, et qu'il est poursuivi, il peut dire qu'il n'existe pas, que c'est le fabricant.

M. Henry: C'est peut-être une façon très sommaire d'exposer la situation, on dit qu'il produit en somme «le même effet» que si c'était le propriétaire qui l'utilisait.

Monsieur le président, je devrais peut-être répéter que le produit qui est assujéti à cette disposition doit être fabriqué par, ou acquis directement ou indirectement de la société à l'étranger, que nous pourrions appeler la société mère. Autrement dit, le produit doit être fabriqué à l'intérieur du groupe industriel qui est propriétaire de la marque de commerce.

M. Otto: Si c'est le cas, cet article est inutile. Mais si vous dites que j'ai tort de m'y opposer, je vais me taire.

M. Henry: Cet article est certainement utile. Car comme l'a fait remarquer la Commission Harley, et selon la teneur actuelle de la loi, même si le produit vient d'une société

[Text]

related company abroad, the drug may be kept out by the Canadian trade mark owner who happens to own that trade mark in Canada, because it is similar to his trade mark. And while it may seem an odd way to interpret the trade mark law, that is in effect what the courts have done and have transformed this right of action into what amounts to a non-tariff barrier to trade in products of the company.

When you recognize that the trade mark system is designed to identify the source of products so that people will know where the product comes from and prevent other people who are not the owners of that trade mark pirating it and using it and passing off products as their own, you understand that the system has been applied by the courts in a rather different way from what appears to have been originally intended.

• 1210

Mr. Otto: I would have suggested that at the end it could have been defined as the confusing trade mark, as the case may be, by such owner in so far as any actions with respect to the Trade Marks Act is concerned only.

However, I take it that there is not that much danger of a different type of product being introduced into the country if the manufacturer makes the same base or the same basic products which are manufactured by the Canadian subsidiaries.

Mr. Henry: No, that is a different matter. This, Mr. Chairman, would relate to the import of the ingredients, and you do not normally have a trade mark problem there. You have a patent problem. Of course that is what the patent revision is designed to do, to allow the ingredients to be brought in free of a patent infringement action. The impact of this section will be largely on the final dosage form which is prepared abroad, which is packaged and trade marked abroad, and brought in in its final form.

The Chairman: Are you through, Mr. Otto?

Mr. Otto: Thank you.

Mr. Ritchie: I would like to ask Mr. Henry, Mr. Chairman, if, say, Hoffmann-La Roche—seeing we are using their name—make a drug in Canada of, say, five ingredients, can they use four ingredients in their Mexican plant and still call it the same name? Are they still entitled to do so?

[Interpretation]

affiliée à l'étranger, le propriétaire de la marque de commerce canadienne peut en empêcher l'importation, puisque la marque de commerce est semblable à la sienne. C'est peut-être une interprétation bizarre de la *Loi sur les marques de commerce*, mais c'est de fait de cette façon que les tribunaux l'ont interprétée. Ils ont ainsi transformé ce droit de poursuites en ce qui correspond à une barrière non tarifaire au commerce de ces produits.

Lorsqu'on reconnaît que le système des marques de commerce est censé identifier la source des produits afin que les gens sachent d'où ils viennent, et empêcher les personnes qui ne sont pas propriétaires de la marque de commerce de s'en servir et de vendre les produits, vous comprendrez que l'interprétation des tribunaux s'est éloignée considérablement de la première intention de la Loi.

M. Otto: Je suis d'avis qu'à la fin de l'article, on aurait pu les définir comme étant les marques de commerce qui portent à confusion, si tel est le cas de ce propriétaire, en ce qui concerne toute poursuite en vertu de la *Loi sur les marques de commerce*. Cependant, il me semble qu'il n'y a pas tellement de risques qu'on importe un produit différent si le fabricant fabrique le même genre de produit de base que ses filiales canadiennes.

M. Henry: Il s'agit là d'une autre question, monsieur le président. Cela intéresse l'importation des ingrédients, et, normalement, il n'y a pas, dans ce cas, un problème de marque de commerce, mais un problème de brevet. C'est évidemment l'objet de la *Loi sur les brevets*, de permettre l'importation des ingrédients sans crainte de poursuites juridiques. Les effets de cet article intéresseront finalement la posologie d'un produit fabriqué, emballé et frappé d'une marque de commerce à l'étranger et importé dans sa forme définitive.

Le président: Avez-vous terminé, monsieur Otto?

M. Otto: Merci.

Dr. Ritchie: J'aimerais poser une question à M. Henry. J'aimerais lui demander si c'est la compagnie Hoffmann-La Roche, puisqu'on utilise leur nom, fabrique une drogue au Canada, de 5 ingrédients mais que l'usine mexicaine pourrait utiliser seulement quatre éléments ou quatre ingrédients utilisés le même nom.

[Texte]

Mr. Henry: Mr. Chairman, this might occur and it is for this reason that subclause (2) has been placed in the Bill which recognizes that a situation could theoretically occur where there is a difference between the pill manufactured in, shall we say, the United Kingdom and the pill which looks the same manufactured in Canada.

We have had considerable discussion with the Department of National Health and Welfare about this who inform me—Dr. Chapman can correct me if this is not quite right—that there has been no case brought to the attention of the Department although they sought information on this, that indicates that a difference between a pill manufactured abroad and trade marked and a pill manufactured and similarly trade marked in Canada would be such as to result in a hazard to health.

There might be some minor differences which are not significant from the health standpoint, but in view of the fact that the government was concerned about safety measures in connection with the liberalizing of trade, if I can call it that, in this bill, provision has been made for the Minister of National Health and Welfare to lift the protection of this provision should there be a difference in composition between the imported drug and the Canadian drug, both of which are trade marked and therefore might be confused by doctors and pharmacists, so that the protection of the section would not apply when the Minister gives his certificate and publishes it in the *Canada Gazette*.

To answer Mr. Otto's question again, it is possible that the drug could be manufactured and trade marked in two countries and the composition could be different. I am sorry; that was Dr. Ritchie's question.

Mr. Ritchie: Mr. Chairman, I would like to ask the Food and Drug Directorate, then, concerning the hypothetical question I posed of five ingredients in Canada and four in Mexico, if the Mexican product came to the Food and Drug Directorate how would they treat this, as a new drug or a different drug, or would you assess it on what you thought it was?

Dr. R. A. Chapman (Director-General, Food and Drug Directorate, Department of National Health and Welfare): No, Mr. Chairman, it would not likely be considered a new drug. If we considered that the sale of the second product was likely to result in a hazard to health, then we would have the authority

[Interprétation]

M. Henry: M. le président, ce cas peut se présenter, c'est pourquoi l'article 2 a été incorporé aux dispositions de la Loi. Il reconnaît précisément qu'en théorie, il pourrait y avoir des différences entre une pilule fabriquée au Royaume-Uni et une pilule portant le même nom, mais fabriquée au Canada.

Nous en avons beaucoup discuté avec le ministère de la Santé nationale et du Bien-être social qui m'a déclaré, le D^r Chapman pourra me rectifier si je me trompe, qu'on ne lui a jamais signalé de cas de ce genre. Il a essayé d'avoir des renseignements à ce sujet, n'a jamais découvert qu'une différence entre une pilule fabriquée à l'étranger sous une marque de commerce et une pilule fabriquée au Canada sous la même marque de commerce pourrait présenter une menace à la santé.

Il pourrait s'agir de différences peu considérables et sans effet sur la santé, mais vu que le gouvernement se préoccupe de la sécurité, même dans la libéralisation du Commerce, si vous me permettez cette expression, il a pris des mesures pour que le ministre de la Santé nationale et du Bien-être social, puisse protéger le public s'il y a des différences de composition entre le produit britannique et canadien de la même marque puisque cela peut créer de la confusion chez les médecins ou les pharmaciens; cet article ne s'applique pas, quand le ministre approuve un produit et le publie dans la *Gazette du Canada*.

Je reprends de nouveau la question de M. Otto, il se peut que deux produits pharmaceutiques soit fabriqués sous la même marque de commerce et que leur composition soit différente. Pardon, c'était la question de M. Ritchie.

M. Ritchie: Monsieur le président, j'aimerais demander au représentant de la Direction des aliments et drogues, dans l'hypothèse que je posais où un médicament fabriqué avec cinq ingrédients au Mexique et quatre au Canada, ce produit étant présenté à la Direction des aliments et drogues, est-ce qu'on traiterait ce médicament comme un nouveau produit ou est-ce qu'on en ferait l'évaluation selon les produits existants?

M. R. A. Chapman (Directeur Général, Direction des aliments et drogues, ministère de la Santé nationale et du Bien-être social): On ne le considérerait pas comme produit nouveau. Si l'on croyait que la mise en vente du deuxième produit pourrait mettre en danger la santé publique, nous pourrions, ou au

[Text]

under subclause (2) in this event—at least, the Minister would have the authority under subclause (2) by notice published in the *Canada Gazette*—to withdraw the application of subclause (1) from this particular product. Under these circumstances, of course, then action could be taken by the Canadian company under the Trade Marks Act for infringement of the trade mark.

Mr. Ritchie: Mr. Chairman, I would like to ask one other question. It is mentioned that these drugs will be packaged with the subsidiary. Assuming Mexico is the case we are discussing, in practice this will come to the pharmacist in his store. Let us take a simple example—librium—it will have “Librium Mexico” on it, I presume. That is the general idea; is that right?

As a pharmacist is required to prescribe what the doctor orders, would he be breaking any rule—I believe this is a provincial matter—if he substituted librium Mexico for librium Canada?

• 1215

Dr. Chapman: No, not as far as I am aware, Mr. Chairman. I am presuming that the prescription would simply be written as librium and the pharmacist would then fill the prescription with the product librium.

Mr. Ritchie: Mr. Chairman, then under the new regulations if a physician wishes to prescribe a drug, let us say librium, made by a Canadian company he will have to prescribe librium, Canada made, necessarily to receive the product of the Canadian subsidiary.

Dr. Chapman: Mr. Chairman, this is a hypothetical situation, but I think the statement is correct.

The Chairman: Are you finished, Dr. Ritchie?

Dr. Ritchie: Yes.

The Chairman: Mrs. MacInnis?

Mrs. MacInnis (Vancouver-Kingsway): I would like to return for a moment to Mr. Henry. I was disappointed in the way he decided that he might confuse us worse by continuing, because I was hoping that mine would be dissipated a little more with a continuation of the story. Let us go back—you used this example of a pharmaceutical firm. Under this legislation somebody can import into Canada, but they have got to import the drug, whether it is from Mexico or from Switzerland or from the United States, that is controlled under that firm. It must be that firm's drug.

[Interpretation]

moins le ministre pourrait-il, aux termes du paragraphe 2, au moyen d'un avis publié dans la *Gazette du Canada*, retrancher ce même produit de la protection du paragraphe 1. Dans ces circonstances, bien entendu, la compagnie canadienne pourrait actionner l'autre compagnie pour violation de sa marque de commerce, aux termes de la Loi sur les marques de commerce.

M. Ritchie: J'aimerais poser une autre question, monsieur le président. On mentionne que ces médicaments seront emballés à la succursale de vente. Prenons un médicament fabriqué au Mexique: l'emballage reviendra au pharmacien. Prenons par exemple le librium; l'étiquette sera libellée: «Librium, Mexique», n'est-ce pas? Comme le pharmacien doit préparer les prescriptions en conformité avec le billet du médecin, et je crois que cela relève de la loi provinciale, est-ce qu'il commettra une infraction à quelque Loi s'il substitue au Librium canadien du Librium mexicain?

M. Chapman: Non, pas pour autant que je sache, monsieur le président, je suppose que le médecin prescrira simplement Librium et que le pharmacien remplira la prescription avec le produit Librium.

M. Ritchie: Donc, selon le nouveau règlement, si un médecin désire par exemple prescrire du Librium fabriqué par une compagnie canadienne il devra le spécifier sur l'ordonnance pour que son patient reçoive le produit d'une compagnie canadienne.

M. Chapman: C'est là une situation très hypothétique, monsieur le président, mais je crois que c'est exact.

Le président: Avez vous terminé monsieur Ritchie?

M. Ritchie: Oui.

Le président: Madame MacInnis?

Mme MacInnis (Vancouver-Kingsway): J'ai été quelque peu déçue, parce que je croyais que monsieur Henry nous éclairerait. Revenons maintenant à l'exemple qui a été utilisé, celui de la compagnie pharmaceutique. En vertu de la Loi que nous étudions, quel que soit le produit importé au Canada, du Mexique, de la Suisse ou des États-Unis, par exemple, il doit être contrôlé par la compagnie qui le fabrique. Il faut que ce soit le médicament de cette compagnie.

[Texte]

Mr. Henry: Yes.

Mrs. MacInnis (Vancouver-Kingsway): All right; then what I want to know is this: You quoted earlier, "Trade marks have an inhibiting influence on free and open competition". Will there be any real gain to the consumer under this legislation if the same firm is in charge of Switzerland, Mexico and the United States? Wherein is the advantage of importing from one rather than from the other?

Mr. Henry: Mr. Chairman, that of course depends on whether or not there is a significant price differential. In the first place importers in Canada are not going to spend considerable effort to clear the Food and Drug Directorate's requirements, possibly repackaging the drug, pay the cost of transportation to Canada and market it in Canada unless—and I am talking about a trade marked drug in final dosage form, not the ingredients—it is profitable to do so and unless, therefore, there is a significant differential between the price of the drug to be obtained in the foreign country and the price of the drug in Canada bearing the same trade mark.

We are only talking about the fact that doctors might prefer to prescribe for their patients a particular drug—to use the example mentioned, librium. They wish to prescribe librium for the patients. This merely means that the trade marked drug, librium, may be imported if it is cheaper to bring it in from abroad and sold on the Canadian market. This has nothing whatever to do with another firm who has now a patent licence to manufacture the drug chlordiazopoxide, which is the generic or proper name of librium, and put it on the market under its own brand name.

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This, incidentally, is done at the moment by Frank M. Horner, Limited, which has recently marketed chlordiazopoxide under its own brand name. It is not librium; it is its own name because it could not use the name librium. Therefore, there are those two things to distinguish; the sale of the same drug manufactured by somebody other than Hoffmann-La Roche and there is the sale of the drug manufactured into final form by the Hoffmann-La Roche family.

Mrs. MacInnis (Vancouver-Kingsway): Yes.

Mr. Henry: This amendment affects only that latter situation.

[Interprétation]

M. Henry: Oui.

Mme MacInnis (Vancouver-Kingsway): Voici la question que j'aimerais poser. La Loi sur les marques de commerce a un effet entravant sur la concurrence libre, c'est ce que vous avez dit plus tôt. Comment la mesure à l'étude favorisera-t-elle le consommateur si la même compagnie est en charge des usines au Mexique, aux États-Unis, en Suisse? Quel avantage y aurait-il d'importer d'un pays plutôt que d'un autre?

M. Henry: Monsieur le président, cela dépend, évidemment, d'une différence appréciable de prix qui existe ou non. Tout d'abord, les importateurs canadiens ne seront pas enclins à déployer beaucoup d'efforts pour se plier aux exigences de la Direction des aliments et drogues, à réemballer les médicaments, à payer les frais de transport jusqu'au Canada et à mettre le produit en vente au Canada, à moins que l'opération ne soit profitable, et qu'il y ait une différence considérable entre le prix du produit acheté à l'étranger et le prix du produit qu'on obtient au Canada, portant la même marque de commerce.

Nous parlons ici du fait que les médecins pourraient préférer tel ou tel médicament pour leurs malades, par exemple, le Librium. Cela signifie que le médicament de marque Librium peut-être importé si cela coûte moins cher de le faire venir de l'étranger et de le vendre sur le marché canadien; mais cela n'a absolument rien à voir avec une autre compagnie qui a un brevet pour manufacturer le produit pharmaceutique générique chlordiazopoxide, le vrai nom du librium, et qui peut le vendre sous son propre nom.

C'est ce que fait en ce moment la compagnie «Frank M. Horner, Limited» qui a récemment mis sur le marché du chlordiazopoxide en utilisant sa marque de commerce propre. Elle ne pouvait utiliser le nom «librium». On a donc deux produits similaires, l'un fabriqué par la famille Hoffmann-La Roche, et l'autre fabriqué par ceux qui ne sont pas de cette famille.

Mme MacInnis (Vancouver Kingsway): Oui.

M. Henry: La modification proposée ne porte que sur la situation de la société Hoffmann-La Roche, pour le librium.

[Text]

Mrs. MacInnis (Vancouver-Kingsway): Then would I be correct in assuming that the government or the Department is relying on the existence of this new legislation to bring pressure to bear on the parent company to allow that price differential from different countries?

Mr. Basford: To do away with the price differential; to lessen it.

Mrs. MacInnis (Vancouver-Kingsway): If you do away with the price differential in these different countries I do not see any advantage to the legislation. This legislation could only be advantageous to the consumer if there were a difference in the price of it in Switzerland, in the U.S. and some place else. You do not want to do away with that by this legislation if you are going to protect the consumer.

Mr. Basford: We will do away with it by, hopefully, lowering the Canadian price if it is lower in Switzerland to the Switzerland price. This is just an example, Mrs. MacInnis.

Mrs. MacInnis (Vancouver-Kingsway): Yes.

Mr. Basford: Let us not use real names so as to avoid any reflections on anyone, but we will say we have a drug company, an international pharmaceutical company, Acme Drugs, which has subsidiaries all over the world.

Mrs. MacInnis (Vancouver-Kingsway): Yes.

Mr. Basford: Suppose Acme Drugs U.S. Limited is selling a prescription drug, with a big "A" on it as its trade mark, at the low price of \$1.00 per 100—because of competition or market forces of one sort or another in the U.S.—but it is being sold by Acme in Canada at \$10.00 per 100.

Mrs. MacInnis (Vancouver-Kingsway): Yes.

Mr. Basford: This amendment will allow you, Mrs. MacInnis, as a drug importer to go to the United States, purchase those drugs from Acme U.S. Limited at \$1.00 per 100, bring them into Canada and sell them in Canada under the trade mark protection normally accorded to Acme Canada Limited.

There would then be on the market your Acme Drug, trade marked at \$1.00 at 100 plus your transportation costs, and the Canadian one by Acme Canada Limited at \$10.00 per 100. Now I think the economic effect of this would be that Acme Canada Limited would

[Interpretation]

Mme MacInnis (Vancouver Kingsway): J'ai donc raison, de supposer que le gouvernement, ou le ministère, compte sur cette nouvelle mesure législative afin de presser la société même à encourager des différences de prix pour des produits fabriqués dans des pays différents.

M. Basford: A abolir la différence, vous voulez dire.

Mme MacInnis (Vancouver Kingsway): Si vous éliminez la différence de prix, entre les produits fabriqués dans des pays différents, je ne vois pas à quoi servira la mesure législative. La Loi ne peut avantager le consommateur que s'il y a une différence entre les prix des drogues fabriquées en Suisse aux États-Unis ou ailleurs. Vous ne pouvez certainement pas vouloir éliminer la différence de prix si vous voulez protéger le consommateur.

M. Basford: Nous allons éliminer la différence, j'espère, en réduisant les prix canadiens au niveau des prix suisses, si le prix est inférieur en Suisse.

Mme MacInnis (Vancouver Kingsway): Oui.

M. Basford: N'utilisons pas de noms de compagnies pour éviter les remarques personnelles. Prenons, par exemple, une société internationale de produits pharmaceutiques, l'Acme Drugs qui aurait des succursales dans le monde entier.

Mme MacInnis (Vancouver-Kingsway): Oui.

M. Basford: Supposons que l'Acme Drugs U.S. Limited vende un médicament, portant le grand «A» de sa marque de commerce, au prix très bas de \$1 les 100 unités, pour des raisons de concurrence ou autres forces sur le marché américain, mais que l'Acme le vende au Canada à \$10 les 100 unités.

Mme MacInnis (Vancouver-Kingsway): Oui.

M. Basford: La modification qui est à l'étude vous permettrait, madame MacInnis, si vous étiez importatrice de produits pharmaceutiques, de vous rendre aux États-Unis, d'acheter ces médicaments à l'Acme U.S. Limited pour \$1 les 100 unités, de les importer au Canada, et de les revendre au Canada sous la protection de la marque de commerce habituellement accordée à l'Acme Canada Limited. Il y aurait alors sur le marché à la fois votre médicament Acme, portant cette marque de commerce, au prix de \$1 les 100 unités plus vos frais de transport, et le même médi-

[Texte]

immediately reduce their prices and make them comparable to the U.S. price.

Mr. Saltsman: I have a supplementary question which raises a very important point. Are we not really kidding ourselves? We know it is a policy of international corporations to decide who is going to ship what to where and if international corporations find themselves getting into trouble they are simply going to issue instructions to their subsidiaries in various countries not to ship into Canada—or not to sell to buyers from Canada. What is this legislation going to do about something like that?

Mr. Basford: Our Restrictive Trade Practices Act of course does not apply to practices in the United States but I think that a manufacturer, say, in the United States or the European market would certainly lose control over his wholesaler and then the wholesaler would be free to allow Mrs. MacInnis to go to New York, buy from the wholesaler, and there would be little that the manufacturer could do about it.

Mrs. MacInnis (Vancouver-Kingsway): What bothers me about this is that there is nothing to stop the information of an international cartel. I mean if this legislation does not work the way you propose it will. I would bet that it would be far more likely to result in Acme—the imaginary company you mentioned—in Switzerland, Mexico and the U.S. getting together and denying any one branch the privilege of selling cheaper to us than to any place else. That is what I would be afraid of. Is there anything in this legislation to take care of that? Supposing they form a cartel or enter into a restrictive arrangement outside this country, is there anything in this legislation to make it possible to get a brand named drug from abroad?

• 1225

Mr. Basford: No, but in the example I cited, Acme, selling in the United States, would not be able to control all of its wholesalers and prevent them from coming to you.

Mrs. MacInnis (Vancouver-Kingsway): If I had not seen the Quinine cartel price figures I might believe that, but I just do not believe it because I have seen what can happen.

Mr. Basford: That is a quite different situation.

[Interprétation]

cament, fait par l'Acme Canada Limited, au prix de \$10 les 100 unités. Je pense que l'effet économique de cette mesure serait que l'Acme Canada Limited réduirait immédiatement son prix pour le rendre identique au prix américain.

M. Saltsman: J'ai une question supplémentaire à poser et elle soulève une idée très importante. Ne sommes-nous pas en train de nous leurrer? Nous savons que la politique des sociétés internationales est de décider qui va envoyer quel produit à quel endroit, et, si elles se trouvent dans une mauvaise passe, elles vont simplement donner pour directives à leurs filiales dans les divers pays, de ne pas expédier de produits au Canada et de ne pas en vendre à des acheteurs canadiens. Que peut faire cette loi à une situation de ce genre?

M. Basford: Bien entendu, notre Loi sur les pratiques restrictives du commerce ne s'applique pas aux États-Unis, mais je crois qu'un fabricant aux États-Unis ou sur le marché européen, disons, pourrait facilement perdre contrôle sur son grossiste. Le grossiste pourrait alors permettre à M^{me} MacInnis d'aller à New-York et d'acheter au grossiste, et le fabricant ne pourrait pas y faire grand-chose.

Mme MacInnis (Vancouver-Kingsway): Ce qui me préoccupe, c'est qu'il n'y a rien pour empêcher la formation d'un cartel international. Si la nouvelle loi n'a pas les résultats que vous en attendez, il me semble qu'elle amènera plutôt les succursales de l'Acme—la société imaginaire dont vous avez parlé—en Suisse, au Mexique et aux États-Unis à agir de connivence et à refuser à toute filiale le privilège de nous vendre ses produits moins cher qu'aux autres. C'est cela qui m'inquiète. Y a-t-il quoi que ce soit dans le projet de loi qui puisse empêcher ce genre de situation? Supposons qu'ils favorisent un cartel ou qu'ils concluent une entente restrictive en dehors du Canada. Y a-t-il quelque disposition du projet de loi qui permette d'obtenir des médicaments de marque déposée de l'étranger.

M. Basford: Non. Mais, dans l'exemple que j'ai cité, l'Acme vendant aux États-Unis, ne pourrait pas contrôler tous ses grossistes et les empêcher de vous vendre leurs produits.

Mme MacInnis (Vancouver-Kingsway): Si je n'avais pas vu les données sur les prix du cartel de la quinine, je le croirais peut-être. Mais, ayant vu ce qui peut se produire, je n'en crois rien.

M. Basford: Il s'agit là d'une toute autre situation.

[Text]

Mrs. MacInnis (Vancouver-Kingsway): But it is an international cartel arrangement.

Let me ask one more question. Suppose we did have a situation where the parent companies got together and told their subsidiaries in different countries that they—

Mr. Basford: Pardon me, Mrs. MacInnis, but this already goes on—I mean this is all within one company, all one family.

Mrs. MacInnis (Vancouver-Kingsway): Yes, I know. Let me put it this way then. Suppose that they made it impossible for any one of the different countries to sell at a lower price than any other to Canada, so that there would not be any advantage to bringing in brand name drugs from any one of those countries. Suppose they get together and fix the price all around but it is still a high price—of course the legislation was introduced because the price was high in one country—is there any other answer in respect of the importation of generic drugs?

Mr. Basford: If Acme in their head office directed all of their subsidiaries to charge one world price—

Mrs. MacInnis (Vancouver-Kingsway): Yes.

Mr. Basford: —then there would be no advantage that could be taken under this particular section.

Mrs. MacInnis (Vancouver-Kingsway): Under this part of the Act.

Mr. Basford: No, none whatsoever.

Mr. Otto: It would come under compulsory license, then.

Mr. Basford: Yes—then you would use other references.

Mrs. MacInnis (Vancouver-Kingsway): Then there is not any advantage under that.

Suppose there was another rival firm in the United States that had the same sort of brand name drug—not the same name but the same drug—would this legislation permit a Canadian importer to go to a rival private firm and import their particular variations of librium or whatever it was?

Mr. Basford: Oh yes, certainly, but they could not go and buy their competitor's product in the United States and then sell it in Canada under the Acme name.

Mrs. MacInnis (Vancouver-Kingsway): No, but they could go to a rival firm, if they liked.

[Interpretation]

Mme MacInnis (Vancouver-Kingsway): Mais c'est une entente de cartel international.

Permettez-moi de poser une autre question. Mettons que le cas se présente où les diverses maisons-mère se réunissent et iraient à leurs filiales dans les divers pays de...

M. Basford: Excusez-moi, madame MacInnis, mais cela se fait déjà. Je veux dire que tout cela est dans le cadre d'une seule société, d'un seul et même groupe.

Mme MacInnis (Vancouver-Kingsway): Oui, je sais. Mettons, alors, qu'elles fassent en sorte qu'il soit impossible à l'un des pays de vendre au Canada à un prix inférieur à celui des autres. Il n'y aurait alors aucun avantage à importer des médicaments de marque déposée de l'un de ces pays. Si elles se mettaient d'accord et établissaient un prix fixe, mais que ce prix soit toujours élevé—or, le projet de loi a été proposé justement parce que le prix était trop élevé dans un pays—y aurait-il une autre solution en ce qui concerne l'importation de médicaments génériques?

M. Basford: Si l'Acme, de son siège social, ordonnait à toutes ses filiales d'appliquer un seul et même prix dans le monde entier...

Mme MacInnis (Vancouver-Kingsway): Oui.

M. Basford: ... on n'aurait aucun avantage à retirer de cet article particulier.

Mme MacInnis (Vancouver-Kingsway): De cette partie de la loi.

M. Basford: Non, absolument aucun.

M. Otto: Cela tomberait alors sous le coup de l'obligation d'obtenir un permis.

M. Basford: Oui. Et l'on se fonderait alors sur d'autres critères.

Mme MacInnis (Vancouver-Kingsway): Cet article n'offre donc aucun avantage.

Supposons qu'une société rivale aux États-Unis ait le même genre de médicament de marque déposée. La nouvelle loi permettrait-elle à un importateur canadien de s'adresser à la société rivale et d'importer sa variante de librium, ou de quelque médicament que ce soit?

M. Basford: Oui, bien sûr. Mais il ne pourrait pas acheter les produits de la société rivale et les revendre ensuite au Canada sous le nom d'Acme.

Mme MacInnis (Vancouver-Kingsway): Non, mais il pourrait s'adresser à une société rivale, s'il le voulait.

[Texte]

Mr. Basford: Certainly.

Mrs. MacInnis (Vancouver-Kingsway): Or they could get generic drugs.

Mr. Basford: Yes.

Le président: Monsieur Émard.

M. Émard: Monsieur le président, M. le ministre a-t-il bien dit tout à l'heure, qu'un détenteur de permis obligatoire d'importation aurait le droit d'importer des produits pharmaceutiques fabriqués dans d'autres pays sous une marque de commerce? Est-ce vrai?

Mr. Basford: I am sorry, I did not quite catch that.

M. Émard: Le détenteur d'un permis obligatoire d'importation peut-il acheter des produits pharmaceutiques fabriqués sous une marque de commerce dans un autre pays? Son droit ne se limite pas seulement aux produits génériques, mais englobe aussi une marque de commerce?

Vous avez dit que les compagnies connexes avaient le droit d'importer leurs produits au Canada. Les compagnies ne préféreront-elles pas vendre leurs produits à leurs filiales plutôt qu'à un détenteur de permis obligatoire?

Mr. Basford: Yes, of course they would—I would think they would.

M. Émard: Cela n'empêchera-t-il pas les détenteurs de permis obligatoires de se procurer ces produits pharmaceutiques dans d'autres pays, et sous la même marque?

• 1230

Mr. Basford: No, we do not think so. I emphasize that this section is not connected with the compulsory licence section in any way. I would really go back to the section we passed. We feel that a person importing under a compulsory licence will be able to obtain the products that he wants to import.

M. Émard: Une filiale et un détenteur de permis peuvent-ils tous deux importer le même produit d'un autre pays?

Mr. Basford: Under this amendment to the Trade Marks Act the related company of course could import from its related brother or its parent as they are now doing in large quantities, subject of course to food and drug regulations. This Trade Marks Act amendment would allow someone else to import a

[Interprétation]

M. Basford: Oui, certainement.

Mme MacInnis (Vancouver-Kingsway): Ou il pourrait se procurer des médicaments à nom générique.

M. Basford: Oui.

The Chairman: Mr. Émard.

Mr. Émard: Mr. Chairman, if I understood well the Minister said a moment ago that the holder of a compulsory import licence would have the right to import drugs manufactured in another country under a trade-mark, is this a fact?

M. Basford: Je n'ai pas très bien saisi.

Mr. Émard: Is the holder of a compulsory import licence entitled to buy pharmaceutical products manufactured under a trade-mark in another country? His right is not limited to generic products only, but also covers a trade-mark?

You have mentioned that related companies have the right of importing their products in Canada. Will the companies not prefer selling their products to their own related companies rather than to the holder of a compulsory licence?

M. Basford: Oui, bien entendu. Je le suppose, du moins.

Mr. Émard: Will this not prevent holders of compulsory licences to obtain these drugs in other countries, and under the same trade-mark?

M. Basford: Non, nous ne le pensons pas. Je précise bien que cet article n'a rien à voir avec l'article relatif à l'obligation d'obtenir un permis. J'aimerais revenir à l'article que nous avons passé. Nous estimons qu'une personne qui importe des produits avec un permis obligatoire pourra obtenir les produits qu'elle désire importer.

Mr. Émard: Can a related company and a licence holder both import the same product from another country?

M. Basford: Aux termes de cette modification à la Loi sur les marques de commerce, la filiale pourrait, bien sûr, importer des autres filiales ou de la société-mère, comme cela se fait d'ailleurs à l'heure actuelle, et en grandes quantités, aux conditions, évidemment, des règlements sur les aliments et drogues. Cette

[Text]

trade marked product without infringing the Trade Marks Act.

M. Émard: Les mêmes produits avec la même marque de commerce.

Mr. Basford: Yes. Manufactured by the same person—that is the important thing.

The Vice-Chairman: Shall clause 3 carry?

Mr. Saltzman: I have a question on that, Mr. Chairman.

An hon. Member: I thought I was recognized.

The Vice-Chairman: Apparently the Chairman had Mr. Saltzman, Mr. Robinson and then Mr. Yewchuk. Before we go off on all these tangents, now that I have the Chair, may I remind the Committee that the section we are dealing with says at the bottom of page 6:

...for all purposes of this Act, as a use of the trade mark...

We are dealing only with the trade mark and the actions that may follow. Let us not get into discussion on hypothetical matters that have nothing to do with the trade mark. Mr. Henry has given us an explanation. Might we just stick to the section itself.

Mr. Watson: My question is related to the section.

The Vice-Chairman: It is related to the section?

Mr. Watson: Yes.

The Vice-Chairman: Well, let us hear it before I allow the Minister to answer.

Mr. Watson: I wish to direct my question to Mr. Henry.

The Vice-Chairman: Excuse me, Mr. Watson. There is Mr. Saltzman who has the first question. I will put you on at the end, after 4 o'clock.

Mr. Saltzman: I like this new form of participatory democracy we are getting. Mr. Chairman, I am going to try to be as relevant as I can and stick to the question of the trademark. As the discussion progresses in this Committee, one thing that is becoming fairly obvious to me, at any rate, is that one of the great inhibitions to lowering the price of drugs is the existence of trademarks themselves. In the questioning that has taken place

[Interpretation]

modification permettrait à quelqu'un d'autre d'importer un produit de marque déposée sans violer la Loi sur les marques de commerce.

Mr. Émard: The same products bearing the same trade-mark.

M. Basford: Oui, fabriqué par la même personne. C'est cela qui importe.

Le vice-président: L'article 3 est-il adopté?

M. Saltzman: Monsieur le président, j'ai une question à ce sujet.

Une voix: Je croyais que c'était à moi de parler.

Le vice-président: Le président avait sur sa liste M. Saltzman, puis M. Robinson et M. Yewchuk. Mais avant que nous ne nous éloignons, maintenant que je préside, laissez-moi simplement rappeler au Comité que l'article que nous étudions porte, au bas de la page 6:

...aux fins de la présente loi, le même effet que l'emploi par ce propriétaire de la marque de commerce...

Nous ne nous occupons que des marques de commerce et de ce qui y a trait. Alors n'entrons pas dans toutes sortes de discussions sur des situations hypothétiques qui n'ont rien à voir avec les marques de commerce. M. Henry nous a expliqué cet article. Tenons-nous en à l'article en question.

M. Watson: Ma question se rapporte à cet article?

Le vice-président: Elle s'y rapporte?

M. Watson: Oui.

Le vice-président: Eh bien, posez-la avant que je ne permette au ministre de répondre.

M. Watson: Je désire poser ma question à Monsieur Henry.

Le vice-président: Je m'excuse, Monsieur Watson, mais la première question appartient à Monsieur Saltzman. J'inscris votre nom à la fin.

M. Saltzman: J'aime beaucoup cette forme de démocratie, de participation. Je vais essayer de m'en tenir à la question des marques de commerce le plus possible, monsieur le président.

Au fur et à mesure que nous avançons dans nos délibérations, une chose se précise de plus en plus dans mon esprit, du moins, c'est que l'un des plus grands obstacles à la réduction du prix des médicaments réside juste-

[Texte]

up until now it has become obvious that those who hold the trademark have a virtual monopoly on the use of that particular product. Simply passing this clause, will not have much effect if an international cartel or a trademark monopoly wants to frustrate the intent of the proposed legislation, which is to lower prices.

The Harley Committee in discussing the trademark took a position, it seems to me, which recognized the dangers that exist and the inhibitions that exist as a result of the trademark, but took no action against trademarks. To use their words, the reason they have given is, "that this could be out of character with present day commercial practice."

I am quite prepared to be out of character with present day commercial practice, Mr. Chairman, and what I would like to suggest is that we find some way of getting rid of trademarks in Canada completely. I think this is the one real chance we have of getting effective competition into the drug industry and moving towards generic drugs.

In this regard I would appreciate your assistance, Mr. Chairman, since my record of getting amendments before the Committee has not been very good today, by asking you if you would consult with your law officer to see in which way an amendment could be drafted that would strike out the references to trademark and how we could draft an amendment to say that trademarks will not be used in Canada and that drugs shall be sold by their generic names.

• 1235

The Vice-Chairman: Mr. Saltzman, this bill does not deal with the abolition of trademarks. It only deals with the case, as explained by Mr. Henry and the Minister, where there are related companies, where there is a subsidiary company, and what it says is that the use of the trademark shall be the same in the context of the Trade Marks Act as if it were used by the company owning the trademark. It is nothing more than that. We are not dealing with the abolition of the whole law on trademarks or the rights pertaining thereto. I would not even discuss this with the law officer at all, with respect.

Mr. Saltzman: Mr. Chairman, on a point of privilege, I wish you to discuss it with the

[Interprétation]

ment dans l'existence de ces marques de commerce. Il ressort des questions qui ont été posées jusqu'ici que ceux qui détiennent une marque de commerce détiennent en même temps un véritable monopole sur ce produit particulier. L'adoption de cet article n'aura pas grand effet si un cartel international ou celui qui détient le monopole sur une marque de commerce décide de faire échec au but de ce projet, qui est la réduction du prix des médicaments.

Lorsqu'il a discuté des marques de commerce, le comité Harley a adopté une position par laquelle il reconnaissait l'existence de ces dangers et l'existence des obstacles qui découlaient des marques de commerce, mais il n'a pris aucune mesure contre ces marques de commerce. J'ajouterai, pour citer le rapport, qu'il en a été décidé ainsi parce qu'une telle mesure «ne serait pas de mise dans les conditions actuelles».

Je n'ai aucune objection à n'être pas de mise avec les conditions actuelles, monsieur le président, et je suggère que nous tentions de trouver un moyen pour nous débarrasser des marques de commerce au Canada. Nous avons ici une chance unique d'introduire la libre concurrence dans l'industrie pharmaceutique et de nous diriger vers la vente de médicaments sous leurs noms génériques.

Je voudrais vous demander, monsieur le président, de vous renseigner pour savoir comment on pourrait rédiger un amendement qui éliminerait la mention des marques de commerce et comment on pourrait rédiger un amendement disant que les marques de commerce ne doivent plus être utilisées au Canada et que les médicaments doivent être vendus suivant leur nom générique?

Le vice-président: Je regrette mais ce projet de loi ne vise pas l'abolition des marques de commerce. Il ne traite que du cas, tel qu'expliqué par M. Henry et par le ministre, des compagnies connexes. Le projet mentionne que l'usage de la marque de commerce, par une filiale de la compagnie qui détient cette marque de commerce, doit être le même que celui qu'en aurait fait la compagnie qui la détient.

Autrement dit, nous ne parlons pas de l'abolition de toute la loi sur les marques de commerce ni de l'abolition des droits accordés par cette loi. Je ne soumettrais même pas la question au conseiller juridique.

M. Saltzman: Monsieur le président, j'invoque une question de privilège. J'aimerais que

[Text]

law officer. While recognizing your great knowledge of legal affairs, I would like the assurance of the law officers of the Crown. While we are getting that,—I think it is my right to ask for that—I would like to direct a question to the Minister. Has the Minister considered the abolition of trademarks, if some of the measures he has proposed are not effective?

Mr. Basford: Naturally, we have given it some thought and consideration. It was raised in the House and I pay great attention to and give consideration to anything raised in the House. I suspect this will not be a very satisfactory answer. I am not sure just how you would do away with trademarked drugs, but even if we found a way I am advised that to do so would put us in breach of our international obligations under the Trade Mark Convention, of which we are a member, and that that would create difficulties for us.

In drafting this bill throughout, relative to patents and to trademarks, we have had to take into account our obligations under the international conventions and arrangements that we are part of. To start off with, I am advised that to do away with trademarks on drugs, even if that were desirable, would place us in breach of our international obligations.

There are some other problems, however. The first one is the question of compounds. Many of the things on the market are made up of more than one ingredient; they contain several. Really, the only way to identify these in any comprehensible way is by some trade name or trademark or some name for the compound which is easily recognized.

If a certain medicine contained four of five different things, it would be extremely awkward to require that they all be listed. Of course, those four of five ingredients are blended together and that compound becomes known by a trade name. To outlaw trademarks for those medicines having only one ingredient, would, of course, have the effect of encouraging everyone to add some other ingredient, which may have no therapeutic effect, simply to make it a compound in order to get a trademark.

Therefore, I see a real practice difficulty in trying to do away with the trademark, even if it were desirable. I really have not had time to consider just how desirable it would be.

[Interpretation]

vous en discutiez avec ce conseiller. Tout en admettant que vous connaissiez à fond les questions juridiques, j'aimerais en avoir la confirmation des conseillers juridiques de la Couronne. En attendant cette réponse—je crois avoir le droit de la demander—j'aimerais poser une question au ministre et lui demander s'il a songé à abolir les marques de commerce, si certaines des dispositions qu'il propose n'apportent pas les résultats désirés.

M. Basford: Naturellement, nous avons longuement étudié la question, on a soulevé cette question en Chambre et tout ce qui est soulevé en Chambre, naturellement, reçoit notre plus entière attention.

Je pense que la réponse ne vous satisfera pas tellement. Je ne sais pas très bien comment vous pourriez supprimer la marque de commerce sur les médicaments, mais même si vous trouviez un moyen de le faire, on me dit qu'en posant un tel geste nous ignorerions cette entente internationale que nous avons promis de respecter, ce qui nous causerait des ennuis.

En rédigeant ce bill, il nous a fallu tenir compte des obligations que nous avons promis de respecter aux termes des accords internationaux que nous avons signés. Alors, dès le départ, si nous supprimions les marques de commerce sur les médicaments, même si ceci était souhaitable, nous contreviendrions à nos obligations internationales.

Il y a d'autres problèmes aussi. Premièrement, il y a les composants. Plusieurs des produits, sur le marché, sont constitués de plus d'un ingrédient; ils en contiennent plusieurs. En fait, la meilleure façon de les identifier, de façon compréhensible, c'est par une marque de commerce, ou en donnant un nom à ce médicament composé pour qu'il soit facilement reconnaissable.

Par exemple, vous avez certains médicaments qui comprennent quatre ou cinq ingrédients; il serait assez bizarre d'exiger qu'on en donne la liste. Évidemment, ces quatre ou cinq ingrédients deviennent un mélange et sont connus grâce à la marque de commerce. Rendre hors-la-loi les marques de commerce pour les produits qui ne comportent qu'un ingrédient, ne ferait qu'encourager les gens à ajouter d'autres ingrédients qui n'ont aucun effet thérapeutique, simplement pour obtenir une marque de commerce.

Je vois déjà là un ennui d'ordre pratique dans la suppression des marques de commerce, même si cette suppression apparaissait désirable. Je n'ai réellement pas eu le temps de voir si cette suppression serait réellement souhaitable.

[Texte]

Also you run into very serious legal problems. If you were, for example, to take a pretty obvious solution to your question and amend the Trade Mark Act by saying that the Commissioner will not register a trademark relative to any pharmaceutical preparation, that takes away that protection of the trademark owner. It would not, of course, prevent anyone using a trademark. They just would not have the protection afforded by the Trade Mark Act. This would then allow anyone else to use that trade name or trademark, which could create, I am inclined to think after considering this, a situation of considerable hazard to the public.

• 1240

We have talked a great deal here about Hoffmann-LaRoche and Librium, a trademark name. If you took away the protection of the Trade Mark Act it would allow anyone to produce something and call it Librium which I think would result in a real hazard. Taking away the protection of the Trade Mark Act is not the way to do it.

Do you amend the criminal law in some way, to make it an offence to use a trade name? That, it seems to me, is full of constitutional difficulties, to start with; because although the Food and Drugs Act is based on the criminal jurisdiction it is based on public safety and on imposing a penalty for affecting the public safety. Certainly use of a trade mark is not involved with public safety. One would run into serious constitutional, or legal, problems by doing what you have suggested.

Mr. Saltzman: Mr. Basford, it is my intention to pursue this later, but I realize we are nearing the adjournment and that others wish to speak.

I do not want to continue this too far, except simply to clarify for your understanding that what I am really seeking is a way of marketing drugs different from the present one, according to brand names, which, as I think the evidence before us indicates, puts people into a monopoly position and leads to the finding of derivatives or to changes which are made for marketing purposes only rather

[Interprétation]

D'autre part, vous vous heurtez à des problèmes très graves. Si nous décidions d'amender la *Loi sur les marques de commerce*, en déclarant que le commissaire n'enregistrera plus aucune marque de commerce qui a trait à quelque préparation pharmaceutique que ce soit, dès lors nous retirons au détenteur d'une marque de commerce la protection dont il jouissait. Cette mesure n'empêcherait personne d'utiliser une marque de commerce. Cette personne ne serait tout simplement plus protégée par la Loi. Quiconque le désire pourrait alors utiliser cette marque de commerce ce qui pourrait créer, maintenant que j'y songe, une situation plutôt dangereuse pour le public.

Nous avons longuement discuté de la compagnie Hoffmann-Laroche et du Librium, un produit protégé par une marque de commerce. Si vous éliminez cette protection qu'accorde actuellement la *Loi sur les marques de commerce*, quiconque le désire pourra fabriquer un produit et l'appeler Librium, ce qui, à mon avis, peut présenter certains dangers. Éliminer cette protection qu'accorde présentement la loi n'est certes pas le bon moyen pour atteindre cette fin.

Allez-vous modifier la Loi sur le code criminel de sorte que ce soit un délit criminel que de se servir d'une même marque de commerce? Mais ceci, d'après moi, est rempli au début d'obstacles constitutionnels; parce que bien que la *Loi sur les aliments et drogues* soit fondée sur le droit criminel, elle est aussi basée sur la sécurité publique et sur l'imposition d'une peine si on affecte la sécurité publique.

L'utilisation d'une marque de commerce n'a certainement rien à voir avec la sécurité publique. Vous aurez des problèmes constitutionnels ou juridiques très graves si on procède de la façon que vous suggérez.

M. Saltzman: Eh bien, monsieur Basford, j'ai l'intention de poursuivre cette question plus tard, mais, étant donné que nous approchons l'heure de l'ajournement et que d'autres veulent prendre la parole, je pense que cela ne sert à rien de continuer pour simplement préciser afin que vous compreniez que mon intention est de trouver une nouvelle façon de mettre en marché certains produits pharmaceutiques, d'une façon différente de celle qu'on a dans le moment, selon la marque de commerce, qui, je crois, d'après la preuve qu'on nous a présentée, place les gens dans

[Text]

than for making substantial changes in the drugs themselves.

It seems to me that we really have to move into an entirely different way of marketing, one tending towards generic names; or, if this is not possible, as you suggest, to have compound drugs, or some kind of designated compound that is easily understood by everyone.

Mr. Chairman, I have finished.

Mr. Basford: I am sorry, Mr. Chairman, I know you told us to keep on point, but I am sympathetic to Mr. Saltzman's objective—and, of course, this is what the information bulletin is partly designed for—but my point is that, having considered the suggestion—and we will consider it again, and constantly—we are of the opinion that although we might want to encourage people to prescribe generically that would not be accomplished simply by taking away the protection of the trade mark.

The Vice-Chairman: Mr. Robinson, we have only another five minutes. Is that sufficient time or do you want to—

Mr. Saltzman: On a point of order, Mr. Chairman. I am prepared to let my amendment stand until you have a chance to consult with the law officers.

Mr. Basford: You mean I have not persuaded you?

The Vice-Chairman: Mr. Saltzman, with all respect, and speaking to you now as Chairman, surely you do not expect the Chair to be burdened with the composition of an amendment. You have asked me to consult with the law officer to find ways and means by which you can introduce an amendment into this act.

I suggest to you this is not the purpose of the Chair. You, as a member, of course, are completely at liberty to get advice from the law officers, but surely you do not seriously suggest that members be allowed to throw out ideas and burden the Chair with the composition of amendments?

Mr. Saltzman: Mr. Chairman, I find it very difficult to understand your position. I have known you as a reasonable man in the past. If you find the Chair such a burden perhaps there are others who might not feel so strongly about it.

[Interpretation]

une situation de monopolisation et les pousse à trouver des dérivatifs ou des changements qui proviennent de raisons de commercialisation essentiellement et qui ne consistent pas du tout en une modification du produit lui-même.

Et, je pense qu'il va falloir trouver une mise en marché entièrement différente en se servant des noms génériques; ou si cela est impossible, comme vous le suggérez, lorsqu'il s'agit de composés, que le nom soit facilement intelligible à tous. Monsieur le président, j'ai terminé.

M. Basford: Je sais, monsieur le président, que vous nous avez dit de ne pas pousser la question trop loin. Je comprends très bien l'intention de M. Saltzman et le bulletin d'information est justement destiné à éclairer l'opinion. Mais, d'après moi, après avoir étudié votre suggestion, et nous l'étudierons de nouveau et constamment. D'après moi, même si on veut que les gens acceptent un nom générique, on sait qu'on ne peut pas réaliser cet objectif en éliminant tout simplement la protection des marques de commerce.

Le vice-président: Monsieur Robinson, il ne nous reste que 5 minutes. Est-ce que c'est assez pour terminer...

M. Saltzman: J'invoque le Règlement, monsieur le président. Je suis prêt à réserver mon amendement et à attendre l'avis des experts juridiques.

M. Basford: Vous voulez dire que je ne vous ai pas convaincu.

Le vice-président: Monsieur Saltzman. Maintenant, je vous parle à titre de président, vous ne vous attendez certainement pas à ce que le président s'ingère la tâche de rédiger votre amendement? Ce que vous m'avez demandé de faire, c'est de consulter les légistes pour trouver des moyens qui vous permettraient de présenter un amendement.

Ce n'est pas l'intention du président, je vous le signale. Vous, à titre de membre, êtes libre d'obtenir des renseignements des avocats, mais vous ne prétendez certainement pas que chaque membre puisse présenter une idée et s'attendre à ce que le président rédige les amendements.

M. Saltzman: Monsieur le président, il m'est très difficile de comprendre votre position. Je sais que vous avez toujours été un homme très raisonnable, jusqu'ici. Si la présidence est un pareil fardeau, peut-être que quelqu'un d'autre pourrait assumer de telles fonctions plus facilement.

[Texte]

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I think I have a right to ask you to consult on this matter without your ruling on it out of hand. I would appreciate if you would do that.

Mrs. MacInnis (Vancouver-Kingsway): Mr. Chairman, on a point of order. If it were logical and right to have the law officers consulted on an earlier amendment, by what kind of logic do you make it impossible for them to be consulted on this one?

The Vice-Chairman: Mrs. MacInnis, the amendment was made by Mr. Saltzman.

Mrs. MacInnis (Vancouver-Kingsway): That does not rule it out.

The Vice-Chairman: The Chair consulted with the law officers on the validity of that amendment.

Mrs. MacInnis (Vancouver-Kingsway): All right; that is all we want to know.

The Vice-Chairman: But the Chair did not co-operate with any member in composing the amendment. This is what Mr. Saltzman has asked the Chair to do.

I have made the ruling. Mr. Saltzman may wish to contest the ruling, but the Chair stands by it.

If you have finished, Mr. Saltzman, I will ask Mr. Robinson to...

Mr. Saltzman: No, Mr. Chairman, I have not finished. What I have asked the Chair—and I hope the record will show this—is whether it is possible in this particular section to move an amendment to incorporate the suggestions I have made. I am quite prepared to draft my own amendment rather than involve the Chair in an amendment that might not be in order, but I thought it well to check whether an amendment to this section were possible. If it is, I am quite prepared to do my own drafting.

The Vice-Chairman: Very well. Mr. Robinson?

Mr. Robinson: Mr. Chairman, I wish to follow up some of Mr. Saltzman's remarks, not on his proposed amendment but on his concern about the utilization of the Trade Marks Act and how it might, or might not, effect the lowering of prices of drugs.

[Interprétation]

J'estime que j'ai le droit de vous demander de consulter quelqu'un sur cette question, sans que vous rendiez une décision à l'emporte-pièce. Et, je vous demande de le faire.

Mme MacInnis (Vancouver-Kingsway): J'invoque le Règlement, monsieur le président. Si c'était logique et bien de consulter les légistes au sujet d'un amendement antérieur, je voudrais savoir comment on ne peut pas les consulter cette fois-ci?

Le vice-président: Madame MacInnis, c'est M. Saltzman qui a présenté un amendement.

Mme MacInnis (Vancouver Kingsway): Cela ne l'élimine pas.

Le vice-président: Le président a consulté nos légistes sur la validité de l'amendement.

Mme MacInnis (Vancouver Kingsway): Très bien. C'est tout ce que nous voulions savoir.

Le vice-président: Le président n'est pas obligé d'aider un député à composer son amendement. C'est ce que M. Saltzman a demandé au président.

J'ai rendu ma décision. S'il veut poursuivre plus loin... J'ai rendu ma décision et maintenant, monsieur Robinson, si vous voulez dire quelque chose?

M. Saltzman: Non, monsieur le président. Je n'ai pas fini. Ce que j'ai demandé au président et j'espère que ce sera consigné au procès-verbal, c'est à savoir si c'est possible de proposer un amendement à cet article-ci pour y inclure les suggestions que j'ai faites. Je suis tout à fait préparé à rédiger mon propre amendement. Que je demande au président de participer au libellé peut ne pas être conforme au Règlement, mais ce serait peut-être recommandable de vérifier s'il y a un moyen de faire un amendement à cet article. Dans ce cas, je serai prêt à rédiger mon propre amendement.

Le vice-président: Très bien. Monsieur Robinson?

M. Robinson: Monsieur le président, je veux donner suite à certaines remarques de M. Saltzman, pas pour ce qui est de l'amendement proposé, mais en ce qui concerne ses soucis visant l'utilisation de la Loi sur les marques de commerce et la façon dont ceci peut affecter ou non la baisse des prix des médicaments.

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However, as a preface to that may I ask how long an owner has exclusive ownership of a trademark?

Mr. Basford: So long as he keeps up his registration it is good for 15 years. Then he has to re-apply.

Mr. Robinson: Therefore, under the Patent Act there are exclusive patent rights for 17 years and under the Trade Marks Act they are for 15 years.

Mr. Basford: No; they are really forever.

Mr. Robinson: A trademark, of course, is not a patent on a process. As I understand it at the end of 15 years another manufacturer could use the same trade mark?

Mr. Basford: If the holder of the trade mark did not re-apply, or re-register it, that trade mark would go into the public domain and anyone could use it.

Mr. Robinson: If that were the case—

Mr. Basford: But in the usual course of events, if a trademark is valuable people are very quick to make sure that they re-register. They do not let it lapse and be expunged from the record.

Mr. Robinson: In other words, it could be re-registered and then re-registered again.

Mr. Basford: Yes.

Mr. Robinson: Indefinitely.

Mr. Basford: Yes, and there are 101 different examples of very old trademarks which are still being used.

Mr. Robinson: The impression I get from the Harley Report relative to the Trade Marks Act is that the watering down of the Canadian law on trade marks might, in some way, be utilized in lowering the price of drugs. The suggestion, as I understand it, is that there might be a watering down of the Trade Marks Act as it affects pharmaceutical preparations only, not relative to other items that could be the subject of trade marks.

If this legislation proposed in Bill C-102 does not have the desired effect of substantially reducing prices of drugs would the

[Interpretation]

Mais tout d'abord, pendant combien de temps est-ce que le propriétaire d'une marque de commerce en est propriétaire, exclusivement?

M. Basford: Tant qu'il maintient son enregistrement. Tant qu'il renouvelle son enregistrement. Cela vaut pour 15 ans, ensuite il faut qu'il fasse une nouvelle demande?

M. Robinson: Donc aux termes de la Loi sur les brevets, vous avez des droits exclusifs pendant 17 ans, et aux termes de la *Loi sur les marques de commerce*, c'est pendant 15 ans.

M. Basford: Non, ils sont réellement pour toujours.

M. Robinson: Une marque de commerce n'est pas un brevet ou un procédé. Je crois comprendre qu'après 15 ans un autre fabricant peut utiliser la même marque de commerce?

M. Basford: Non, pas si le propriétaire du brevet n'a pas fait une nouvelle demande d'enregistrement à ce moment-là, le produit entre dans le secteur public et n'importe qui peut s'en servir.

M. Robinson: Si tel était le cas...

M. Basford: Mais d'habitude, si une marque de commerce est valable, les gens veillent à l'enregistrer de nouveau. Ils ne la laissent pas tomber et être rayée des dossiers.

M. Robinson: Donc, on peut l'enregistrer de nouveau et encore de nouveau.

M. Basford: Oui.

M. Robinson: Indéfiniment.

M. Basford: Oui; je peux vous citer des centaines d'exemples d'anciennes marques de commerce qu'on utilise encore.

M. Robinson: Après avoir lu le rapport Harley au sujet de la Loi sur les marques de commerce, l'impression que j'ai, c'est qu'on dit que l'édulcoration de la Loi sur les marques de commerce pourrait être utilisée pour baisser le prix des médicaments. J'en tire l'application que l'on pourrait édulcorer la *Loi sur les marques de commerce* pour ce qui est des préparations pharmaceutiques, exclusivement, et pas dans le cas d'autres substances qui pourraient faire l'objet d'une marque de commerce.

Et, je me demande si la mesure législative proposée ici, le Bill C-102, n'a pas l'effet désiré de réduire le prix des médicaments de

[Texte]

Minister consider this so-called watering down of the trade mark law in relation to the pharmaceutical process?

Mr. Basford: Harley says:

Certainly, importation of identically trademarked drugs from abroad at lower prices would introduce open competition in the Canadian market with resulting benefit to the Canadian consumer.

This is what clause 3 of the bill is designed to do—to allow you, in opposition to the Canadian trade mark owner to import into Canada identically trade-marked drugs from abroad. Clause 3, as an amendment to the Trade Marks Act, is in accordance with that sentence from the Harley Report.

Mr. Robinson: You are suggesting that there is no necessity to change the trade mark law as it presently stands.

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Mr. Basford: This is an amendment to the trade mark law.

Mr. Robinson: But if this does not provide the desired result, my question is whether you would go further and change the trade mark law as it affects pharmaceuticals.

Mr. Basford: That would depend on what changes it was thought desirable to make.

Mr. Saltsman has made one suggestion which, for the moment, I cannot accept because I see great difficulty.

I may say, Mr. Robinson, that we will of course be receiving a report from the Economic Council of Canada pursuant to its reference on copyright, patents, trade marks and industrial designs, and I expect that that report will be recommending changes in all of our patent law, trade mark law, copyright law and industrial design law.

That report, of course, is not directed specifically to pharmaceuticals but to the general question of patents and trade marks.

Mr. Robinson: But will it be focused in any way on the reduction of drug prices, which is really what we are concerned with in this bill?

Mr. Basford: No, the reference to the Economic Council is in light of the government long-term economic objectives to report on patents, copyrights, et cetera, and they are

[Interprétation]

façon substantielle. Est-ce que le ministre voudrait songer à édulcorer comme ceci la Loi sur les marques de commerce à l'égard des produits pharmaceutiques?

M. Basford: Harley déclare:

L'importation à des prix inférieurs de l'étranger introduirait à la libre concurrence par les marchés canadiens et ferait beaucoup de bien aux consommateurs canadiens.

Voici exactement l'intention de l'article 3 du projet de loi: on vous permettrait de faire la concurrence avec un propriétaire canadien d'une marque de commerce en important des produits fabriqués à l'étranger. Donc, l'article 3 est un amendement à la Loi sur les marques de commerce et conforme à la phrase du rapport Harley que je viens de lire.

M. Robinson: Vous dites qu'il ne serait pas nécessaire de modifier la Loi sur les marques de commerce telle qu'elle existe dans le moment?

M. Basford: C'est un amendement à la Loi sur les marques de commerce.

M. Robinson: Mais, si cela ne donnait pas les résultats désirés, est-il question que vous alliez plus loin pour modifier la Loi sur les marques de commerce pour ce qui est des produits pharmaceutiques.

M. Basford: Mais, cela dépend des changements qui seraient souhaitables. M. Saltsman a fait une suggestion et pour le moment je ne peux pas l'accepter. J'y vois beaucoup de difficultés.

Monsieur Robinson, tout ce que je peux dire c'est que, évidemment, nous allons recevoir un rapport du Conseil économique du Canada sur les brevets, les marques de commerce, les dessins industriels, et, j'imagine que ces rapports recommanderont des changements sur la Loi sur les brevets, sur les marques de commerce, sur les dessins industriels. Ceci ne s'appliquera pas simplement directement aux produits pharmaceutiques, mais à l'ensemble de la question des brevets et des marques de commerce.

M. Robinson: Est-ce que vous allez vous concentrer, de toute façon, sur la réduction du prix des drogues? C'est là le but du bill.

M. Basford: Non, on a demandé au Conseil économique conformément aux objectifs à long terme du Canada de faire rapport tout simplement sur la loi. Par conséquent, le Con-

[Text]

therefore concerned with the place of the patent system, the trademark system or the copyright system in Canada's economic development—the part it has played, the part it should play and what improvements and changes should be made in it.

Mr. Robinson: Has any consideration been given to the use of generic term drugs rather than brand name drugs in order to reduce prices? By that I mean removing the section of the trademark law that pertains to the preparation of drugs.

Mr. Basford: We have given this some consideration but we are certainly not convinced of the wisdom of, say, amending the Trade Marks Act to do away with trademarks on pharmaceuticals. We think first that that would create international complications under our agreement; just that alone would create a terribly confusing situation rather than an improved situation.

However, according to Dr. Chapman's information bulletin, the Food and Drug Directorate will be dealing—and Dr. Chapman may want to add to what I say—with brand names and trademarks drugs, plus the “unbrand” name drugs, as well as with the generics drugs. Presumably this will encourage doctors to rely on the information bulletin and encourage them to prescribe the less expensive drugs, be they trademarked or not.

Mr. Robinson: Has it been suggested that the acceptability and implementation of this legislation would be based on how the medical profession accepts it, in that they would then use generic term drugs rather than brand name drugs?

Mr. Basford: This is one of the characteristics of the drug market in that the ultimate consumer is not the person who makes the choice as to what he buys. It is prescribed by the doctor. That is a unique feature of drug marketing and it is one that must remain because the doctor must be the ultimate judge of what he prescribes for his patient.

I think our concern is to encourage doctors to be aware of the price of the drugs they prescribe and to be concerned with trying, for those patients who cannot afford high-priced drugs, to endeavour to put into the hands of the doctor information which allows him to prescribe less expensive drugs. Also,

[Interpretation]

seil s'occupe du système de brevets, du système de droits d'auteur et de marques de commerce au Canada; du rôle que chacun a joué, du rôle qu'il devrait jouer; des améliorations ou des modifications qui devraient y être apportées.

M. Robinson: A-t-on envisagé d'utiliser les noms génériques des médicaments plutôt que leurs appellations commerciales en vue de réduire les prix? J'entends par là le fait de supprimer l'article de la Loi sur les marques de commerce, qui traite de la préparation des médicaments.

M. Basford: Nous y avons accordé une certaine attention mais nous ne sommes pas convaincus de la sagesse qu'il y aurait à modifier la Loi sur les marques de commerce à propos des produits pharmaceutiques. Ceci créerait des complications internationales et embrouillerait terriblement la situation plutôt que de l'améliorer.

Toutefois, selon le bulletin d'information du D^r Chapman, la Direction des aliments et drogues s'occupera des noms de marques de commerce, des médicaments qui portent des marques de commerce et de ceux «hors marque» ainsi que de ceux portant des noms génériques, et j'imagine que ceci encouragera les médecins à se baser sur le bulletin d'information et à prescrire les médicaments les moins chers, qu'ils portent ou non une marque de commerce.

M. Robinson: Est-ce que vous laissez entendre que l'acceptabilité et la mise en œuvre de cette mesure législative dépendent de la façon dont la profession médicale va l'accepter, ... en se sens qu'ils utilisent alors des médicaments portant un nom générique plutôt que ceux d'une marque de commerce particulière.

M. Basford: C'est justement une des particularités du marché des médicaments qu'en fin de compte le consommateur n'est pas celui qui décide ce qu'il achète. C'est le médecin qui prépare l'ordonnance. C'est le caractère unique de la mise en marché des médicaments. Et qui doit d'ailleurs demeurer inchangé parce que c'est le médecin qui doit, enfin de compte, juger de ce qui est bon pour son patient.

Alors, je pense que nous voulons surtout encourager les médecins à se rendre compte du prix des médicaments qu'ils prescrivent et aussi à tenir compte de la situation des patients qui ne peuvent pas se permettre certains médicaments, on pourrait remettre aux médecins des renseignements sur les produits

[Texte]

to encourage patients to raise this issue with the doctors, to be concerned about it themselves and to get the medical profession concerned about it.

● 1255

Mr. Robinson: But, Mr. Minister, there is nothing in the proposals that would require the medical profession to prescribe generic term drugs rather than brand name drugs.

Mr. Basford: No, and I have certainly seen nothing that would convince me that that should be done, and I just do not think that we as legislators should interfere with the practice of medicine in that way.

Mr. Robinson: Would it not be more a matter of conscience, as far as the doctor is concerned, as to whether he prescribes one or the other?

Mr. Basford: It is a matter of concern to the doctor. I do not know whether it is a matter of conscience or not.

Mr. Robinson: The point is that if both the generic term drug and the brand name drug will do exactly the same thing, apart from price what reason would he have for recommending one or the other?

Mr. Basford: Because he knows the brand name drug, I suppose; because he has been persuaded that it is the best one; he has been persuaded that he can have confidence in that drug.

Mr. Robinson: Then I can assume that...

Mr. Basford: And coupled, to a great extent, with this lack of confidence in generics that many of those concerned with lower cost drugs are trying to overcome.

Mr. Robinson: Then I can assume that along with the proposed act there will be this bulletin that you mentioned before; the idea of the bulletin being to encourage doctors to have as much faith in the generic drugs as they have in the brand name drugs?

Mr. Basford: Yes, but I think Dr. Chapman might like to add a word to that and re-explain the bulletin, if he would not mind.

Dr. Chapman: Thank you, Mr. Minister. Mr. Chairman, page 17 of the Harley Committee report contains a discussion of this

[Interprétation]

moins dispendieux qu'ils pourraient prescrire pour ces patients. On voudrait aussi encourager, par ce projet de loi, les patients à en parler aux médecins.

M. Robinson: Dans les propositions, il y a rien qui exige que la profession médicale prescrive des médicaments portant un nom générique plutôt qu'une marque de commerce.

M. Basford: Non. Je ne vois rien qui puisse me convaincre qu'il y a lieu de le faire. Je pense que, comme législateurs, nous ne devrions pas intervenir ainsi dans la pratique de la médecine.

M. Robinson: Alors ça ne serait pas plutôt une question de conscience, pour le médecin de prescrire l'un plutôt que l'autre?

M. Basford: C'est une question qui intéresse le médecin. Je ne sais pas si c'est un cas de conscience ou non.

M. Robinson: Mais remarquez que le médicament qui porte une marque de commerce ou un nom générique va avoir exactement le même résultat. Alors sur quoi se posera-t-il pour recommander l'un plutôt que l'autre sinon le prix?

M. Basford: Il le ferait parce qu'il connaît mieux celui qui porte la marque de commerce, je suppose, ou parce qu'on l'a convaincu qu'il pouvait se fier à ce médicament.

M. Robinson: Je peux donc dire que...

M. Basford: Ce qui s'ajoute à cette méfiance à l'égard des produits qui portent un nom générique, que ceux qui désirent faire baisser les prix doivent surmonter.

M. Robinson: Alors je propose qu'en plus du projet de loi, on ait ce bulletin qui encouragerait les médecins à utiliser les produits portant un nom générique plutôt qu'une marque de commerce.

M. Basford: Oui, je vais demander à mon collègue, M. Chapman, de vous expliquer un peu mieux ce bulletin.

M. Chapman: Merci, monsieur le ministre. Monsieur le président, à la page 17 du rapport de la Commission Harley on trouve une

[Text]

proposed information bulletin to physicians, pharmacists and dentists. It states:

The Committee realizes that to ask the doctor to change his prescription habit is a serious responsibility. It should be done only if the doctor can be assured that the drugs he has the option of prescribing are as safe as possible. To do this the doctors should and, indeed, must have free access to a non-biased current report on drugs which would include the following data:

The Committee then lists the information they feel should be included in that information bulletin, and this is the proposal we plan to implement. We now have the resources assigned to us to carry out this project.

Mr. Robinson: Dr. Chapman, how long do you feel it will be necessary for these proposals in Bill C-102 to be in effect before we receive some indication as to how the medical profession is responding to the suggestions that will be put forth in the bulletin?

The Chairman: Mr. Robinson, I think I have been very lenient, because I presume that some of the brand names also have a trademark, but again we are getting far off the subject if you are going to continue for any length of time.

Mr. Robinson: I am virtually finished, and I do not feel that I was taking any more latitude than some of the other members who have already spoken. As a matter of fact, I thought I was sticking closer to the point than many of them.

The Chairman: You were, but I was not in the Chair at the previous meeting. Go ahead, but you only have a few minutes because it is getting beyond 1 o'clock.

Mr. Robinson: I will be satisfied if I get the answer to this question.

The Chairman: All right.

Dr. Chapman: Mr. Chairman, it is just not possible for me to make any predictions in regard to the length of time that it might take to bring about a change in the present practice.

Mr. Robinson: Supplementary to that, will you be informing the Minister as to how the

[Interpretation]

discussion sur ce bulletin d'information que l'on se proposait d'envoyer aux médecins, aux pharmaciens et aux dentistes, et je cite:

Le Comité reconnaît que c'est une grave responsabilité de changer ses habitudes au point de vue ordonnances. Le changement ne devrait se faire que dans le cas où le médecin possède l'assurance que les drogues qu'il aurait le choix de prescrire offrent toutes les garanties de sûreté possibles. Pour ce, le médecin devrait, ou plutôt doit avoir libre accès à un rapport d'actualité objectif sur les médicaments, rapport qui contiendrait les informations ci-après détaillées:

Et le Comité mentionne ensuite les renseignements qu'il jugerait utile de communiquer dans ce bulletin, et c'est exactement ce que nous voulons faire. Nous avons maintenant les ressources nécessaires pour réaliser ce projet.

M. Robinson: M. Chapman, combien de temps faudra-t-il pour que les propositions du Bill C-102 soient mises en œuvre avant qu'on connaisse la réaction de la profession médicale aux suggestions émises dans le bulletin?

Le président: Avant d'aller plus loin, monsieur Robinson, je vous ai laissé poursuivre en pensant que certains produits d'appellation portent aussi une marque de commerce, mais on s'éloigne du sujet. Si vous alliez continuer plus longtemps...

M. Robinson: Mais j'ai presque terminé. Il ne m'a pas semblé que je prenais plus de latitude que les autres députés qui ont pris la parole avant moi. En fait, je pensais que je m'en tenais plus au sujet.

Le président: Oui, mais il se trouve que je n'ai pas présidé la dernière séance. Je vous accorde seulement quelques minutes parce qu'il est presque 1 heure.

M. Robinson: Je désire simplement la réponse à ma question.

Le président: Très bien.

M. Chapman: C'est impossible de faire la moindre prédiction, monsieur le président, quant au temps qu'il faudra pour modifier la pratique actuelle.

M. Robinson: Une question supplémentaire. Est-ce que vous allez informer le ministre sur

[Texte]

bulletin is working out with this kind of program?

Dr. Chapman: Certainly I will be informing my Minister.

The Chairman: Thank you. I have two names on my list for the next meeting, Mr. Yewchuk and Mr. Watson. I will give that list to the Chair. We will meet again on Thursday at 11 o'clock. As it is now well after 1 o'clock, do I hear a motion to adjourn?

Some hon. Members: Agreed.

The Chairman: The meeting is adjourned until Thursday at 11 o'clock.

[Interprétation]

les résultats du bulletin dans ce genre de programme?

M. Chapman: Je vais certainement le communiquer au ministre.

Le président: Merci. Nous avons deux noms en liste pour la prochaine séance, MM. Yewchuk et Watson. Je communiquerai cette liste au président. Comme il est bien passé 1 heure, est-ce qu'on propose l'ajournement?

Des voix: D'accord.

Le président: La séance est levée jusqu'à jeudi à 11 heures de l'avant-midi.

OFFICIAL BILINGUAL ISSUE

FASCICULE BILINGUE OFFICIEL

HOUSE OF COMMONS

CHAMBRE DES COMMUNES

First Session

Première session de la

Twenty-eighth Parliament, 1968-69

vingt-huitième législature, 1968-1969

STANDING COMMITTEE

COMITÉ PERMANENT

ON

DE LA

HEALTH, WELFARE AND
SOCIAL AFFAIRS

SANTÉ, DU BIEN-ÊTRE SOCIAL
ET DES AFFAIRES SOCIALES

Chairman

M. Gaston Isabelle

Président

MINUTES OF PROCEEDINGS
AND EVIDENCE

PROCÈS-VERBAUX ET
TÉMOIGNAGES

No. 14

THURSDAY, FEBRUARY 6, 1969

LE JEUDI 6 FÉVRIER 1969

Respecting

Concernant

BILL C-102,

Le BILL C-102,

An Act to amend the Patent Act, the Trade
Marks Act and the Food and Drugs Act.

Loi modifiant la Loi sur les brevets, la Loi
sur les marques de commerce et la Loi
des aliments et drogues.

Appearing:

Ont comparu:

Minister of Consumer and
Corporate Affairs

Hon. Stanley Ronald Basford

Ministre de la Consommation
et des Corporations

Parliamentary Counsel

M. Maurice Ollivier, c.r.

Conseiller parlementaire

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WITNESSES—TÉMOINS

MAR 10 1969

(See Minutes of Proceedings)

(Voir Procès-verbaux)

THE QUEEN'S PRINTER, OTTAWA, 1969
L'IMPRIMEUR DE LA REINE, OTTAWA, 1969

STANDING COMMITTEE ON
HEALTH, WELFARE AND
SOCIAL AFFAIRS

Chairman
Vice-Chairman
and Messrs.

Allmand,
Boulanger,
Forget,
Fortin,
Gendron,
Godin,

M. Gaston Isabelle
Mr. Steve Otto

Haidasz,
Howe,
Mrs. MacInnis (M^{me}),
McBride,
Monteith,
Ritchie,

(Quorum 11)

La secrétaire du Comité:
Gabrielle Savard
Clerk of the Committee.

COMITÉ PERMANENT DE
LA SANTÉ, DU BIEN-ÊTRE SOCIAL
ET DES AFFAIRES SOCIALES

Président
Vice-président
et Messieurs

Robinson,
¹ Rochon,
Rynard,
Saltsman,
Thomas (*Maisonneuve*),
Yewchuk—20.

Pursuant to S.O. 65(4)(b)

¹ Replaced Mr. Guilbault on February 4. Règlement

Conformément à l'article 65(4)b) d

¹ Remplace M. Guilbault le 4 février.

(Text)

MINUTES OF PROCEEDINGS

TUESDAY, February 6, 1969.

(17)

The Standing Committee on Health, Welfare and Social Affairs met this day at 11.20 o'clock a.m., the Chairman, Mr. Gaston Isabelle, presiding.

Members present: Mrs. MacInnis, and Messrs. Boulanger, Forget, Gendron, Haidasz, Howe, Isabelle, McBride, Monteith, Otto, Ritchie, Robinson, Rochon, Rynard, Saltzman, Thomas (*Maisonneuve*), Yewchuk—(17).

Other Members present: Messrs. Émard, Foster, Rock and Watson.

Appearing: The Hon. Stanley Ronald Basford, Minister of Consumer and Corporate Affairs; Mr. Maurice Ollivier, Q.C., Parliamentary Counsel.

Witnesses: Mr. D. H. W. Henry, Q.C., Director of Investigation and Research, Combines Investigation Act, Department of Consumer and Corporate Affairs; Dr. R. A. Chapman, Director General, Food and Drug Directorate, Department of National Health and Welfare.

The Committee resumed consideration of Bill C-102, An Act to amend the Patent Act, the Trade Marks Act and the Food and Drugs Act.

Dr. Chapman supplied information asked for by Dr. Rynard at a previous meeting and tabled "Canada's Health and Welfare", of January 1968 (vol. 23, no. 1).

The Chairman informed the Committee that he had contacted the Chairman of the Economic Council of Canada, and read the letter received from the Secretary of the Council. He also informed the Committee of his subsequent attempts to have an economist appear and answer the Members' questions. He read the reply received

(Texte)

PROCÈS-VERBAUX

Le JEUDI 6 février 1969

(17)

Le Comité permanent de la Santé, du Bien-être social et des Affaires sociales se réunit aujourd'hui à 11 h. 20 de l'avant-midi sous la présidence de M. Gaston Isabelle.

Présents: Mme MacInnis et MM. Boulanger, Forget, Gendron, Haidasz, Howe, Isabelle, McBride, Monteith, Otto, Ritchie, Robinson, Rochon, Rynard, Saltzman, Thomas (*Maisonneuve*), Yewchuk (17).

Autres députés présents: MM. Émard, Foster, Rock et Watson.

Ont comparu: L'hon. Stanley Ronald Basford, ministre de la Consommation et des Corporations; M. Maurice Ollivier, c.r., conseiller parlementaire.

Témoins: M. D. H. W. Henry, c.r., directeur du Bureau des enquêtes et recherches, Loi relative aux enquêtes sur les coalitions, ministère de la Consommation et des Corporations; D^r R. A. Chapman, directeur général de la Direction des aliments et drogues, ministère de la Santé nationale et du Bien-être social.

Le Comité reprend l'étude du Bill C-102, Loi modifiant la Loi sur les brevets, la Loi sur les marques de commerce et la Loi des aliments et drogues.

Le D^r Chapman fournit au D^r Rynard les renseignements demandés à une réunion précédente et dépose «Canada's Health and Welfare» du mois de janvier 1968 (vol. 23, n° 1).

Le Président informe le Comité qu'il s'est mis en communication avec le Président du Conseil Économique du Canada et lit la lettre qu'il a reçue du Secrétaire du Conseil. Il met aussi le Comité au courant des autres démarches qu'il a faites pour qu'un économiste vienne devant le Comité répondre aux questions des députés. Il lit

from the General Director of the Chemicals Branch of the Department of Industry.

The Chairman also informed the Committee that the Subcommittee would meet again soon to discuss further the question of prospective witnesses.

On clause 3

The Minister, Mr. Henry and Dr. Chapman answered questions of the Members.

Clause 3 carried.

Clause 4 carried.

On clause 5

Mrs. MacInnis moved that Subsection (1a) be amended by adding thereto, immediately after paragraph (b), the following paragraph:

"(c) The regulation of drug manufacturing, importing and distribution so that only drugs having a generic name be allowed to be sold in Canada,".

The Chairman ruled the amendment out of order (B. 4th, 402).

Clause 5 was allowed to stand.

At 12.40 o'clock p.m. the Committee adjourned to 3.30 o'clock p.m. this afternoon to consider the subject-matter of Bills on tobacco and cigarette smoking.

la lettre reçue du Directeur général de la direction des produits chimiques au ministère de l'Industrie.

Le Président annonce également que le Sous-comité se réunira de nouveau pour discuter de la question des témoins.

A l'article 3

Le Ministre, M. Henry et le D^r Chapman répondent aux questions des députés.

L'article 3 est adopté.

L'article 4 est adopté.

A l'article 5

Mme MacInnis propose que le paragraphe 1a) soit modifié en y ajoutant, après l'alinéa b) l'alinéa suivant:

«c) La réglementation relative à la fabrication des médicaments, leur importation et leur distribution, de telle sorte que seuls les médicaments désignés sous leur nom générique puissent être vendus au Canada,»

Le Président déclare l'amendement irrecevable. (B 4^e, 402)

L'article 5 est réservé.

A 12 h. 40 de l'après-midi, le Comité s'ajourne à 3 h. 30 ce jour pour continuer l'étude de la question de fond des bills traitant du tabac et de la cigarette.

*La secrétaire du Comité,
Gabrielle Savard
Clerk of the Committee.*

[Texte]

EVIDENCE

(Recorded by Electronic Apparatus)

Thursday, February 6, 1969.

• 1118

The Chairman: Gentlemen, as I see a quorum I now declare this meeting open.

We will now resume consideration of Clause 3 of Bill C-102, An Act to amend the Patent Act, the Trade Marks Act and the Food and Drugs Act.

Before we do proceed, Dr. Chapman, is there any . . .

M. Émard: Monsieur le président, avant de procéder, pourriez-vous nous dire où en sont rendues vos démarches en vue de faire comparaître certaines gens comme témoins? Deuxièmement, pourriez-vous intervenir pour que nous recevions les rapports des comités? Il est très important pour nous d'avoir les rapports des comités, avant que le Comité ait fini de siéger.

Le président: Oui, monsieur Émard, merci. Je donnerai ce compte rendu après que le docteur Chapman aura fait sa déposition en réponse au docteur Rynard. Quant à votre deuxième question, on y donnera sûrement suite; par exemple, nous avons reçu, hier, une partie du fascicule bilingue officiel, que vous avez certainement entre les mains. Et, j'espère qu'on pourra aller plus loin en avant. Celui-là est du mardi 28 janvier, et l'autre est rendu à l'imprimerie. Alors, tout est fait pour que les rapports nous parviennent le mieux possible.

Monsieur Chapman?

• 1119

Dr. R. A. Chapman (Director General, Food and Drug Directorate, Department of National Health and Welfare): Mr. Chairman, I just wish to refer to an article that Dr. Rynard requested to have tabled before the Committee. This was an article entitled *Measuring Medication Costs* which was published in the January, 1968 issue of *Canada's Health and Welfare*.

This is an article indicating that the consumer price index for prescriptions in the year 1949 on which these prices are based

[Interprétation]

TÉMOIGNAGES

[Enregistrement électronique]

Le jeudi 6 février 1969

Le président: Messieurs, nous avons un quorum. La séance est ouverte. Nous reprenons l'étude de l'article 3 du Bill C-102, Loi modifiant la Loi sur les brevets, la Loi sur les marques de commerce et la Loi des aliments et drogues.

Monsieur Chapman, auriez-vous quelque chose à nous dire?

Mr. Émard: Mr. Chairman, before proceeding could you tell us what progress you have made with a view to calling certain persons to appear as witnesses? Secondly, could you do something so that we get the reports of the committees? It is very important for us to have the reports before the Committee is finished with its sittings.

The Chairman: Yes, Mr. Émard, thank you. I shall give this report after Dr. Chapman has made his statement in reply to Dr. Rynard. With regard to your second question, the matter will certainly be looked into. For instance, yesterday we received a part of the official bilingual minutes of which you certainly have a copy. And I hope that we will be able to go further. That copy is from Tuesday, January 28. The other one is at the printers'.

Everything is done so that reports will reach us as best possible. Mr. Chapman?

M. R. A. Chapman (Directeur général, Direction des aliments et drogues, ministère de la Santé nationale et du Bien-être social): Monsieur le président, je voudrais simplement vous rapporter un article que le docteur Rynard a demandé que l'on dépose devant le Comité, intitulé: *Évaluation des coûts des médicaments*, publié en janvier 1968 dans le *Canada's Health and Welfare*.

Cet article indique que l'index des prix aux consommateurs, pour les ordonnances, en 1949, année sur laquelle ces prix sont fondés,

[Text]

was, of course, 100 and in 1966 it is 100.4, practically no change. However, I should like to indicate that this consumer price index is based on the price of selected drugs used in 1949.

• 1120

Now, the drugs on the market in 1949 represented the standard of health care of that period and the prices of these drugs have changed only slightly as shown by the consumer price index. Changes have occurred, however, in the drugs actually prescribed by physicians and this same article indicates that the average price of a prescription has increased from \$1.82 in the year 1952 to \$3.31 in the year 1964. Furthermore, the family expenditures on prescription drugs have increased from \$23.60 in 1955 to \$39 in 1964. Mr. Chairman, I am pleased to table this article.

Mr. Rynard: Mr. Chairman, there is just one remark I want to make. Dr. Chapman, you will agree that this covers the age of the antibiotics and the many new drugs that have come in, but on the old basis there has been very little change if you leave these out.

Dr. Chapman: This is quite correct, Dr. Rynard. Based on the drugs that were used in 1949, which represented the standard of health care of that period, there has been very little change.

Mr. Rynard: Thank you, very much.

The Chairman: Do you want to ask one question?

Mr. Rock: Are the prices you just mentioned the cost at the retail level, or are they the prices the pharmaceutical industry sets for the druggist?

Dr. Chapman: No, these are the prices at the retail level.

Mr. Rock: At the retail level?

Dr. Chapman: These are the average prices of a prescription, which would be to the public.

Mr. Rock: Have you any figures to show the manufacturer's price in those two years also? If so we will know exactly where the rise actually was. Was it at the manufacturing as well as the retail level or was it, possibly, the same on manufacturing but the retail level just went up sky-high during that period? Could you find this out?

[Interpretation]

était de 100, et en 1966, de 100.4. Il n'y a presque pas de changement.

Seulement, je voudrais vous faire remarquer que cet index des prix aux consommateurs est fondé sur le prix des médicaments sélectionnés et utilisés en 1949.

Les médicaments qui étaient sur le marché en 1949 représentaient la norme de soins de cette année-là. Le prix de ces médicaments n'a que très peu changé, comme l'indique l'index des prix aux consommateurs. Des changements se sont produits, cependant, dans les médicaments prescrits par les médecins. Et, ce même article laisse entendre que le prix moyen d'une ordonnance a augmenté de \$1.82 en 1952 jusqu'à \$3.31 en 1964. De plus, les dépenses des familles pour les médicaments d'ordonnance ont augmenté de \$23.60 en 1955 à \$39 en 1964.

Monsieur le président, j'ai le plaisir de déposer ce document.

M. Rynard: Une observation seulement sur ce qu'a dit le docteur Chapman. Cela couvre la période où les antibiotiques et les nouveaux médicaments ont été mis sur le marché. Mais, pour les anciens médicaments, il n'y a pas beaucoup de changement.

M. Chapman: Vous avez tout à fait raison, docteur Rynard, en nous reportant aux médicaments utilisés en 1949, qui représentaient la norme de soins de santé à ce moment-là, il n'y a pas eu beaucoup de changement.

M. Rynard: Merci beaucoup.

Le président: Voulez-vous poser une question?

M. Rock: Les prix que vous venez de mentionner, sont-ce là les prix au détail ou ceux auxquels le fabricant vend ses produits au pharmacien?

M. Chapman: Non, c'est le prix de détail.

M. Rock: Le prix de détail.

M. Chapman: C'est le prix moyen d'une ordonnance au consommateur.

M. Rock: Est-ce que vous avez des chiffres concernant les prix du fabricant pour ces années-là? Si oui, nous verrions où l'augmentation s'est produite. Est-ce au niveau du fabricant ou au niveau du détaillant ou si, le fabricant ayant maintenu le même prix, c'est le prix au détail qui a monté en flèche?

[Texte]

Dr. Chapman: I am sorry, sir...

Mr. Rock: Is there a way of finding this out later on? I do not mean immediately. I think it would be interesting for the Committee, Mr. Chairman, to know whether there has been a high increase at the retail level, which would mean that the pharmacists are actually taking a greater profit than they did in the past; was it the...

The Chairman: Thank you, Mr. Rock, for your comment. Before we proceed any further with Bill C-102, I would like to point out that we had a steering committee meeting this morning. It lasted a bit longer than we expected, but nevertheless we had a fruitful discussion. As you will recall, as directed by the subcommittee and as approved by your Committee, I have contacted the Chairman of the Economic Council of Canada regarding his availability to answer questions of an economic nature.

I have received a letter from the Economic Council of Canada that is lengthy, but it reads in part:

The Council, therefore, not wishing to duplicate the research being undertaken by the government in this area, focused attention on the more general questions of the economic effects of the patent, copyright and trade mark system on the Canadian economy as a whole. It is therefore unlikely that the Council will have specific advice to offer with reference to the application of the patent, copyright and trade mark law to the drug industry *per se*.

Indeed, if the Chairman were called at this time,...

It is only the end of the letter but I think you will understand.

• 1125

Indeed, if the Chairman were called at this time, he could provide very little information that would be pertinent to the needs of this Committee and might, in the process of taking a public position on the matters before the Committee, jeopardize the capacity of the Council to offer the government general policy advice under Section (c) of the Reference.

Section (c) is patents, trade marks, copyrights and registered industrial designs.

[Interprétation]

M. Chapman: Je regrette, monsieur...

M. Rock: Vous est-il possible de nous renseigner à ce sujet plus tard? Je ne veux pas dire tout de suite, mais pouvez-vous le faire? Je pense que c'est un point qui intéresserait le Comité, de savoir s'il y a eu une augmentation importante dans le prix de détail; si tel est le cas, cela voudrait dire que les pharmaciens prennent un profit plus considérable que dans le passé.

Le président: Merci, monsieur Rock.

Avant d'aller plus loin sur le Bill C-102, j'aimerais vous faire remarquer que nous avons tenu une réunion du comité directeur, ce matin, qui a été plus longue que n'avions anticipé, mais nous avons eu des discussions fructueuses. Par suite d'une décision prise par le sous-comité, et qui a été approuvée par votre Comité lors de sa dernière réunion, j'ai communiqué avec le président du Conseil économique du Canada, afin de savoir s'il serait prêt à répondre à des questions d'ordre économique.

J'ai reçu une lettre du Conseil économique du Canada; elle est plutôt longue, mais je vais la résumer. On y dit:

Par conséquent, le Conseil ne voulant pas répéter les recherches entreprises par le gouvernement dans ce domaine, concentre son attention sur les questions plus générales ayant trait aux effets économiques du système de brevets, de droits d'auteurs et de marques de commerce sur l'économie canadienne dans son entier. Il est donc peu probable que le Conseil aura des directions précises à donner au sujet de l'application de la loi sur les brevets, droits d'auteurs et les marques de commerce *per se*.

De fait, si le président était convoqué à ce moment-ci...

Ce n'est que la fin de la lettre, mais je crois que vous comprendrez.

De fait, si le président était appelé à ce moment-là, il ne pourrait vous donner que peu de renseignements qui se rapporteraient aux besoins de ce Comité et, en prenant position publiquement sur les questions qui concernent le Comité, il pourrait mettre en danger la capacité du Conseil d'offrir, au gouvernement, des conseils sur la politique générale, en vertu de l'article (c) du Mandat.

L'article (c) traite des brevets, marques de commerce, droits d'auteurs et de projets industriels enregistrés.

[Text]

In addition, the Chairman has no specialized knowledge about the economics of the drug industry. If your Committee is seeking the professional views of an economist knowledgeable in this area, you might wish to consider approaching Dr. O. J. Firestone of the University of Ottawa who has done work for the Hall Royal Commission and is very knowledgeable about the Canadian Patent System and, I am sure, would welcome an opportunity to put his knowledge at the service of your Committee.

Now, as a result of this advice, I called Dr. Firestone. Dr. Firestone's reply was that it is impossible for him to answer questions which would be of such a specialized nature. He said he would have to go through all the reports already presented before being able to give any opinion. He suggested that I call an economist of the Department of Industry, Trade and Commerce.

So I contacted the Department of Trade and Commerce.

Mr. Rock: This is typical federal business here, I tell you.

The Chairman: Do not forget that this has been going on for 10 years. The Department of Industry phoned me and gave me an answer along the same line. Now, unfortunately I did not read the letter to the steering committee because I have just received it from the Department of Industry. I have not read it myself yet, but if you want me to read it to you I will do so.

Dear Dr.

—never mind the name—

Mr. Haidasz: Dear Gaston?

The Chairman: No, it is Isabelle.

During the past year and a half, this Department has given careful and continuous attention to the proposal to amend the Patent and Trade Marks Acts.

The pharmaceutical industry, in our view, is comprised of two sectors. The first consists of the fifty or so large firms, most of which are international in their operations, and which, together, account for about 85 per cent of the pharmaceutical industry output. The second consists of about 120 smaller firms, most of which have domestic operations only.

The first sector would have a number of options open to it as a result of passage of Bill C-102. These firms will, for some time we expect, assess the potential impact of the Bill. Then, depending upon

[Interpretation]

De plus, le président n'a aucun renseignement précis sur le côté économique de l'industrie des médicaments. Si votre Comité cherche à obtenir des conseils professionnels d'un économiste qui s'y connaît en la matière, vous pourriez vous mettre en rapport avec le docteur O. J. Firestone, de l'Université d'Ottawa, qui a fait pas mal de travail pour la Commission Hall à ce sujet et qui est au courant du Système des brevets canadien. Il serait heureux de vous aider.

J'ai invité le docteur Firestone à venir comparaître ici et lui nous a dit qu'il lui était impossible de répondre à des questions sur un sujet aussi spécialisé. «Il me faudrait, dit-il, étudier tous les rapports qui ont été présentés avant de pouvoir exprimer une opinion.» Il suggère de nous adresser au ministère de l'Industrie et du Commerce pour obtenir les services d'un spécialiste, ce que j'ai fait.

M. Rock: C'est un exemple typique du fonctionnarisme fédéral.

Le président: N'oubliez pas que ceci se passe depuis 10 ans. Le ministère de l'Industrie et du Commerce m'a téléphoné et m'a donné une réponse à peu près semblable. Je n'ai pas, cependant, lu la lettre au Comité directeur parce que je viens de la recevoir du ministère de l'Industrie et du Commerce. Je ne l'ai pas lue moi-même, si vous voulez que je le fasse, à vous de le dire.

Cher docteur . . .

Oublions le nom.

M. Haidasz: Cher Gaston?

Le président: Non, c'est «Isabelle».

Depuis un an et demi, le ministère étudie constamment les propositions faites pour modifier la *Loi sur les brevets et les marques de commerce* . . .

Il y a deux secteurs. Le premier comprend les 50 grandes sociétés, la plupart internationales et qui, ensemble, accaparent à peu près 85 p. 100 de la production de l'industrie pharmaceutique. Le deuxième est composé d'environ 120 compagnies de moindre importance, dont la plupart n'exercent leurs activités que sur le marché national.

Les sociétés appartenant au premier secteur auront devant elles plusieurs choix comme résultat de l'adoption du Bill C-102. Elles évaluent, pendant un certain temps, l'effet éventuel de ce Bill

[Texte]

its potential effectiveness, they have a number of choices ranging from continued expansion of their operations in Canada to retrenchment in this country. If they do decide to expand their Canadian operations, a number of marketing strategies are again available. These include use of the provisions of Bill C-102 themselves, engaging in price competition, or increasing their non-price competitive activities.

We doubt that all companies will assess the potential impact of Bill C-102 in a similar manner. As a result, company reaction will probably be varied and will probably consist of a combination of the options I have outlined. The future of this sector of the pharmaceutical industry therefore depends upon the reaction and interaction of a number of firms and their various marketing strategies. As a result, we concluded that we could not make a valid appraisal of the impact of Bill C-102 on this sector of the industry.

The second section of the pharmaceutical industry, consisting of the smaller firms, are, we believe, given additional opportunity because of Bill C-102 since they will have greater access to the essential therapeutic components which will enable them to market a greater range of drugs.

Again, it is difficult to assess the extent to which their operations are likely to expand. In the first instance, this depends upon the initiative they show. Then, if they are successful, their continued success depends upon the nature and effectiveness of the strategy adopted by the major firms.

The letter is signed by Mr. J. J. Tennier, General Director, Chemicals Branch.

Now, before we go any further, may I say that we came to the conclusion this morning at the steering committee that we will have another steering committee on the same matter. So we did not have anything to recommend this morning. We have already written to Dr. Pernarowski and Dr. Darrach from Vancouver. We asked them to answer us back by wire. They did not do so yet. We are waiting.

• 1130

Mr. Emard: Who are these witnesses?

The Chairman: Doctors Pernarowski, Darrach, and Ford.

[Interprétation]

après quoi, elles pourront, soit étendre leurs opérations au Canada ou fermer leurs portes. Si elles décident d'étendre leurs opérations au Canada, elles ont un certain nombre de moyens stratégiques à prendre. En se prévalant des dispositions du Bill C-102, elles peuvent s'engager dans la concurrence des prix ou augmenter leurs autres activités concurrentielles.

Nous doutons que toutes les compagnies pourront évaluer les conséquences du Bill C-102 de la même façon. A la suite de cela, la réaction sera variée et consistera d'une combinaison des choix que je viens d'expliquer. Par conséquent, tout dépend de la réaction et de l'interaction d'un certain nombre de sociétés et de leur stratégie au point de vue du marché. Par conséquent, notre conclusion c'est que nous ne pouvons pas faire une évaluation utile des conséquences de ce bill.

Le deuxième secteur de l'industrie pharmaceutique, qui est composé de petites sociétés aura une occasion additionnelle de mettre sur le marché un plus grand nombre de drogues par le fait que le Bill C-102 leur permettra d'avoir accès aux préparations thérapeutiques essentielles.

On peut difficilement prévoir l'expansion que prendront leurs opérations. D'abord, tout dépend de leur esprit d'initiative. Et s'ils réussissent, la continuité de leurs succès dépend de la ligne de conduite suivie par les grandes compagnies.

La lettre est signée par M. J. J. Tennier, Directeur Général, Division des produits chimiques.

Avant de continuer, je dois vous dire que ce matin, le comité directeur a décidé de tenir une nouvelle réunion à ce sujet. Et par conséquent, nous n'avons pas de recommandation à vous faire ce matin. Nous avons déjà écrit au docteur Pernarowski et au docteur Darrach de Vancouver. Nous leur avons demandé de nous répondre par télégramme, mais nous attendons toujours la réponse.

M. Émard: Qui sont ces témoins?

Le président: Les docteurs Pernarowski,

[Text]

We do not have any recommendations or suggestions to make to you. We are going to have another steering committee as soon as possible, I hope within the next 96 hours. We have nothing to report for the moment.

Before we proceed, when we adjourned last Tuesday, there were two names left on the list, Dr. Yewchuck and Mr. Watson.

An hon. Member: On Clause 3?

The Chairman: On Clause 3, of course. And before I ask these gentlemen to answer questions, I would like to remind you that from now on I will give priority to members of this Committee because they are the ones who have been delegated by the proper authorities to ask questions. This does not deny the right to those who are not on the Committee to ask questions, but the Chair will not as lenient as it has been since the beginning of the Health, Welfare and Social Affairs Committee on this particular matter. So if you ask questions, I will limit you, and now I will ask Dr. Yewchuk . . . Mr. Rock, on a point of order?

Mr. Rock: It is just the fact that I do not have intentions of asking any questions during the procedure while you are going clause by clause, and I said this in fact in the past that what I was interested in was to ask witnesses questions, witnesses that I asked to appear, which more or less I was denied. You have this letter, Mr. Chairman, from this one fellow from the Department of Industry. Would your steering committee study the possibility of asking him to appear, because of the statement he made?

The Chairman: As I have said, we have no suggestions to make to you right now.

Mr. Rock: What I am asking is to study the possibility of having the man who signed that letter to appear because he made some interesting statements about which I think questions could be asked.

The Chairman: We will do it. Mr. Emard, on a point of order?

Mr. Emard: On a point of order, sir. I would like to make just a small comment on what has been said by you, Mr. Chairman, on witnesses. According to the issue of the *Times* of January 31, there were about 784 witnesses that were very pleased and requested to come here over the last five or six years to give all kinds of information to this Committee. Now, I am going to keep my remarks very short. I do not like to impute motives to anybody, but I find it very queer that all of a sudden, all

[Interpretation]

Darrach et Ford. Ce sont des médecins. Nous n'avons pas de recommandation à faire ni de suggestion à vous offrir. Nous allons tenir une autre réunion du comité directeur aussitôt que possible, j'espère d'ici quelque 96 heures. Mais nous n'avons pas de rapport à vous faire pour le moment.

Lorsque nous avons levé la séance mardi dernier, il nous restait deux interventions à entendre, le docteur Yewchuk et M. Watson.

Une voix: Au sujet de l'article 3?

Le président: Avant qu'ils posent des questions, j'aimerais vous signaler qu'à l'avenir j'accorderai la priorité aux membres du Comité parce qu'ils ont été délégués par les autorités intéressées, pour poser des questions. Cela ne nie pas à ceux qui ne font pas partie du Comité le droit de poser des questions. Mais le président ne sera pas aussi indulgent qu'il l'a été depuis le commencement des séances du comité de la Santé, du Bien-être social et des Affaires sociales sur ce sujet. Ainsi, si vous posez des questions, je vais poser une limite. Et maintenant, docteur Yewchuk . . . Monsieur Rock?

M. Rock: Monsieur le président, je ne compte pas poser de questions alors que vous étudierez le bill article par article. Ce qui m'intéresse c'est de poser des questions aux témoins que j'ai fait comparaître. Vous avez cette lettre de ce monsieur du ministère de l'Industrie et du Commerce. Votre comité directeur pourrait-il étudier la possibilité de lui demander de venir témoigner au sujet des déclarations qu'il a faites?

Le président: Nous n'avons pas de suggestion à faire maintenant.

M. Rock: Je vous demande simplement d'étudier la question, de faire témoigner celui qui a signé cette lettre, car certaines de ses déclarations méritent d'être étudiées avec lui.

Le président: D'accord. Monsieur Émard?

M. Émard: J'en appelle au Règlement. Je tiens à faire une petite observation sur ce que vous avez dit, monsieur le président, au sujet des témoins. D'après l'édition du *Times* du 31 janvier, il y aurait environ 784 témoins qui sont venus témoigner au cours des 5 ou 6 dernières années pour donner toutes sortes de renseignements à ce comité. Je n'aime pas prêter des motifs ou des arrière-pensées à qui que ce soit, mais il me semble très étrange que tout d'un coup tous les experts gouverne-

(Texte)

our experts from the government are finding some excuses not to appear on this Committee. Now, that is all I have to say at present.

The Chairman: Thank you Mr. Emard. Dr. Yewchuk. On Clause 3.

Mr. Yewchuk: I just want to pause for a minute in case somebody else has some remarks to make. I will give them a chance to do so. I just wanted to review briefly...

The Chairman: Is that a speech you want to make? We are on Clause 3, Doctor.

Mr. Yewchuk: Yes, I know. If you will just hold on a minute you will see what I wanted to say, whether it is a speech or a question.

As I understand it, companies which are not in Canada but are subsidiaries of companies in Canada, or are controlling companies in Canada will be allowed to import drugs using the same trade name as is some foreign country, here in this country.

Mr. Basford: I think they can now.

Mr. Yewchuk: Using the same trade name now?

Mr. Basford: Well, I mean Hoffmann-La Roche Ltd., Canada can import Hoffmann-La Roche Ltd., U.S. if it wants to. I do not know about Hoffmann-La Roche, but a great many related companies are importing trademarked drugs from other countries now.

Mr. Yewchuk: I am just trying to establish exactly what the difference will be with this change from what we have now.

• 1135

Mr. Basford: With regard to Clause 3.

Mr. Yewchuk: Yes.

Mr. Basford: Clause 3 would allow some other Canadian importers to import the trademarked drugs of the related company from abroad.

Mr. Yewchuk: I see. Does this restrict another company importing a drug by a similar name produced by a nonrelated company? Calling it a Hoffmann-La Roche name, though?

Mr. Basford: Oh, no. That is prohibited.

Mr. Yewchuk: It cannot do that.

Mr. Basford: That would be an infringement.

[Interprétation]

mentaux trouvent toutes sortes d'excuses pour ne pas venir témoigner devant le Comité. C'est tout ce que j'ai à dire, monsieur le président.

Le président: Merci, monsieur Émard. Docteur Yewchuk, au sujet de l'article 3.

M. Yewchuk: Je faisais une pose au cas où quelqu'un d'autre aurait quelques brèves observations à faire, du genre de celle que nous venons d'entendre. Je voulais simplement...

Le président: Est-ce un discours que vous voulez faire? Nous en sommes à l'article 3.

M. Yewchuk: Si vous me donnez la chance de continuer, vous verrez ce que j'ai à dire. Si j'ai bien compris, des compagnies qui ne sont pas établies au Canada mais qui sont des filiales de compagnies établies au Canada ou qui contrôlent des compagnies canadiennes, pourront importer des produits pharmaceutiques en utilisant la même marque de commerce que pour les drogues fabriquées en pays étranger.

M. Basford: Elles peuvent le faire à l'heure actuelle.

M. Yewchuk: En utilisant la même marque de commerce?

M. Basford: Bon nombre de produits pharmaceutiques sont importés d'autres pays à l'heure actuelle. Ce sont des compagnies connexes qui utilisent la même marque de commerce.

M. Yewchuk: J'essaie simplement d'établir quelle différence existera par suite de ce changement.

M. Basford: Relativement à l'article 3.

M. Yewchuk: Oui.

M. Basford: L'article 3 permettra à d'autres compagnies canadiennes d'importer de compagnies étrangères connexes, des médicaments portant la même marque de commerce.

M. Yewchuk: Est-ce que cela restreint le fait qu'une autre compagnie pourrait importer des drogues ayant le même nom mais fabriquées par une compagnie non connexe, en en changeant le nom?

M. Basford: Cela est interdit. Non.

M. Yewchuk: Cela n'est pas permis.

M. Basford: Ce serait là une infraction.

[Text]

Mr. Yewchuk: What about a foreign company producing a different drug by a similar name that Hoffmann-La Roche calls one of its drugs, for example?

Mr. Basford: Well, if it were trademarked in Canada, say the Hoffmann-La Roche product, they could not import that.

The Chairman: Order please, gentlemen. We cannot hear through the...

Mr. Basford: If some other company in another country were infringing a trademark in that other country, that drug could not be imported into Canada because it would give right cause to infringement in Canada. Also I would point out subsection (2) of this section. Under it, if there should be any case of confusion in the trademark—not an infringement which would be outlawed in any event—any evidence, any indication that the importation may be confusing in so far as trademark is concerned, the Minister of Health and Welfare is specifically authorized to regulate against that.

Mr. Yewchuk: Is it Dr. Chapman who is our...

Mr. Basford: Dr. Chapman. He is—for Mr. Emard's benefit, one of the six government officials who are here this morning.

Mr. Yewchuk: We are happy to see them here. Would you have any information. You mentioned from an article which you quoted that the price of a prescription in 1952 was \$1.82 and in 1964 it was \$3.31. Have you any prediction as to what the price of the prescription will be in 1970 after this law goes into effect for one year?

Dr. R. A. Chapman (Director-General, Food and Drug Directorate): No, sir, I have not.

Mr. Yewchuk: Also I wanted to get more information on what sort of quality control has been exercised until the present, and in what ways these will be changed in the future? What quality controls has the Department of Health and Welfare carried out on imported drugs, specifically until the present time, and how will these be changed to insure that drugs coming in are carefully checked?

Mr. Basford: I wonder if, for Dr. Chapman's benefit, whether you are referring to subsection (2) or not, because this is an issue that Dr. Chapman has previously gone into at a rather considerable length, on other clauses.

[Interpretation]

M. Yewchuk: Que dire d'une compagnie étrangère qui produit un autre médicament, mais ayant un nom semblable à celui d'un médicament fabriqué par une compagnie canadienne, par exemple?

M. Basford: Si cette dernière drogue avait une marque de commerce enregistrée au Canada, on ne pourrait importer l'autre.

Le président: A l'ordre. Nous pouvons vous entendre dans le...

M. Basford: Si une autre compagnie dans un autre pays violait la Loi sur les marques de commerce de ce pays, ses produits pharmaceutiques ne pourraient pas être importés au Canada car cela donnerait lieu à une infraction au Canada. En outre, je tiens à signaler une chose au sujet du paragraphe 2 de cet article. S'il y a confusion, non pas infraction mais confusion ou toute preuve que l'importation peut apporter de la confusion en ce qui concerne la marque de commerce, le ministre de la Santé nationale et du Bien-être social est formellement autorisé à édicter des règlements pour faire cesser cette pratique.

M. Yewchuk: Est-ce le docteur Chapman qui est notre...

M. Basford: Le docteur Chapman, c'est l'un des six fonctionnaires qui sont ici ce matin, pour votre gouverne, monsieur Émard.

M. Yewchuk: Bienvenue, messieurs. Avez-vous des renseignements, vous avez cité un article où vous avez mentionné qu'en 1962, le prix d'une ordonnance était de \$1.82 et de \$3.31 en 1964. Avez-vous une idée du prix de cette ordonnance, en 1970, un an après la promulgation de cette loi?

M. R. A. Chapman (Directeur général, Direction des aliments et drogues): Non, monsieur.

M. Yewchuk: Je voudrais aussi avoir plus de renseignements sur le genre de contrôle de qualité exercé jusqu'ici, et de quelle façon il y aura changement à l'avenir? Quel contrôle de qualité le ministère de la Santé nationale et du Bien-être social exerce-t-il sur les drogues importées, et que sera ce contrôle à l'avenir, pour assurer que les drogues importées sont soigneusement vérifiées?

M. Basford: Pour la gouverne de M. Chapman, je me demande si vous mentionnez le paragraphe 2. Je crois que le docteur Chapman a donné des explications assez approfondies à ce sujet.

[Texte]

Mr. Yewchuk: Do you mean subsection (2) on page 7?

Mr. Basford: Yes.

Mr. Yewchuk: I am sorry, I must not have been here then. When was this done?

Dr. Chapman: The first or second session of the meeting of this Committee.

Mr. Yewchuk: I withdraw the question.

Mr. Watson: Mr. Henry, at the last meeting we were discussing the implications of the Trade Marks section in clause 3. I would like some clarification on this. Is it not correct to assume that the combination of this clause and the compulsory licensing amendments contained in Clause 1 will have the effect of placing subsidiaries of an international company located abroad in the same position competitively as a subsidiary of the same company located in Canada? Would this be the result?

• 1140

Mr. D. H. W. Henry (Director of Investigation and Research, Department of Consumer and Corporate Affairs): Mr. Chairman, I am not quite sure that I understand the question. I could try to answer what I think Mr. Watson means.

The Chairman: Will you rephrase your question?

Mr. Watson: The Trade Marks section allows an importer in Canada to import from a subsidiary of a company which also has a subsidiary in Canada items which possess the same trademark. He can bring them in and sell them in Canada.

Therefore, in effect, the combination of this Trade Marks section and the compulsory licensing section places these foreign subsidiaries in exactly the same position, competitively, on the Canadian market—or almost, the difference being transportation costs and a small tariff. But apart from these two items it eliminates all the other barriers to competition between them.

Mr. Henry: Yes, that is right, but, of course, the existence of those barriers is possibly very important. The tariff barrier, the transportation barrier, and also the possible cost, in the case of finished dosage forms, of having to alter the printing on the packages

[Interprétation]

M. Yewchuk: Vous voulez parler du paragraphe 2, à la page 7?

M. Basford: Oui.

M. Yewchuk: Je m'excuse, je n'étais sans doute pas ici. Quand vous avez donné ces explications.

M. Chapman: A la première séance, je crois.

M. Yewchuk: Je retire ma question.

M. Watson: Au cours de la dernière réunion, nous avons discuté de l'importance de l'article 3 visant les marques de commerce. J'aimerais avoir certaines explications là-dessus. Ne peut-on pas supposer que la combinaison de cet article avec en plus les modifications visant les licences obligatoires intéressant l'article 1 aurait pour effet de classer les filiales d'une compagnie internationale par exemple située à l'étranger dans la même position au point de vue concurrence qu'une filiale de cette même compagnie située au Canada? N'est-ce pas exact de dire que ce serait là la résultante de ces nouvelles dispositions?

M. Henry (Directeur des enquêtes sur les coalitions, ministère de la Consommation et des Corporations): Monsieur le président, je ne suis pas certain d'avoir bien compris la question.

Le président: Pourriez-vous poser de nouveau votre question plus clairement?

M. Watson: L'article sur les marques de commerce permet à un importateur au Canada d'importer, d'une compagnie qui a aussi une filiale au Canada, des articles qui ont la même marque de commerce. Il peut donc les vendre au Canada.

Par conséquent, si on télescope cet article sur les marques de commerce et l'article sur les licences obligatoires, est-ce que cela ne place pas ces filiales étrangères dans la même position exactement au point de vue de la concurrence sur le marché canadien ou presque, la différence étant les frais de transport et le bas tarif. Mais, outre ces deux articles, est-ce que cela n'élimine pas tous les autres obstacles à la concurrence?

M. Henry: C'est exact. Bien entendu, l'existence de ces obstacles est très importante. La barrière tarifaire, les frais de transport et les autres frais, dans les cas des produits finis, qui résultent du changement de l'imprimé sur les emballages conformément aux règlements

[Text]

to comply with the food and drug regulations could be sufficient to exclude the import.

Mr. Watson: Therefore the objective of these two changes was to allow as much competition as possible, even between related companies.

Mr. Henry: That is correct.

Mr. Watson: I would like to quote, because I am going to ask you a further question, remarks you made on February 7, 1967, before the Harley Committee. I think it is a useful quote because you sum up the objectives of this Bill.

The first fundamental issue emerging in this Committee's proceedings is whether a drug manufacturing industry ought to be preserved in Canada in its present form. To do so requires continuation of the present protective devices which the industry considers necessary to its viability, but which deny Canadians access to less costly supplies of drugs. To remove significant elements of that protection (as by extending compulsory licensing to imports, or by abolishing drug patents)

And I might add that this is contained in Clause 3.

should lower the prices of drugs reaching the Canadian market but may well shift some sources of supply to plants abroad. It is possible that some Canadian drug manufacturers may become distributors to a greater extent than they are now. Manufacturing would then tend to concentrate on those products which Canadians can produce most efficiently.

I would like to know whether your department or division has made any study. You made this remark:

may well shift some sources of supply to plants abroad

Did your division make any study, or hire anyone to make a study of the possible effects of shipping some sources of supply to plants abroad?

Mr. Henry: Mr. Chairman, no, we have not done that.

Mr. Watson: You have not done that.

[Interpretation]

de la direction des aliments et drogues, pourraient suffire à exclure l'importation de ces produits.

M. Watson: Mais, le but de ces deux changements était de permettre autant de concurrence que possible, même entre des compagnies connexes.

M. Henry: C'est exact.

M. Watson: J'aimerais citer, car je vais vous poser une autre question, les observations que vous avez faites le 7 février 1967, devant la Commission Harley. Je crois que c'est une citation utile car vous résumez les objectifs dont s'inspire le bill. Vous dites:

Le premier point fondamental qui se dégage des délibérations du Comité et sur lequel il devra prendre une décision est celui du maintien de l'industrie pharmaceutique dans sa forme actuelle. Pour cela, il faudra continuer les méthodes de protection actuelles que l'industrie juge nécessaires à sa survivance mais qui empêchent le public canadien d'obtenir à meilleur compte les médicaments dont il a besoin. Si l'on supprime quelques éléments de cette protection (par le moyen des licences obligatoires d'importation ou par l'abolition des brevets)...

Et je pourrais ajouter que ceci est inclus dans l'article 3.

...on assurera des prix moins élevés sur le marché canadien, mais on transportera peut-être la fabrication des produits à des firmes de l'étranger. Il est possible que certains fabricants canadiens deviennent dans ce cas de simples distributeurs sur une plus grande échelle qu'ils le sont présentement. La fabrication se concentrerait alors sur des produits qu'il est possible de fabriquer plus économiquement au Canada.

J'aimerais savoir si votre ministère ou votre division a fait une étude là-dessus? Vous émettez cette observation:

...mais on transportera peut-être la fabrication des produits à des firmes de l'étranger.

Est-ce que votre division a fait un relevé ou a engagé quelqu'un pour faire un relevé sur les effets possibles du déplacement de certaines sources d'approvisionnement vers les usines à l'étranger?

M. Henry: Monsieur le président, non, nous ne l'avons pas fait.

M. Watson: Vous ne l'avez pas fait.

[Texte]

Mr. Henry: We have not done that—can I explain why? As has been explained in the letter which I heard for the first time when the Chairman read it, it is very difficult to estimate exactly what effect the Bill will have on particular firms. In fact, it is impossible to do this by way of forecast. It depends on the reaction of a particular firm to the new market situation. This, of course, is the reason why any analysis in precise terms has not been undertaken. It could be quite misleading.

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The statement that I made is a general statement of what we would expect to have happen as a result of the lowering of this barrier to trade, and it is the same sort of analysis that might be made if the tariff policy makers were contemplating a reduction of the tariff. They are faced with much the same problem as we are here. All we are doing really is lowering a form of tariff. It is a non-tariff barrier to trade, but the impact is the same.

Mr. Watson's reference to shifting some sources of supply abroad must be explained by saying that there are two kinds of supplies. One is the raw materials and the other is the dosage forms. That of the raw materials, of course, is the area in which, in our estimate, more supplies are likely to come from abroad. This will result in cheaper materials for the manufacturing processes in Canada.

This is why we say, in effect, that in some cases there will be a shifting from one plant to another in Canada, which is not said necessarily here because there could be shifting to some plants abroad in the dosage forms, if you understand what I mean. So you have to keep those two in mind.

Mr. Watson: Yes. And the same answer then I presume would apply to any possible study by your department on the question of whether Canadian drug manufacturers may become distributors to a greater extent than they are now and also on the question of whether manufacturing would then tend to concentrate on those products which Canadians can produce most efficiently. Your department or division did not make any attempt to make an economic study of these three questions mentioned in your remarks to the Harley Committee on February 7, 1967.

Mr. Henry: No. That is, not in precise terms. No, we have not done this.

[Interprétation]

M. Henry: Non, nous ne l'avons pas fait. Puis-je expliquer pourquoi? Comme on l'a expliqué dans la lettre que le président nous a lue, et qui m'était inconnue jusqu'à maintenant, il est très difficile d'évaluer exactement quelle répercussion pourrait avoir le bill sur certaines compagnies en particulier. De fait, il est tout à fait impossible de le faire sous forme de prévision. Cela dépendra sans doute de la nouvelle situation du marché. Et c'est la raison pour laquelle aucune analyse n'a été entreprise car elle pourrait nous induire en erreur.

Les déclarations que j'ai faites sont d'ordre général et portent sur ce à quoi nous pouvons nous attendre par suite de cette réduction des entraves au commerce. Et c'est le même genre d'analyse qui devrait être fait si ceux qui arrêtent la politique des tarifs en envisagent la réduction. Ils ont les mêmes problèmes que nous. Tout ce que nous faisons ici c'est de réduire certains obstacles au commerce, mais les effets peuvent être les mêmes.

M. Watson, en ce moment, parle du déplacement de sources d'approvisionnement vers l'étranger. Il faut expliquer qu'il y a deux sortes d'approvisionnements: d'abord, les matières premières, et ensuite les produits finis avec posologie. Les matières premières, à notre avis, correspondent au secteur où nous recevons le plus d'approvisionnements de l'étranger. Cela pourrait donner lieu à des matières premières moins coûteuses pour la fabrication au Canada.

C'est pourquoi nous disons qu'effectivement, dans certains cas, il y aura déplacement d'une usine à une autre au Canada. Cela n'est pas nécessairement dit ici car il pourrait y avoir certains déplacements aussi vers les usines à l'étranger pour des produits finis.

M. Watson: Dans ce cas, je suppose que la même réponse est valide en ce qui concerne toute étude possible que pourrait entreprendre votre ministère sur la question de savoir si les fabricants de drogues au Canada deviendraient distributeurs dans une plus large mesure qu'à présent, et aussi si la fabrication tendrait à se concentrer sur les drogues que les Canadiens produisent le plus efficacement. Votre division n'a pas tenté de faire faire un relevé économique des trois points mentionnés dans les observations que vous avez faites devant la Commission Harley, le 7 février 1967.

M. Henry: Nous n'avons pas fait de relevé tel quel.

[Text]

Mr. Watson: You have not done this. This is what I wanted to know.

Mr. Basford: However, Mr. Watson, the officials did try, and I think successfully, to assess the various alternatives and options open to private industry, but because the use of these options is up to private decision makers, it was impossible to determine which options, if any, they would use.

Mr. Watson: But the point is that no study whatsoever was made of this.

Mr. Henry: No study of the kind that Mr. Watson is referring to, Mr. Chairman, which I understand to be a detailed study of the impact on particular firms in the industry.

Mr. Watson: And I presume this is so in the case of one raw material producing industry, the PMU industry; that no study whatsoever was made of the possible effects on this industry of a shift in supply of drugs.

Mr. Henry: That is correct.

Mr. Watson: I have only one more question, Mr. Henry. I believe we agreed at the outset that the effect of this Bill would be to place subsidiaries abroad in more or less the same competitive position as Canadian companies related to those particular subsidiaries.

Mr. Henry: Mr. Chairman, I did not quite agree with that. I said subject to there being the tariff and transportation and other factors...

Mr. Watson: I mentioned those.

Mr. Henry: ... which actually does not place them in the same position.

Mr. Watson: I was the one who raised those two points.

Mr. Henry: Right.

Mr. Watson: Since we have indicated that there will be some possible effects on the industry as far as supply and so on is concerned do you consider that this is in any way in conflict with the basic principle outlined at page 2604 in the Harley committee report? I will quote it:

No recommendations could be considered, which although designed to lower drug prices...might...have a detrimental effect upon other aspects of the Canadian economy.

I quote this simply because I am aware of the difficulties involved in the sort of study which

[Interpretation]

M. Watson: C'est ce que je voulais savoir.

M. Basford: Cependant, monsieur Watson, nous avons essayé, de même que les fonctionnaires, d'évaluer les diverses options qui s'offrent à l'entreprise privée. Mais que certaines options soient utilisées ou non, cela dépend du secteur privé. Il était impossible de déterminer quelles options l'industrie privée adopterait.

M. Watson: Aucun relevé comme tel n'a été fait.

M. Henry: Aucun relevé du genre de celui que mentionne M. Watson, c'est-à-dire, une étude détaillée des répercussions que subiraient certaines industries.

M. Watson: Je suppose que c'est aussi le cas pour un producteur de matières premières; aucune étude n'a été faite des effets possibles, sur cette industrie, d'un déplacement de l'approvisionnement vers l'étranger.

M. Henry: C'est exact.

M. Watson: Une autre question monsieur Henry. Au début, sauf erreur, nous avons dit que ce bill aurait pour effet de placer les filiales à l'étranger dans la même position concurrentielle que les compagnies canadiennes.

M. Henry: Ce n'est pas tout à fait ce que j'ai dit. J'ai dit qu'il y avait des facteurs de douane, de frais de transport, etc., ..

M. Watson: C'est ce que j'ai dit.

M. Henry: ...qui n'ont pas les mêmes effets.

M. Watson: C'est précisément moi qui ai signalé ces facteurs.

M. Henry: C'est exact.

M. Watson: Comme nous avons indiqué que l'industrie subira certains effets éventuels intéressant les approvisionnements, etc., pensez-vous que cela entre en conflit avec le principe fondamental exposé par le Comité Harley à la page 2604 de son rapport. Je cite:

Ainsi, on ne devrait retenir aucune recommandation qui, même si elle a pour objet de réduire les prix des produits pharmaceutiques...pourrait...avoir un effet nuisible sur d'autres aspects de l'économie canadienne.

Je cite ce passage pour la simple raison que je suis au courant des difficultés en cause

[Texte]

I suggested into the economic effects but because this was enunciated as a basic principle I do not see why more effort was not made to have an economic study of the effects. That is all I want to say.

Mr. Otto: Mr. Chairman, I have a question.

The Chairman: Is it a supplementary?

Mr. Otto: Yes, Mr. Chairman. Did you say that you agree that no projection could be made on the effect, and that you agree with the letter?

Mr. Henry: Yes, I say that it is impractical and possibly misleading to attempt to make a projection of the impact of this bill on particular firms.

Mr. Otto: Have you ever asked any professional market research company to do this?

Mr. Henry: No, sir.

Mr. Otto: Then, Mr. Henry, I do not want to let this letter go unchallenged as gospel truth. The fact is, sir, that I can get you half a dozen companies in the marketing research business who will predict within 2 per cent—and they probably will not charge for their services if it is not correct. So a letter such as this saying that it cannot be done runs contrary to business practice which has been in effect for the last ten years—except in the government it seems.

Mr. Basford: Just a moment Mr. Otto. Certainly you could have market surveys made which would indicate what the total drug market will be, what the demands for prescription pharmaceuticals will be and so on. But Mr. Watson, for example, raised the PMU business.

It is impossible for anyone to say what Ayerst McKenna is going to be doing in five years because that is up to Ayerst McKenna. That is their business and it is up to their board of directors. They can expand, they can contract, they can develop more research facilities, they can reduce their research facilities—those are private decisions for their board of directors to make and we are not privy to them. Under this bill they have all those options available to them.

[Interprétation]

pour le genre d'étude, que j'ai suggéré, sur les effets économiques. Parce que cela a été énoncé comme principe de base, je ne vois pas pourquoi on n'a pas déployé plus d'efforts pour faire le relevé économique de ces effets.

M. Otto: J'ai une question, monsieur le président.

Le président: Est-ce une question complémentaire?

M. Otto: Oui, monsieur le président. Avez-vous dit que vous reconnaissez qu'aucune projection ne pouvait être faite sur les effets possibles, et que vous êtes d'accord avec le contenu de la lettre?

M. Henry: Oui, j'ai dit qu'il ne serait pas pratique et sans doute qu'il serait erroné d'essayer de faire une projection sur les répercussions qu'aura le Bill sur certaines compagnies en particulier.

M. Otto: Avez-vous déjà essayé d'embaucher des agences professionnelles de recherche à cette fin?

M. Henry: Non, monsieur.

M. Otto: Monsieur Henry, je ne veux pas que cette lettre passe sans être relevée. Je pourrais vous trouver une demi-douzaine de compagnies dans le domaine de la recherche sur la mise en marché, qui pourront prédire, moyennant une marge de 2 p. 100, et qui ne vous imposeront aucun frais si leurs prédictions ne sont pas justes. Cette lettre va à l'encontre de la pratique qui a cours depuis une dizaine d'années, sauf peut-être dans les cercles gouvernementaux.

M. Basford: Un moment, monsieur Otto. Sûrement, vous pouvez faire des recherches sur le marché qui pourraient indiquer quelle sera la quantité des médicaments mis sur le marché, quelles seront les demandes pour les produits pharmaceutiques sur ordonnance, etc. M. Watson a parlé du PMU (l'usine de juments enceintes).

Il est impossible de prédire ce que *Ayerst, McKenna and Harisson Limited* va faire d'ici cinq ans, car cela dépend de la compagnie privée. Cela dépend de leur conseil d'administration. La compagnie peut grandir, elle peut diminuer, elle peut mettre sur pied d'autres services de recherche, elle peut réduire ses services de recherche: ce sont là des décisions privées intéressant le conseil d'administration de la compagnie et nous n'avons pas à faire des prévisions de ce genre. Aux termes du Bill, les compagnies ont toutes ces options qui leur sont ouvertes.

[Text]

Mr. Otto: Mr. Chairman, I challenge the Minister's statement because I say that there are private market research companies who will project the reaction of this legislation on any company for a three to four year term—and they will be within 2.5 to 3 per cent correct. I have been in this business a long time and I can tell you that they can do this.

The Chairman: A supplementary, Mr. Saltsman?

Mr. Saltsman: Yes, but probably it will be more in the nature of a comment. I find the line of questioning taking place now somewhat disturbing. I presume we are here to help the consumer. It must be very obvious that any attempt to do that, particularly in areas where the consumer has been gouged for years, is going to have some detrimental effect on those industries—perhaps a reduction of their profit. Surely this is what we are here screaming about. To say that we can anticipate the effect on these industries is, I think, no more accurate than to say that by changing a tariff one knows exactly what is going to happen to every given industry in this country.

We are here to determine whether by taking action along the lines suggested in this bill that action will be of assistance to the consumer. We are also hopeful, naturally, that it will not be that detrimental to industry, and I do not believe it will be. But surely our first consideration must be the consumers and whether this bill will benefit them.

Mr. Watson: I have a supplementary. I think it has been the hope of all of us that this bill will result in lower prices to the consumer. The Minister has expressed this hope, and I think there will be some lowering of prices. But I think it is also a fair question, from the point of view of members of the House of Commons, to know what the other effects are going to be. It is certainly no reflection on our desire to lower prices to the consumer to want to know what the other effects on the economy will be.

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I think this is an entirely reasonable question and I do not like having motivations attributed to me. I feel strongly that we should know and, with the various techniques we have today, it is more possible to ascertain the results of our actions. I think we should know as much about the possible effects as is humanly possible.

[Interpretation]

M. Otto: Monsieur le président, je mets en doute les déclarations du ministre, car je dis qu'il y a des compagnies de recherche sur le marché qui peuvent projeter les réactions de cette loi sur toute compagnie pour une période de trois ou quatre ans. Leurs prédictions auront une marge d'erreur de 2.5 à 3 p. 100. Il y a longtemps que je m'occupe de ces affaires et je peux vous assurer qu'ils peuvent le faire.

Le président: Une question complémentaire, monsieur Saltsman?

M. Saltsman: C'est peut-être un commentaire plutôt qu'une question. Il y a quelque chose d'inquiétant dans cette série de questions. Nous essayons certainement d'aider le consommateur. Il est très évident que toute tentative d'aider le consommateur, notamment lorsque le consommateur a été négligé depuis des années, aura des effets nuisibles sur l'industrie. Il y aura peut-être une réduction des bénéfices de l'industrie. C'est pourquoi, nous sommes ici en train de jeter des hauts cris. Dire que nous pouvons prévoir les effets sur les industries, n'est pas plus juste que de dire qu'en changeant les droits de douane, vous savez exactement quels seront les effets sur l'industrie.

Nous sommes ici pour déterminer si en adoptant des dispositions conformes au Bill, on vient en aide au consommateur. Nous espérons aussi que cela n'aura pas tellement d'effets nuisibles sur l'industrie. J'estime que les effets ne seront pas tellement nuisibles. Mais notre première considération doit être la question du consommateur, à savoir si le bill lui sera avantageux.

M. Watson: J'ai une question complémentaire. Nous espérons tous que ce Bill produira une réduction des prix pour le consommateur. Le ministre a exprimé cet espoir. Je crois qu'il y aura sans doute une réduction éventuelle. Je crois que, du point de vue des députés à la Chambre des communes, il importe de savoir quels seront les autres effets. Cela ne veut pas dire que nous ne voulons pas réduire les prix au consommateur. Nous voulons simplement savoir quels seront les autres effets sur l'économie.

C'est là une question tout à fait raisonnable. Je n'aime pas qu'on me prête des arrière-pensées. J'estime fermement que nous devrions savoir et, avec les diverses techniques que nous possédons aujourd'hui, il est possible de connaître les répercussions éventuelles de nos initiatives. Nous devrions connaître le plus possible sur les effets éventuels.

[Texte]

The Chairman: Have you a supplementary, Mrs. MacInnis?

Mrs. MacInnis (Vancouver-Kingsway): We are worrying about the effects all around but there is one thing we do know—the effects on the consumer.

Some hon. Member: We do not know.

Mrs. MacInnis (Vancouver-Kingsway): We certainly do know the effects of the existing situation on the consumer at the present time. We do know that the consumer has been gouged. We have all kinds of evidence that the price of drugs is way beyond what it should be—we know that. There may be doubt on the other score but there is no doubt whatever as far as the consumer is concerned.

I would like to ask the Minister what he foresees will be the general effect of this bill on the consumer? Once again, I think we are losing sight of this.

Mr. Basford: Thank you very much, Mrs. MacInnis. I suspect that you are correct when you say that we sometimes lose sight of it. As I said, I have not promised any miracles but I hope, as did three other enquiries, that this kind of measure—bringing greater competition into the manufacturing of pharmaceuticals—will have a beneficial effect on the consumers of prescription drugs, by resulting in a lowering of drug prices.

As I have explained, it is not the total answer, it is not the single answer, there are other things we have done, other things that we would hope to do, but I think this is an essential ingredient of a program to reduce drug prices.

Mr. Ritchie: Our discussion has indicated the far-reaching effects of this bill but, I might add, there is nothing to show what effect it will have on research and on the introduction of new drugs.

I would like to question Dr. Chapman on three aspects we touched on the other day. On the question of trademarks, I thought the Minister, in reply to a question, pointed out very adequately why we have trademarks and the need for them in carrying on the normal practice of prescribing drugs.

I would like to ask the patent people a question. For example, let us say that there is a vitamin preparation with six vitamins patented in Canada and there is a similar patent in the United States. Is there any central registry for these patents, and is vitamin X,

[Interprétation]

Le président: Question complémentaire, madame MacInnis?

Mme MacInnis (Vancouver-Kingsway): On s'inquiète de tous les effets possibles, mais nous connaissons les effets sur le consommateur.

Une voix: Nous n'en savons rien.

Mme MacInnis (Vancouver-Kingsway): Nous connaissons certainement les effets actuels sur le consommateur. On sait que le consommateur a été roulé. Nous avons des preuves montrant que les prix sont beaucoup plus élevés qu'ils ne devraient l'être. Il n'y a aucun doute en ce qui concerne le consommateur.

J'aimerais demander au ministre quels seront les effets de ce Bill sur les consommateurs?

M. Basford: Merci beaucoup, madame MacInnis. Je soupçonne que vous avez raison, car on oublie cela parfois. Je n'ai pas promis de miracles, mais j'espère, comme d'ailleurs trois autres commissions d'enquête, que ce genre de mesure, en injectant plus de concurrence dans l'industrie des produits pharmaceutiques, aura des effets bénéfiques sur les ordonnances des consommateurs, en apportant une réduction des prix des produits pharmaceutiques.

Comme je l'ai expliqué, ce n'est pas la solution totale; il y a d'autres choses que nous avons faites, d'autres choses que nous espérons faire, mais, essentiellement, c'est là un élément d'un programme en vue de réduire éventuellement les prix.

M. Ritchie: Notre discussion nous montre les effets lointains de ce Bill. Il n'y a rien qui montre les effets éventuels sur la recherche et sur la mise en marché de nouveaux médicaments.

J'aimerais interroger M. Chapman sur trois aspects que nous avons abordés l'autre jour. Au sujet des marques de commerce, le ministre, en réponse à une question, a bien signalé pourquoi nous avons des marques de commerce et qu'il faudra avoir des marques de commerce pour avoir une méthode normale pour les ordonnances de médicaments.

J'aimerais demander une question aux fonctionnaires de la Division des brevets. Par exemple, supposons qu'il y a une préparation de vitamines mettant en cause six vitamines brevetées au Canada et qu'il existe un brevet analogue aux États-Unis. Est-ce qu'il y a un

[Text]

say, in Canada the same as vitamin X in the United States?

Dr. Chapman: That would relate to the Patent Act.

Mr. Ritchie: Is there a central registry for worldwide patents?

The Chairman: I am sorry, sir, but you are out of order if you are talking about the Patent Act. That was on Clause 1 and we are now on Clause 3, which is the Trade Marks Act.

Mr. Ritchie: I am sorry, I meant trademark, not patent. Is there a central registry of trademarks?

Mr. Basford: There is no central international registry. Some international discussions are going on at the moment. The Commissioner of Patents went to a conference in Paris just before Christmas to discuss the matter of trying to establish such a system.

Mr. Ritchie: I see. If a formulation is registered of six different chemicals for instance, it does not necessarily need to be the same in Canada as in the United States or in other countries in the world. They can call it by the same name but it might not necessarily have the same composition. Is that correct?

Mr. Basford: Yes. A compound could be patented and trademarked in Canada and someone could apply for a different patent and a different trademark in another country. However, I think the situation—and my officials can supplement what I say—would be a little unusual, because certainly the international companies would apply for a patent in the country of origin and then apply worldwide for its protection.

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Mr. Ritchie: If a trademark is held in Canada and another drug company, an importing company, applies to bring in the drug with the same trademark, I presume it is first scrutinized by the patent office that issues a compulsory licence. Is that correct?

Mr. Basford: Which, the trademark?

Mr. Ritchie: Yes.

Mr. Basford: It is the same officials but they are unrelated. If someone applies for a

[Interpretation]

registre central de tous ces brevets? Est-ce que, par exemple, la vitamine X au Canada est exactement semblable à la vitamine X aux États-Unis?

M. Chapman: C'est vraiment une question intéressant la Loi sur les brevets.

Mr. Ritchie: Est-ce qu'il y a un registre central pour les brevets mondiaux?

Le président: Si vous parlez de la Loi sur les brevets, je crois que vos propos sont irrecevables. Nous étudions l'article 3 de la Loi sur les marques de commerce.

M. Ritchie: Je m'excuse, je voulais plutôt parler de marques de commerce. Y a-t-il un registre central des marques de commerce?

M. Basford: Non, il n'existe pas de registre central international des marques de commerce. On en discute, à l'heure actuelle, au niveau international. Avant Noël, le commissaire des brevets a assisté à une conférence à Paris pour essayer d'établir un secrétariat de ce genre.

M. Ritchie: Si, par exemple, on enregistrait six produits différents, ils ne serait pas obligatoirement les mêmes au Canada, aux États-Unis ou dans d'autres pays. Ils peuvent porter les mêmes noms sans avoir la même composition. Est-ce exact?

M. Basford: Oui, un produit composé pourrait avoir un brevet ou une marque de commerce au Canada, en effet. Mais quelqu'un pourrait demander un brevet différent dans un autre pays. Mes fonctionnaires pourraient vous donner de plus amples explications là-dessus. Mais je crois que cela serait assez inusité qu'une compagnie internationale demande un brevet dans son pays d'origine et puis demande une protection internationale.

M. Ritchie: Si une compagnie détient un brevet au Canada et qu'une autre société d'importation fait aussi une demande portant la même marque de commerce, elles sont d'abord examinées par le Bureau des brevets. Est-ce juste?

M. Basford: Les marques de commerce?

M. Ritchie: Oui.

M. Basford: Ce sont les mêmes fonctionnaires, oui. Mais si quelqu'un demande d'enre-

[Texte]

trademark a search is made to find out if it conflicts with some other trademark.

Mr. Ritchie: I am sorry, I think you misunderstood my question. Let us say a drug is trademarked in Canada and another importing company—which, as I understand it, is the purpose of this amendment—asks to import the same trademark from the United States—that is, from the subsidiary, this family we talked about the other day—who within the government offices decides that they are the same?

Mr. Basford: That the trademark is the same?

Mr. Ritchie: That the composition or formulation of the drug is the same.

Mr. Basford: If there was confusion it would be the responsibility of the Food and Drug Directorate to decide if they would allow importation. If there was confusion the Department of Health and Welfare would act under subsection 2. Perhaps Dr. Chapman would like to supplement what I have said.

Mr. Ritchie: Mr. Chairman, I would like to ask Dr. Chapman if there are variations where does he draw the line, or are there no variations?

Dr. Chapman: Mr. Chairman, there is certainly some variation in products marketed by the same company under the same trademark in different countries. However, we have looked into this very carefully. We have written to a number of companies to ask them to indicate to us precisely what these differences are and in what products they are likely to occur. We have not found, in the instances that have been brought to our attention by the pharmaceutical firms, that these products are likely to result in a hazard to health.

Let me give you an example which I think will indicate the problem quite clearly. There is a product called Isogel, which is manufactured by Glaxo-Allenburys Limited. It is a bulk laxative which, according to the president of Glaxo-Allenburys Limited of Weston, Ontario, differs considerably in different markets. In Canada at present Isogel contains no sugar and is suitable for diabetics but whether, in view of the popularity of similar laxatives with a high sugar content, this will remain true in all markets cannot be guaranteed.

This is an example where it might be a problem if a diabetic were not aware that this

[Interprétation]

gistrer une marque de commerce, il faut certainement voir s'il n'y a pas déjà un produit qui porte le même nom.

M. Ritchie: Vous n'avez pas compris ma question. Disons qu'un médicament porte une marque de commerce au Canada et qu'une autre compagnie demande à importer la même marque de commerce des États-Unis. Qui va décider, dans votre ministère, si ce sont les mêmes produits?

M. Basford: Que la marque de commerce est la même?

M. Ritchie: Que la composition du médicament est la même.

M. Basford: C'est là le travail de la Direction des aliments et des drogues. S'il y a une confusion, le ministère de la Santé pourrait agir en vertu de l'alinéa (2). Peut-être M. Chapman voudrait-il ajouter quelques mots?

M. Ritchie: J'aimerais demander ceci à M. Chapman. Monsieur le président, s'il y a des variations, où est-ce qu'on tire la ligne? Ou s'il n'y a pas de variations?

M. Chapman: Oui, il existe certainement des variations dans les produits écoulés par les mêmes compagnies important la même marque de commerce dans différents pays. Cependant, nous avons étudié cette question soigneusement. Nous avons écrit à un certain nombre de sociétés leur demandant de nous indiquer exactement quelles sont ces différences et dans quels produits elles sont susceptibles de se manifester. Nous n'avons pas trouvé, dans les cas qui nous ont été signalés par les maisons pharmaceutiques elles-mêmes, que ces produits peuvent présenter un danger pour la santé.

Voici un exemple qui illustre ce problème très clairement: il y a un produit qui s'appelle Isogel, fabriqué par Glaxo-Allenburys Limited. C'est un laxatif qui, d'après le président de Glaxo-Allenburys Limited, de Weston, Ontario, diffère considérablement d'un pays à l'autre. Au Canada, en ce moment, Isogel ne contient pas de sucre et peut être pris par les diabétiques. Mais à cause de la popularité de certains produits contenant du sucre au Canada, on ne peut pas le garantir.

C'est un exemple où le problème pourrait être soulevé si un diabétique ne savait pas

[Text]

product contained sugar. The Canadian product did not contain sugar, but the imported product did. After discussing this with our medical personnel, they pointed out that the amount of sugar in a laxative would be insignificant compared with the intake of sugar in the diet during a 24-hour period. However, if there was an indication that this would result in a hazard to health, the Minister of National Health and Welfare would then have the authority under subsection 2, page 7, to publish the name of this product in the *Canada Gazette* and then, of course, the exemption of the Trade Marks Act would not apply.

[Interpretation]

que ce produit contient du sucre. Le produit canadien ne contient pas de sucre, mais le produit importé en contient. Cependant au cours d'une discussion à ce sujet avec des médecins, on m'a fait remarquer que la proportion de sucre contenu dans un laxatif serait insignifiante comparativement à celle qu'absorbe le système dans une période de 24 heures. Cependant, s'il y avait un indice que cela occasionnerait un danger à la santé, le ministre de la Santé aurait l'autorité, en vertu de l'alinéa (2) page 7, de publier le nom de ce produit dans *La Gazette du Canada* et, par conséquent, l'exemption à la Loi sur les marques de commerce ne s'appliquerait pas.

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Mr. Ritchie: Mr. Chairman, I would like to ask Dr. Chapman this question. I believe there is a drug used in India for some of the parasitic diseases that is an entirely different drug from a similar one on the market in the Western world. Is that right, or are you aware of that particular instance?

Dr. Chapman: May I ask Dr. Ritchie if he could give me the name of the drug?

Mr. Ritchie: I have forgotten. It is a fairly specific drug that is designed for a specific purpose. I presume in that case the Food and Drug Directorate would definitely have to act. I would like to say, however, that in the future there could be some variation in the drugs sold by trademark in Canada under the supposition that the Food and Drug Directorate have looked over the situation and decided there would be no hazard to health.

Dr. Chapman: That is correct, Mr. Chairman.

Mr. Ritchie: I would now like to ask this question, and perhaps the Minister could answer it. In the importation of drugs will the government favour the importation of the compounding chemicals over the finished product or will licences be issued to all who wish, subject to the Food and Drug Directorate? I am getting at the fact that this can have quite an effect when the drugs are formulated in Canada or when they are formulated outside. In other words, should the so-called manufacturing be moved out of Canada into foreign countries? I would like to point out that the Food and Drug Directorate could maintain manufacturing in Canada by refusing to license the finished formulation. This is as I see it, at any rate.

M. Ritchie: J'aimerais demander ceci à M. Chapman: il y a une drogue que l'on utilise en Inde pour des maladies parasitaires qui est entièrement différent d'un produit semblable qui se vend dans les pays occidentaux. Le connaissez-vous?

M. Chapman: Pourriez-vous donner le nom de ce médicament?

M. Ritchie: Je pense qu'il s'agit d'un entérovaccin. Je ne suis pas tout à fait sûr. C'est un médicament spécial pour une maladie spéciale. Et je pense que, dans ce cas, la Direction des aliments et des drogues devrait agir. J'aimerais ajouter, cependant, qu'il pourrait y avoir des variations dans les médicaments vendus sous une marque de commerce au Canada pourvu que la Direction des aliments et des drogues ait étudié la situation et décidé qu'ils ne présentent aucun danger pour la santé.

M. Chapman: C'est exact, monsieur le président.

M. Ritchie: J'aimerais demander ceci:—je ne sais pas à qui je devrais poser la question peut-être au ministre—dans l'importation des médicaments, est-ce que le gouvernement encouragera l'importation des produits chimiques qui composent le produit fini, ou est-ce que l'on va délivrer des licences à tous ceux qui veulent faire de l'importation? Cela peut avoir de grandes conséquences si les médicaments sont composés au Canada ou ailleurs. Il s'agit de savoir si le produit sera fabriqué à l'étranger ou au Canada. Le ministère pourrait encourager la fabrication au Canada refusant de donner des licences aux produits finis à l'étranger.

[Texte]

Mr. Basford: The Commissioner of Patents, who is not here today; will have to grant—I am afraid we are back on section 1—compulsory licences in accordance with the Act. He has certain statutory duties to obey. Which products actually come in or not is up to the Food and Drug Directorate.

Mr. Ritchie: Thank you.

Mr. Rynard: Mr. Chairman, I want to add a supplementary just in case we think this only concerns one drug. I have a telegram here from Dr. Belliveau, President of the Canadian Medical Association, and it reads:

OUR CONCERN IS NOT RESTRICTED TO THE IMPORTATION OF GENERIC DRUGS STOP WE FEAR THAT CONFUSION MAY ARISE DUE TO THE IMPORTATION OF BRAND NAME DRUGS SOME OF WHICH HAVE INGREDIENTS PHYSIOLOGICAL ACTIVITY AND DOSAGE FORMS DIFFERENT FROM SIMILARLY NAMED CANADIAN BRANDS

Let us not believe there are only one or two drugs, because this is signed by Dr. Belliveau, President of the Canadian Medical Association.

Dr. Chapman: I was not suggesting there were only one or two drugs. I was attempting to give an example in order to explain the situation to the members of the Committee.

Mr. Rynard: I agree with you, but I think perhaps that impression may have been left. There are a lot of them.

Mr. Basford: In spite of Dr. Belliveau's concern, we have subsection 2.

Clauses 3 and 4 agreed to.

On Clause 5—

Mrs. MacInnis (Vancouver-Kingsway): Mr. Chairman, when we adjourned the other day we were dealing with an amendment which my colleague had moved and which was still hanging fire. I would like to come back to that amendment right now: it is under the Food and Drugs Act and was to the effect that a new paragraph (c) be added to subsection (1a) of Section 24 reading as follows:

The regulation of drug manufacturing, importing, and distribution so that only drugs having a generic name be allowed to be sold in Canada.

[Interprétation]

M. Basford: Le commissaire des brevets qui n'est pas ici aujourd'hui, devra donner,—et nous revenons à l'article 1—, devra donner des licences obligatoires pour se conformer à la loi. C'est là son devoir. Et cela relève entièrement de la Direction des aliments et des drogues.

M. Ritchie: Merci.

M. Rynard: Une question supplémentaire. Le docteur Béliveau, président de l'Association des médecins canadiens, a dit:

Nous ne nous intéressons pas seulement à l'importation de médicaments génériques, mais nous craignons l'importation de produits différents de ceux que l'on vend au Canada et qui portent le même nom.

N'allez pas croire qu'il ne s'agit que d'un ou deux médicaments. Ce télégramme vient du Dr Béliveau, qui est président de l'Association des médecins canadiens.

M. Chapman: Je n'ai pas dit qu'il ne s'agissait que d'un ou deux médicaments, je vous donnais un exemple pour expliquer la situation.

M. Rynard: C'est ce que nous avons cru comprendre, mais il y a beaucoup de ces médicaments.

M. Basford: Nous avons le paragraphe 2 qui s'applique à ces cas.

Les articles 3 et 4 sont adoptés.

Sur l'article 5:

Mme MacInnis (Vancouver-Kingsway): L'autre jour, lors de l'ajournement, nous discutions d'une modification qui a été proposée par mon collègue et qui est toujours en suspens. J'aimerais revenir à cette modification tout de suite. Elle avait trait à la Loi sur les aliments et drogues et proposait qu'un nouvel alinéa (c) soit ajouté au sous-alinéa (1) a) de l'article 24 et qui devrait se lire comme suit:

La réglementation de la fabrication, de l'importation et de la distribution des drogues afin que seules les drogues portant un nom générique puissent être vendues au Canada.

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I suggest that the questioning and comments we have just been listening to constitute a

Je pense que les questions et les commentaires que nous venons d'entendre sont de bons

[Text]

very powerful argument in favour of this amendment because two medical men on the Committee, Dr. Ritchie and Dr. Rynard, said that there would be very grave danger of confusion as to the content of brand name drugs brought in from outside vis-à-vis the same brand name drugs manufactured here in Canada; that there could be confusion as to content, efficacy, safety and so on of those drugs. It seems to me that that is one factor: the impossibility of really determining that these drugs are identical or of knowing where to draw the line is one firm argument in favour of such an amendment.

The other argument is, I think, the fact that bringing in the generic name drugs would do away with this fact—cartels or outside arrangements could be created very easily which would prevent the importation of cheaper drugs with the same brand names. I raised that the other day, that if somebody were to try and import drugs from outside and then the parent firm were to decide to make an arrangement among its different branches in different countries, there could not be a cheaper kind obtained from outside.

For these reasons I think that this amendment could be discussed and considered very favourably because what we are urging is that instead of going through all this business of having to decide, first of all, if we can get anything cheaper from one country than from another or secondly, whether the brand name from outside is the same as the brand name of the parent company inside, and whether or not it is the same composition of drug, all this would be done away with. We have had evidence given to the Committee earlier that generic drugs are just as good.

Dr. Chapman is on record, I believe, as saying that by and large generic drugs are just as good as brand name drugs in every particular. It seems to me that a very good way of handling this would be to bring into Canada generic drugs and to forget about the brand name kind.

Dr. Chapman: Mr. Chairman, may I just correct the quotation which Mrs. MacInnis referred to. My statement was to the effect that drugs sold under a brand name did not differ in quality as determined in our laboratories from those sold under a generic name.

Mrs. MacInnis (Vancouver-Kingsway): I am glad to have the exact quotation but I think I did not do too much violence to your meaning.

[Interpretation]

arguments en faveur de cette modification, parce que nous avons entendu deux médecins, les docteurs Ritchie et Rynard, nous dire qu'il y a grand danger de confusion au sujet de la composition des médicaments à marque commerciale avec ceux qui sont fabriqués au Canada. Il pourrait y avoir confusion en ce qui concerne leur composition, leur efficacité et leur innocuité. Il me semble que l'impossibilité de déterminer de façon certaine que ces médicaments sont identiques, ou de savoir où tirer la ligne, constitue un bon argument en faveur de cet amendement.

L'autre argument, je pense, c'est le fait que de laisser entrer les médicaments à nom générique éliminerait cet état de chose,—des cartels ou d'autres organisations pourraient être créés pour empêcher l'importation de médicaments à bon marché, portant la même marque de commerce. J'ai soulevé ce problème, l'autre jour, si on essayait d'importer des médicaments de l'étranger et si la maison mère décidait de faire des arrangements avec ses filiales dans les autres pays, afin qu'ils ne puissent pas importer ce médicament à bon marché.

Pour ces raisons, je pense que cette modification pourrait faire l'objet d'une étude, plutôt que d'essayer de décider, tout d'abord, de voir si nous pouvons obtenir des médicaments à bon marché, et ensuite essayer de décider si le nom de commerce est le même que celui que vend la même maison au Canada, et à la même composition, tout cela disparaîtrait. Le comité a entendu des témoignages à l'effet que les drogues génériques sont aussi bonnes que celles qui portent des marques de commerce.

Le docteur Chapman a dit, je crois, que les drogues génériques sont tout aussi bonnes que celles qui portent une marque de commerce. Il me semble que ce serait une très bonne façon de régler le problème: faire venir les drogues génériques au Canada et ne pas s'occuper de celles qui portent des marques de commerce.

M. Chapman: Ce que j'ai dit, vraiment, c'est que les médicaments vendus sous une marque de commerce ne diffèrent pas au point de vue de la qualité, dont les normes ont été établies par nos laboratoires, de ceux qui sont vendus comme médicaments génériques.

Mme MacInnis (Vancouver-Kingsway): Je suis heureuse d'avoir la citation précise, mais je ne ne crois pas en avoir trop changé le sens.

[Texte]

Mr. Otto: Mr. Chairman, on that amendment, I wonder if Mr. Henry could explain subsection (2) of Section 49A in Clause 3 which we have just passed, because it seems to me either that is superfluous or the amendment is superfluous.

Mr. Henry: Mr. Chairman, yes, I agree with Mr. Otto. The whole of Clause 3 dealing with the Trade Marks Act amendment presupposes that the trade mark system will continue with respect to drugs and if brand names were to be outlawed, if I can put it that way, then, of course, you would not have any trade marks on drugs and therefore Section 49A would be unnecessary.

Mr. Otto: Mr. Chairman, may I just go further. If Mrs. MacInnis reads subsection (2) she will see it quite specifically states that the Department of National Health and Welfare must pretty well certify that the ingredients are identical or, if not identical, that they are not identical as to be likely to result in the hazard to health; in other words, if they added some calcium or something of this nature. The purpose of the amendment, as I understood Mrs. MacInnis, is to protect the importers or the consumers from a different ingredient in the trade mark product.

Mrs. MacInnis (Vancouver-Kingsway): My first and major point was to bring down the price of drugs.

Mr. Ritchie: I would like to point out to Mrs. MacInnis that I think it would be very impractical because you would make the doctors' day about one hour longer just to writing these long formulations. This amendment might well defeat the purpose because you would be reduced to saying "vitamin preparation made by Hoffmann-La Roche Limited", or "a blood preparation made by Acme Drugs". You just have to take a look at some of the vitamin preparations on the shelf and you will sympathize, and, of course, the big companies would have much the advantage over the small generic companies in this. Therefore, in a practical way, I feel the amendment is just impossible as far as the doctors are concerned.

• 1215

Mrs. MacInnis (Vancouver-Kingsway): Perhaps the doctors could learn a type of shorthand.

Mr. Yewchuk: Is Mrs. MacInnis suggesting that we do not use trade names? Is this right? There are many drugs which have several components to them and this would mean writing a list of anywhere between 2 and 15

[Interprétation]

M. Otto: Au sujet de cette modification, est-ce que M. Henry pourrait nous expliquer le sous-alinéa 2 du paragraphe 49 a) de l'article 3 que nous venons d'adopter, parce qu'il me semble que ceci est superflu ou que l'amendement l'est.

M. Henry: Je suis d'accord avec M. Otto. Tout l'article 3, qui traite de l'amendement à la Loi sur les marques de commerce, suppose que l'on va continuer le système des marques de commerce. Si on exclut les marques de commerce, si je puis dire, il n'y en aurait plus sur les médicaments, et alors, l'article 49 a) serait superflu.

M. Otto: J'irais même plus loin, monsieur le président. Si M^{me} MacInnis veut bien lire l'alinéa (2), elle verra que l'on dit, définitivement que le ministère de la Santé et du Bien-être social doit certifier que les ingrédients sont identiques ou, en cas contraire, qu'il n'y a pas de risques pour la santé. Le but de ce sous-alinéa, si j'ai bien compris la modification proposée par M^{me} MacInnis, est de protéger l'importateur ou le consommateur contre les produits qui ne contiennent pas les mêmes éléments.

Mme MacInnis (Vancouver-Kingsway): Le but principal de mon amendement est de faire baisser le prix des médicaments.

M. Ritchie: J'aimerais faire remarquer à M^{me} MacInnis que cela ne serait pas pratique, parce qu'il faudrait que le médecin reste beaucoup plus longtemps près du patient pour écrire toutes ces longues ordonnances. Cet amendement pourrait très bien manquer son but, car vous n'auriez qu'à dire «vitamine fabriquée par Hoffmann-La Roche Limited» ou «une préparation sanguine fabriquée par Acme Drugs». Vous n'avez qu'à regarder quelques-unes des préparations de vitamines sur les tablettes et vous vous laissez tenter avec, comme résultat, que les grandes firmes pharmaceutiques auront l'avantage sur celles de moindre importance. Par conséquent, en pratique, cet amendement est inapplicable eu égard aux médecins.

Mme MacInnis (Vancouver-Kingsway): Ceux-ci pourraient peut-être apprendre la sténographie.

M. Yewchuk: M^{me} MacInnis propose que nous n'utilisions pas les marques de commerce. Il y a beaucoup de médicaments qui comportent plusieurs éléments, ce qui voudrait dire, faire la liste d'environ une dou-

[Text]

chemical names for one prescription. I doubt very much that doctors would be willing to do this and that the amendment, therefore, would be kind of useless.

Mrs. MacInnis (Vancouver-Kingsway): Could we ask the opinion of Dr. Chapman as to whether it is feasible or not?

Dr. Chapman: Mr. Chairman, I am not a physician. I am a chemist.

Mrs. MacInnis (Vancouver-Kingsway): That is all right. I would like the opinion of a chemist.

Dr. Chapman: In regard to compound drugs I certainly agree with the comments made by Mr. Yewchuk. I think that it would be impractical to require a physician to list the various ingredients by their proper names on a prescription. I just do not think it would be practical to do this because many of these pharmaceutical preparations contain at least two ingredients and many of the ones that are widely used contain more ingredients than that—3, 4, 5 or even more. I think that this aspect of it would be impractical.

Mr. Foster: Mr. Chairman, in the same vein I cannot really say that taking away the patent name should have any effect. This just expedites the writing of prescriptions and surely it complicates things if every time we write "aspirin" we have to write "acetyl-salicylic acid", or whatever the chemical name is. I really cannot see the advantage as far as the practical application of getting the price of drugs down is concerned which is what we are here to do.

In this connection, since we are on Clause 5, I would like to ask Dr. Chapman in what areas they feel they might be writing regulations subsequent to the Act? Perhaps I should ask the Minister.

Mr. Basford: I am sorry, I was having a discussion with the Chairman.

Mr. Foster: I was just inquiring in what areas of drugs direct further regulations will be needed?

Mr. Basford: As these are amendments to the Food and Drugs Act which is not under my jurisdiction, I would refer the question to Dr. Chapman.

Dr. Chapman: Mr. Chairman, we have no specific situations in view at the moment. It was simply the intention of this amendment to the Food and Drugs Act to make it perfectly clear that authority was provided to the

[Interpretation]

zaine de mots chimiques pour une ordonnance. Je doute que les médecins aient le temps, le désir de faire cela et l'amendement serait, alors, inutile.

Mme MacInnis (Vancouver-Kingsway): Est-ce qu'on pourrait demander au Dr Chapman, si ce serait pratique ou non?

M. Chapman: Monsieur le président, je ne suis pas médecin, je suis un chimiste.

Mme MacInnis (Vancouver-Kingsway): Oui. J'aimerais l'opinion d'un chimiste quand même.

M. Chapman: En ce qui concerne les médicaments composés, je suis d'accord avec ce que M. Yewchuk a dit. Il ne serait pas pratique de demander aux médecins de faire la liste des éléments de l'ordonnance, d'après leurs noms génériques. Cela n'est pas pratique, parce que beaucoup de préparations pharmaceutiques contiennent au moins deux éléments et il y en a qui sont d'usage courant et qui contiennent quatre éléments, trois, quatre, cinq ou plus. Je pense que cela ne serait pas pratique sous cet aspect.

M. Foster: Je ne pense pas que l'on gagne à faire disparaître les marques de commerce. Chaque fois que le médecin voudrait prescrire de l'aspirine, il devrait dire de l'acide acétyl salicylique et cela est trop long. Cela n'aurait aucun effet sur le prix des drogues.

Puisque nous discutons de l'article 5, j'aimerais demander au docteur Chapman, dans quels domaines il pense que l'on pourrait formuler les règlements après l'adoption de la Loi? Peut-être devrais-je demander au ministre?

M. Basford: Je m'excuse, j'étais en train de discuter avec le président.

M. Foster: Je demande dans quels domaines il faudrait formuler de nouveaux règlements.

M. Basford: Ce sont des modifications à la Loi des aliments et drogues, qui ne sont pas de mon domaine. Je renvoie cette question au docteur Chapman.

M. Chapman: Monsieur le président, nous n'avons pas de situation précise, en vue, en ce moment. La modification à cette Loi sur les aliments et drogues vise à dire clairement que le gouverneur en conseil a l'autorité de faire

[Texte]

Governor in Council to make any regulations that were necessary governing, regulating or prohibiting the importation of drugs into Canada if such action were required relative to the safety and quality of those drugs.

Mr. Foster: This is not provided in the Act right now?

Dr. Chapman: It is not specifically spelled out in the Act at the present time, and it was considered desirable in view of the importance of this aspect that it be so spelled out.

Mr. Foster: There are no regulations in the Food and Drugs Act right now?

Dr. Chapman: Oh yes.

Mr. Foster: This is just a supplementary authority for writing further regulations.

Mr. Basford: Yes.

Mr. Foster: Under the Food and Drug Act.

Mr. Basford: This is a change from Bill C-190, where the question of safety was raised. And in redrawing the bill and making it C-102, we thought we would put that in so there just could be no conceivable doubt that the Food and Drug Directorate had complete, full authority to deal with any importations.

• 1220

Mr. Foster: My concern was whether you had planned or considered that there might be some area of controlling drugs where you would be requiring regulations, but this is just a general provision.

Dr. Chapman: That is correct.

The Chairman: I am going to read the amendment proposed by Mrs. MacInnis concerning the regulation of drug manufacturing, importing and distribution, so that only drugs having generic names be allowed to be sold in Canada. I have to rule it out of order. I refer to Article 402 in Beauchesne, in which it is said:

(1) In Committee all the clauses of the bill are considered before any new clauses are brought up and added to the bill...

(2) A new clause will not be entertained if it is... inconsistent with clauses agreed to by the Committee...

[Interprétation]

tous règlements qu'il juge nécessaires pour gouverner, réglementer ou prohiber l'importation de drogues au Canada, si une telle action est requise afin d'assurer la sécurité et la qualité des médicaments.

M. Foster: Ceci n'est pas prévu dans la Loi présentement?

M. Chapman: On a décidé que cela était nécessaire, à cause de l'importance de la question.

M. Foster: Mais, il n'y a pas de réglementation dans la Loi sur les aliments et drogues à l'heure actuelle?

M. Chapman: Oui, nous en avons.

M. Foster: C'est simplement une autorité supplémentaire pour préparer des règlements.

M. Basford: Oui.

M. Foster: Prévue par la Loi des aliments et drogues.

M. Basford: Certains changements ont été apportés au Bill C-190, précisant la question de sécurité, et en rédigeant le nouveau Bill C-102, nous avons pensé insérer cette disposition afin qu'il n'y ait aucun doute que la Direction des aliments et drogues a l'autorité absolue sur toutes les importations.

M. Foster: J'avais pensé que pour contrôler certaines catégories de drogues, vous pourriez avoir besoin de règlements spéciaux, mais c'est là une question d'ordre général.

Dr. Chapman: C'est exact.

Le président: Je vais vous lire la modification proposée par M^{me} MacInnis, au sujet des règlements de fabrication, d'importation et de distribution des produits pharmaceutiques, modification voulant que ces produits devraient être importés sous leur nom générique seulement. Cette modification enfreint le règlement, car selon Beauchesne, à l'article 402:

(1) En comité, tous les articles du projet de loi sont examinés avant que de nouveaux articles soient proposés ou ajoutés au bill...

(2) Un nouvel article ne sera pas accepté s'il... contredit les dispositions adoptées par le comité...

[Text]

which will have the effect of destroying Clause 3. So this is my ruling. I declare it out of order.

Are there any other questions? If not, shall clause 5 stand?

Mr. Rynard: Mr. Chairman, how can you carry Clause 5 when you...

The Chairman: I said shall Clause 5 stand?

An hon. Member: I was going to suggest that if you were going to pass Clause 5, that you re-open Clause 1.

The Chairman: No, stand.

Mr. Rynard: Not carry; stand.

Mrs. MacInnis (Vancouver-Kingsway): We have got quite a few amendments and it does not matter whether we do them now or some other time, whenever you like.

The Chairman: We will have more time to consider them at the next meeting...

Mrs. MacInnis (Vancouver-Kingsway): That is fine.

The Chairman: ...because we have to meet with the steering committee and come back before we carry Clause 5.

Mr. Watson: Mr. Chairman, since there was discussion earlier on economic consequences and the type of studies that might be made, should I suggest for your consideration that...

The Chairman: If the Committee agrees that you do it now. But it would be much simpler if we could pass it on to the steering committee.

Mr. Watson: That is fine, agreed.

The Chairman: Mr. Howe?

Mr. Howe: I have an important question I would like to ask in connection with this Food and Drug Act, and it arises out of a speech made by Mr. Munro in connection with Food and Drug. At page 11 of one of his speeches it says:

The Food and Drug Regulations relating to drug notification require that a manufacturer must provide, within 30 days after the drug is first sold, information on its name, the purpose for which it is recommended, a quantitative list of the medicinal ingredients and the recommended dosage.

[Interpretation]

Or cette modification «contredit les dispositions» de l'article 3.

Par conséquent, je déclare la modification non recevable.

L'article 5 est-il réservé?

M. Rynard: Comment pouvez-vous adopter l'article 5 quand...

Le président: J'ai dit: l'article 5 est-il réservé?

Une voix: J'allais suggérer que si vous passez l'article 5, vous remettiez l'article 1 en discussion.

Le président: Non, j'ai dit réservé.

M. Rynard: Non pas adopté, mais réservé.

Mme MacInnis (Vancouver-Kingsway): J'ai plusieurs modifications à vous proposer, et si vous n'avez pas le temps maintenant, je suis prête à les proposer n'importe quand.

Le président: Nous aurons peut-être plus de temps pour étudier la question lors de la prochaine réunion...

Mme MacInnis (Vancouver-Kingsway): D'accord.

Le président: ... parce que nous devons tenir une réunion du comité directeur à ce sujet, avant d'adopter l'article 5.

M. Watson: On a parlé de conséquences économiques, et du genre d'études que quelqu'un pourrait faire; puis-je suggérer...

Le président: Oui, si le Comité est d'accord que nous le fassions maintenant. Mais il serait beaucoup plus simple de soumettre cela au comité directeur.

M. Watson: D'accord.

Le président: Monsieur Howe.

M. Howe: J'ai une question à poser au sujet de la Loi sur les aliments et drogues. Je me réfère à un discours fait par l'honorable M. Munro en ce qui concerne les aliments et drogues.

Les règlements des aliments et drogues relatifs à l'avis de conformité exigent qu'il fournisse, dans les 30 jours qui suivent la mise en vente d'un produit, des renseignements sur le nom de ce produit, sur l'usage pour lequel il est recommandé, sur les ingrédients médicaux qui le composent et sur sa posologie.

[Texte]

: This to me is rather confusing in view of the fact that in 30 days a lot of this particular drug could be sold. This statement was that:

The Food and Drug Regulations relating to drug notification require that a manufacturer must provide, within 30 days after the drug is first sold,...

I would think there would be regulations saying that this drug should not be sold at all until such time as they have complied with Food and Drug regulations. Is this a fact, this statement that is made by the Minister?

Dr. Chapman: Mr. Chairman, the statement is quite correct, and here we get into a legal problem relating to the conditions of sale that can be applied under criminal law. And our legal counsel has indicated that there might be a problem here with regard to requiring that all this information be submitted to us prior to sale. We certainly have full authority to make regulations after the product is offered for sale. This is really what this particular regulation pertaining to drug notification reflects.

Mr. Howe: Does this pertain to drugs that are being brought in, imported? Is it going to pertain to drugs that are being brought in from other countries? Will they be allowed to be sold for 30 days; on the market for 30 days and sold before any action is taken by the Food and Drug Directorate?

• 1225

Dr. Chapman: In the case of imported drugs, Mr. Chairman, of course we have much better control than we do of drugs on the Canadian market produced domestically. Inasmuch as these drugs have to pass through Customs, we have an arrangement with Customs officials that they will draw to our attention these drugs that are being imported into Canada. This gives us an opportunity to review the formulation of these drugs, and if necessary, carry out any laboratory examination or other examination that is required before these drugs actually come into the country.

If they do not meet the requirements of the Food and Drugs Act and regulations they are not allowed into the country. However, I should add that the drug notification requirements, of course, apply to imported drugs as well as to drugs domestically produced.

Mr. Howe: You referred to the fact that your legal counsel said it was going to be

[Interprétation]

Mais, cela est un peu étonnant parce que dans les 30 jours de la mise en vente, une grande quantité de ces médicaments pourrait se vendre. Le discours dit:

Les règlements des aliments et drogues relatifs à l'avis de conformité exigent d'un fabricant qu'il fournisse, dans les 30 jours qui suivent la mise en vente...

Je pense que ces médicaments ne devraient pas être mis en vente avant que ces détails ne correspondent aux exigences des règlements. La déclaration du ministre décrit-elle la réalité?

M. Chapman: Monsieur le président, la déclaration est tout à fait juste et nous avons ici un problème juridique se rapportant aux conditions de vente, d'après la loi criminelle.

Notre conseiller juridique a indiqué qu'il pourrait y avoir un problème légal si on demandait que tous les détails nous soient soumis avant la mise en vente. Nous avons pleine autorité de faire des règlements après que le produit est mis en vente. Et, c'est ce que reflète cette disposition au sujet des renseignements requis.

M. Howe: Est-ce que cela va s'appliquer aussi aux médicaments importés? Est-ce qu'on va permettre que ces produits se vendent pendant 30 jours avant que la Direction des aliments et drogues puisse agir?

M. Chapman: Dans le cas des médicaments importés, nous avons un bien meilleur contrôle que sur les drogues domestiques, nous avons d'autres moyens de contrôle. Ces drogues doivent passer par la douane, et, le Service des douanes doit nous avertir. Cela nous donne l'occasion de faire des tests de laboratoire ou autres si nécessaire, avant que ces médicaments n'entrent au pays.

Si les conditions des règlements ne sont pas remplies, on ne permet pas à ces médicaments d'entrer au pays. Cependant, je devrais ajouter que le programme d'avis de conformité s'applique aux produits importés aussi bien qu'aux produits fabriqués au Canada.

M. Howe: Vous avez parlé du fait que votre conseiller juridique vous avait dit que les

[Text]

difficult for the manufacturer to provide you with enough material.

Dr. Chapman: No, sir. I probably should refer this question to the Minister, but the problem relates to criminal law and what we can require under criminal law as a condition of sale. If we could say without any shadow of doubt that we must have all this information before the drug is placed on the market, otherwise it would represent a hazard to health, then we would have this authority. But this is not the case.

As a matter of fact, these drug notification regulations went into effect only in 1966. Prior to that time there was no requirement for drug notification whatever. Yet the record would indicate that there have been very few cases in Canada where drugs have been sold which represented a significant hazard to health.

Mr. Foster: Mr. Chairman, I am a new member on the Committee and I am not familiar with the exact procedure. We have only Clause 5 left. When this is carried, the bill is referred back to the House, is this correct? Well, what are we waiting for then? Why do we not hear the rest of these amendments and then move on to see whether Clause 5 will carry or not? I am asking for clarification.

The Chairman: Due to a previous commitment the Chair has made towards the Committee here, I think it is better if we proceed the way we are proceeding right now.

Mr. Foster: What way are we proceeding right now?

The Chairman: Well, we stood Clause 5. So that means we will have another meeting on Clause 5.

Mr. Foster: Yes, I understand the steering committee...

The Chairman: Not the steering committee, the Committee as a whole.

Mr. Foster: What commitment do you have to the Committee?

The Chairman: Were you here the last time?

Mr. Foster: I was not at the very last.

The Chairman: Well, I will talk to you after then.

Mr. Foster: Thank you.

[Interpretation]

fabricants éprouveraient des difficultés à vous donner les renseignements nécessaires.

M. Chapman: Ce n'est pas ce que j'ai dit. Je devrais peut-être renvoyer cette question au ministre, mais la question se rapporte à la loi criminelle et à ce que nous avons le droit d'exiger d'après la loi comme condition de vente. Si nous pouvions dire sans l'ombre d'un doute que nous devons obtenir tous ces renseignements avant que le médicament ne soit mis sur le marché, autrement, cela représenterait un danger pour la santé, nous aurions le droit d'agir.

Mais, tel n'est pas le cas. De fait, ce règlement au sujet des avis de conformité n'est entré en vigueur qu'en 1966. Avant cela, il n'y avait aucune disposition exigeant l'avis de conformité. Dans le passé, il y a eu très peu de cas où les drogues vendues au Canada ont présenté des dangers pour la santé.

M. Foster: Monsieur le président, il nous reste seulement l'article 5; et lorsque cet article sera adopté, le bill sera renvoyé à la Chambre des communes, c'est bien cela? Eh bien! Qu'attendons-nous? Pourquoi ne pas entendre les autres modifications et ensuite voir si l'article 5 peut être adopté ou non? J'aimerais avoir des renseignements.

Le président: Mais, à cause d'engagements préalables envers le comité, je pense que le président devrait continuer de procéder de la façon dont nous procédons en ce moment.

M. Foster: Qu'est-ce que nous faisons en ce moment?

Le président: Nous avons réservé l'article 5. Cela signifie que nous tiendrons une autre réunion pour l'article 5 en particulier.

M. Foster: Je comprends que le comité directeur...

Le président: Pas le comité directeur, le Comité de la Santé, du Bien-être social, et des Affaires sociales.

M. Foster: Mais, quels sont vos engagements envers le comité?

Le président: Étiez-vous ici la dernière fois?

M. Foster: Non, je n'étais pas ici à la toute dernière séance.

Le président: Je vous en parlerai après la réunion.

M. Foster: Merci.

[Texte]

Mr. Basford: Mr. Chairman, I presume the reason for standing Clause 5 is to allow for witnesses to appear. I would like to know, if we are standing Clause 5 now, whether or not the Committee has finished with me and my officials. I see you are indicating no.

The Chairman: Clause 5 relates to food and drugs.

Mrs. MacInnis (Vancouver-Kingsway): Mr. Chairman, for clarification as there seems to be some confusion, is not the reason we are standing this due to the fact that the Steering Committee has to meet once more before we can finish off the discussion on the Bill?

The Chairman: It is because we did not come to any specific conclusion.

Mr. Rynard: Mr. Chairman, I have one question to ask. Would it not be proper and right to have the Minister of National Health and Welfare appear before this Committee? He has offered to appear. Would it not be fit and proper that he appear?

The Chairman: Let us discuss that at the Steering Committee. Mr. Watson?

Mr. Watson: Before you adjourn, I think you have made it clear to the Committee, Mr. Chairman, that the economic effects question which has been discussed this morning will be considered by the Subcommittee for purposes of obtaining witnesses to testify on this subject. Am I correct in assuming that your Subcommittee is going to discuss the types of witness you should bring to the Committee?

• 1230

The Chairman: This has already been discussed, and as we have had time this morning to consider recommendations and suggestions to your Committee for approval or otherwise, we are going to have a meeting of the Steering Committee to consider this morning's discussion.

Mr. Basford: Mr. Chairman, I am in the hands of the Committee, of course, but my officials and I would find it very helpful to know what possible amendments were coming.

Mrs. MacInnis (Vancouver-Kingsway): May I suggest that it is not the amendments that are holding up this Committee. As has been made clear, the Steering Committee has to meet again before we can finish with the Bill. It is not the amendments that are holding us up.

[Interprétation]

M. Basford: Monsieur le président, je crois que la raison pour laquelle nous avons réservé l'article 5 c'est pour nous permettre d'entendre des témoins. J'aimerais savoir, si cet article est réservé, si nous pouvons nous retirer.

Le président: L'article 5 se rapporte aux aliments et drogues.

Mme MacInnis (Vancouver-Kingsway): Il y a ici confusion. Est-ce que la raison pour laquelle nous réservons l'article 5 serait que le comité directeur doit se réunir encore une fois avant que nous puissions adopter le Bill?

Le président: C'est parce que nous ne sommes pas arrivés à une conclusion précise.

M. Rynard: Une question. Ne serait-il pas bien que le ministre de la Santé nationale et du Bien-être social vienne témoigner devant ce Comité? Il s'est offert pour venir. Est-ce que cela ne serait pas bien?

Le président: C'est une question que nous allons discuter à la réunion du comité directeur. Monsieur Watson?

M. Watson: Avant d'ajourner, je pense que vous avez dit très clairement que la question des effets économiques, que nous avons discutée ce matin, sera étudiée par le sous-comité dans le but de faire venir des témoins pour témoigner sur ce sujet. Est-ce que j'ai raison de croire que votre sous-comité va décider quels seront les témoins qui viendront devant le Comité?

Le président: On a déjà parlé de cela. Comme des suggestions et des recommandations ont été faites ce matin, nous devons tenir une autre réunion du comité directeur.

M. Basford: Monsieur le président, mes fonctionnaires et moi-même trouvons qu'il serait très utile de savoir quelles sont les modifications que vous allez proposer.

Mme MacInnis (Vancouver-Kingsway): Ce ne sont pas les modifications qui retardent le travail du Comité. Le comité directeur doit se réunir encore une fois avant que nous puissions terminer l'étude du Bill. Par conséquent, ce ne sont pas les amendements qui retardent l'étude du Bill.

[Text]

Mr. Basford: I was not suggesting that. I was suggesting that it would be very helpful to my officials and me if we knew now what the amendments were.

Mrs. MacInnis (Vancouver-Kingsway): I believe that the Law Clerk, Dr. Ollivier, has a copy of all those amendments.

Mr. Watson: Mr. Chairman, you have asked me to refer some of my questions to the Subcommittee. I want to know what the Subcommittee is committed to. Are you committed to opening up the question of the economic effects of this Bill? It was on this basis that I agreed to forego my questioning. Is this correct?

The Chairman: Mr. Watson, it is too bad that you were not present at our earlier meetings because this question has been discussed and, as a matter of fact, over-discussed. If you want to make a representation to the Steering Committee, put it to me and I will pass it on to the Steering Committee. The question of witnesses has been discussed and a motion was accepted by this Committee on January 28 stating that no additional evidence would be heard because the subject had been fully covered in previous sessions and that unless good and valid arguments were given that there was brand-new evidence, our Committee should not hear any new witnesses.

Mr. Watson: Mr. Chairman, we heard from Mr. Henry this morning that the Department did not look into the economic effects of any of the items he mentioned in his declaration of February 7, 1967, before the Harley Committee. He made it very clear that no study and no investigations have been made. This, Mr. Chairman, is the new factor which you were talking about.

The Chairman: We will discuss it later on. The meeting is adjourned until 3.30 p.m. this afternoon, when Mr. Marcel Ouimet of the Canadian Broadcasting Corporation will speak to us on the advertising of tobacco and cigarettes on radio and television. Same room, less the smoke-screen.

[Interpretation]

M. Basford: Madame MacInnis, j'ai tout simplement dit que ce serait très utile de savoir quels seraient les amendements.

Mme MacInnis (Vancouver-Kingsway): Je crois que M. Ollivier, légiste et conseiller parlementaire, a une copie de tous ces amendements.

M. Watson: Monsieur le président, vous m'avez demandé de déférer certaines de mes questions au sous-comité. J'aimerais savoir ce que vous comptez faire au sous-comité. Allez-vous ouvrir toute la question des effets économiques du Bill? C'est la raison pour laquelle j'ai consenti à remettre à plus tard mes questions. Est-ce exact?

Le président: Monsieur Watson, c'est dommage que vous ne soyez pas venu aux séances précédentes, car toutes ces questions ont été discutées en long et en large. Si vous voulez présenter des questions au comité directeur, présentez-les moi et je transmettrai le tout au comité directeur. La question des témoins a été discutée et nous avons une résolution qui a été adoptée par le Comité, le 28 janvier, dans laquelle on dit qu'aucun nouveau témoin ne sera convoqué, à moins qu'on ait une raison valable d'entendre de nouveaux témoignages.

M. Watson: Monsieur le président, M. Henry a dit, ce matin, que le ministère n'avait étudié la question des effets économiques dans aucun des articles mentionnés dans sa déclaration du 7 février 1967 devant la Commission Harley. Il a bien signalé qu'aucune étude et qu'aucune enquête n'avaient été faites. Monsieur le président, c'est là le nouveau facteur dont vous avez parlé.

Le président: Nous allons en discuter plus tard.

La réunion est ajournée jusqu'à 15h.30, cet après-midi, alors que nous entendrons M. Marcel Ouimet, de la Société Radio-Canada, qui vas nous parler des effets de la publicité de la cigarette et du tabac à la télévision et à la radio. Nous nous retrouverons dans la même pièce, sans écran de fumée toutefois.

OFFICIAL BILINGUAL ISSUE

FASCICULE BILINGUE OFFICIEL

HOUSE OF COMMONS

CHAMBRE DES COMMUNES

First Session

Première session de la

Twenty-eighth Parliament, 1968-69

vingt-huitième législature, 1968-1969

STANDING COMMITTEE
ON

COMITÉ PERMANENT
DE LA

HEALTH, WELFARE AND
SOCIAL AFFAIRS

SANTÉ, DU BIEN-ÊTRE SOCIAL
ET DES AFFAIRES SOCIALES

Chairman

M. Gaston Isabelle

Président

MINUTES OF PROCEEDINGS
AND EVIDENCE

PROCÈS-VERBAUX ET
TÉMOIGNAGES

No. 15

THURSDAY, FEBRUARY 6, 1969

LE JEUDI 6 FÉVRIER 1969

Respecting the subject-matter of

Concernant la question de fond des

Bill C-39, An Act to amend the Broadcast-
ing Act (cigarette advertising).

Bill C-39, Loi modifiant la Loi sur la radio-
diffusion (Annonces de cigarettes).

Bill C-45, An Act to restrain the use of
Tobacco.

Bill C-45, Loi visant à restreindre l'usage
du tabac.

Bill C-53, An Act to amend the Food and
Drugs Act.

Bill C-53, Loi modifiant la Loi des aliments
et drogues.

Bill C-134, An Act to amend the Tobacco
Restraint Act.

Bill C-134, Loi modifiant la Loi sur la ré-
pression de l'usage du tabac chez les ado-
lescents.

Bill C-137, An Act to amend the Broad-
casting Act (Prohibition of cigarette
advertising).

Bill C-137, Loi modifiant la Loi sur la radio-
diffusion (Interdiction de réclames de ci-
garettes).

Bill C-147, An Act to control the tar con-
tent and nicotine level of cigarettes.

Bill C-147, Loi ayant pour objet de contrôler
la teneur en goudron et en nicotine des
cigarettes.

WITNESSES—TÉMOINS

(See Minutes of Proceedings)

(Voir Procès-verbaux)

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STANDING COMMITTEE ON
HEALTH, WELFARE AND
SOCIAL AFFAIRS

Chairman
Vice-Chairman

and Messrs.

Boulanger,
Forget,
Fortin,
³ Foster,
Gendron,
Godin,
Haidasz,

M. Gaston Isabelle
Mr. Steve Otto

Howe,
¹ Knowles (Norfolk-
Haldimand),
Mrs. MacInnis (M^{me}),
² Mather,
McBride,

(Quorum 11)

La secrétaire du Comité:
Gabrielle Savard
Clerk of the Committee.

COMITÉ PERMANENT DE LA SANTÉ,
DU BIEN-ÊTRE SOCIAL ET
DES AFFAIRES SOCIALES

Président
Vice-président

et Messieurs

Monteith,
Ritchie,
Robinson,
Rochon,
Thomas (Maisonneuve),
Yewchuk—20.

Pursuant to S.O. 65(4) (b)
¹ Replaced Mr. Rynard on February 6
² Replaced Mr. Saltsman on February 6
³ Replaced Mr. Allmand on February 6

Note: Issues Nos. 11, 12, 13 and 14 concern Bill C-102.

Conformément à l'article 65(4) (b) du Règlement
¹ Remplace M. Rynard le 6 février
² Remplace M. Saltsman le 6 février
³ Remplace M. Allmand le 6 février

Les fascicules 11, 12, 13 et 14 concernent le bill C-102.

MINUTES OF PROCEEDINGS

THURSDAY, February 6, 1969.
(18)

(Text)

The Standing Committee on Health, Welfare and Social Affairs met this day at 3.45 o'clock p.m. The Chairman, Mr. Gaston Isabelle, presided.

Members present: Mrs. MacInnis and Messrs. Boulanger, Forget, Foster, Gendron, Haidasz, Howe, Isabelle, Knowles (*Norfolk-Haldimand*), Mather, McBride, Monteith, Robinson, Rochon, Thomas (*Maisonneuve*), Yewchuk—(16).

Other Members present: Mr. Yanakis.

Witnesses: Representing the Canadian Broadcasting Corporation: Messrs. Marcel Ouimet, Vice-Chairman, Programming; O. J. W. Shugg, Director of Commercial Sales Policy and planning; and Robert Switallo, Assistant Director, Sales Policy.

The Committee resumed consideration of the subject-matter of Bills C-39, C-45, C-53, C-134, C-137 and C-147.

The Chairman presented the Fourth Report of the Subcommittee as follows:

The Subcommittee recommends:

1. That experts from other countries be not called at the present time;
2. That the suggestion of the Ad Hoc Committee of the Canadian Tobacco Manufacturers to present a collective brief be accepted, provided that individual companies are prepared to appear to answer any questions that the Committee may wish to raise.
3. That a letter be sent to the Premier of each Province inviting the Provinces to present their views to the Committee if they so wish; and that Labour Unions and the Ontario To-

PROCÈS-VERBAL

Le JEUDI 6 février 1969
(18)

(Texte)

Le Comité permanent de la Santé, du Bien-être social et des Affaires sociales se réunit aujourd'hui à 3 h. 45 de l'après-midi, sous la présidence de M. Gaston Isabelle.

Présents: M^{me} MacInnis, MM. Boulanger, Forget, Foster, Gendron, Haidasz, Howe, Isabelle, Knowles (*Norfolk-Haldimand*), McBride, Mather, Monteith, Robinson, Rochon, Thomas (*Maisonneuve*), Yewchuk—(16).

Autre député présent: M. Yanakis.

Témoins: Représentant la Société Radio-Canada: MM. Marcel Ouimet, vice-président aux programmes; O. J. W. Shugg, directeur de la Politique commerciale, et M. Robert Switallo, directeur adjoint de la Politique commerciale.

Le Comité reprend l'étude de la question de fond des bills C-39, C-45, C-53, C-134, C-137 et C-147.

Le Président présente le Quatrième Rapport du Sous-comité comme suit:

Le Sous-comité recommande:

1. Qu'on s'abstienne de faire venir des témoins de pays étrangers pour le moment;
2. Que la suggestion du Comité Ad Hoc des fabricants canadiens de tabac de présenter un mémoire collectif soit reçue favorablement, à condition que les compagnies soient disposées à comparaître individuellement et à répondre aux questions des députés, si le Comité le juge à propos;
3. Qu'une lettre soit adressée aux Premiers Ministres provinciaux pour inviter les Provinces à faire connaître leur point de vue au comité si elles le désirent; qu'une invitation

bacco Growers Association be also contacted.

4. That the Chairman use his discretion on the question of priority with regard to the references received from the House. A priority was established as follows:

- (a) Government Bills
- (b) Estimates
- (c) Subject-matter of Private Members' Bills.

On motion of Mr. Forget, seconded by Mr. Howe, the Fourth Report of the Subcommittee was adopted.

The Chairman introduced Mr. Ouimet and the other officials of the Corporation.

A copy of the CBC Commercial Acceptance Policy on the subject of advertising for Tobacco Products was distributed to the Members.

Mr. Ouimet read a prepared statement and was questioned thereon. Mr. Shugg and Mr. Switallo gave further information.

The Chairman thanked Mr. Ouimet and his associates for their presentation.

At 5.20 o'clock p.m. the Committee adjourned to the call of the Chair.

soit également envoyée aux syndicats et à l'Association des producteurs de tabac de l'Ontario.

4. Que le président décide de la priorité à accorder aux items déferés par la Chambre. Cette priorité a été établie comme suit:

- a) Bills du Gouvernement;
- b) Prévisions budgétaires;
- c) Questions de fond des bills des députés.

Sur la proposition de M. Forget, appuyé par M. Howe, le Quatrième Rapport du Sous-comité est adopté.

Le président présente M. Ouimet et les autres représentants de la Société.

Un exemplaire du Code publicitaire de Radio-Canada relatif aux tabacs est distribué aux députés présents.

M. Ouimet lit un court exposé et est interrogé; MM. Shugg et Switallo répondent également aux questions des membres du Comité.

Le Président remercie M. Ouimet et les autres officiers de la Société Radio-Canada des renseignements fournis au Comité.

A 5 h. 20 de l'après-midi le Comité s'ajourne à l'appel du Président.

La secrétaire du Comité,
Gabrielle Savard.
Clerk of the Committee.

[Text]

EVIDENCE

(Recorded by Electronic Apparatus)

Thursday, February 6, 1969.

• 1545

The Chairman: Lady and gentlemen, first of all I would like to inform you that the Subcommittee on Agenda and Procedure met on January 21 and again today to discuss the program and procedure with regards to the subject matter of bills on tobacco and cigarette smoking. The Subcommittee presents its full report as follows:

(See Minutes of Proceedings)

I must point out that we have already asked about 50 witnesses to appear before the Committee. Are there any discussions on the report?

Mr. McBride: Mr. Chairman, are the 50 from these groups that you have mentioned?

The Chairman: May I have a motion for the adoption of the report?

Moved by Mr. Forget.

That the full report of the Subcommittee on Agenda and Procedure be adopted.

Carried.

The Chairman: It is our pleasure to have before us today Mr. Marcel Ouimet of the CBC.

He is accompanied by Mr. O. J. W. Shugg on his right, Director of Commercial Sales Policy and Planning, and also by Mr. Robert Switallo, his assistant.

Mr. Ouimet will speak on the subject of tobacco and cigarette advertising, and you will have an opportunity to ask questions after his presentation. Monsieur Ouimet.

1549

M. Marcel Ouimet (vice-président aux programmes, Société Radio-Canada): Monsieur le président, madame, je vous remercie de votre accueil et de l'occasion qui m'est offerte d'expliquer, dans toute la mesure du possible, la politique de la Société Radio-Canada en matière de réclame pour la cigarette et le tabac. J'ai devant moi un résumé.

[Interpretation]

TÉMOIGNAGES

(Enregistrement électronique)

Le jeudi 6 février 1969

Le président: Madame et messieurs, tout d'abord, je voudrais vous informer que le sous-comité sur les programmes et la procédure s'est réuni le 21 janvier et encore aujourd'hui pour discuter du programme et de la procédure en ce qui concerne le sujet du bill sur la cigarette et le tabac. Il présente son 4ième rapport comme suit:

(Voir le procès-verbal)

Je voudrais vous faire remarquer que nous avons déjà invité environ 50 témoins à comparaître devant le Comité. Est-ce que vous avez quelque chose à dire au sujet du rapport?

M. McBride: Monsieur le président, est-ce que ces 50 témoins appartiennent aux groupes que vous avez mentionnés?

Le président: Est-ce que quelqu'un veut faire une motion pour l'adoption du rapport?

Proposé par M. Forget:

Que le rapport complet du sous-comité sur les programmes et la procédure soit adopté.

Adopté.

Le président: Nous avons le plaisir d'accueillir aujourd'hui M. Marcel Ouimet, de la Société Radio-Canada. Il est accompagné par M. O. J. W. Shugg à sa droite, directeur de la Politique commerciale et du Programme de vente, ainsi que par M. Robert Switallo, son adjoint.

M. Ouimet parlera de la publicité sur les tabacs et la cigarette et vous aurez l'occasion de lui poser des questions après son exposé. Monsieur Ouimet.

Mr. Marcel Ouimet (Vice-Chairman, Programming, Canadian Broadcasting Corporation): Mr. Chairman, madam, I thank you for your kind greeting and for the opportunity to explain, in so far as possible, the policy of the CBC with regard to advertising for cigarettes and tobacco. I have here a brief.

[Text]

Les considérations qui, dans le passé, nous ont inspirés nous inspirent encore.

Je me permettrai, monsieur le président, d'utiliser la langue seconde puisque la Société, depuis de longues années, dans le domaine de la réclame, a fonctionné très fortement en langue anglaise. Nous sommes, à l'heure actuelle, à réviser nos politiques commerciales, comme toutes nos politiques de programmes, en vue de devenir à jour comme tout le monde, comme toutes les agences culturelles du gouvernement, et d'être un modèle de bilinguisme à travers le pays.

Mr. Chairman, it is basic to the Corporation's position with respect to cigarette advertising that since cigarettes can be legally sold to the Canadian consumer they can also be legitimately advertised but only if such advertising takes into account the whole problem of smoking and health.

Under the Broadcasting Act, and all of the Broadcasting Acts which preceded it, there are no specific restrictions relating to the advertising of cigarettes. To my knowledge, the only standards applicable to broadcast advertising in Canada are those of the Canadian Tobacco Industry's Advertising Code adopted in 1963 and the Corporation's Commercial Acceptance Standards. We have adopted all of the points contained in the Industry's code as a good statement of how cigarette advertising should be directed to the persuasion of smokers to change brands and not for the proselytizing of non-smokers and young people.

In addition, we have added certain restrictions and elaborated on some points to emphasize the particular interpretation we give to these standards. To illustrate, under the Broadcasting Act there are no provisions for the control of cigarette advertising as exists for foods, drugs, cosmetics and therapeutic devices. All advertising for any product to which the Proprietary of Patent Medicine Act or the Food and Drugs Act applies must be approved by the Department of National Health and Welfare. In recognizing the problem of smoking and health against this background, the Corporation has tried to exercise the same kind of control over cigarette advertising claims as the Broadcasting Act provides for foods and drugs. It is for this reason that we will permit no claims that relate specifically to health to be included in cigarette advertisements.

Statements concerning filter performance in relation to tar and nicotine are acceptable but these must be factual only and must not be made on a comparison basis with other

[Interpretation]

The considerations by which we have been inspired in the past and which still inspire us...

Mr. Chairman, I will take the liberty of using the second language, since the CBC for many years in dealing with advertising has operated mostly in English. We are at the present time revising our commercial policies as well as our program policies in order to be up to date like everyone else, like all the cultural agencies of the government and to be a model of bilingualism across Canada.

M. le président, la position de la Société au sujet de la publicité sur la cigarette est basée sur le fait que puisque les cigarettes peuvent, légalement, être vendues, elles peuvent également faire l'objet d'une certaine publicité à la condition que cette publicité tienne compte du problème général de la santé et du tabac. La Loi sur la radiodiffusion et toutes les Lois sur la radiodiffusion qui l'ont précédée, ne prévoient pas de restriction spéciale au sujet de la publicité sur la cigarette. Les seules normes qui s'appliquent, à mon avis, sont celles que contient le code publicitaire de l'industrie canadienne du tabac et celles du code publicitaire de Radio-Canada; nous n'avons pas adopté tous les points contenus dans le code de l'industrie comme étant une bonne interprétation de la façon dont la publicité doit se faire sur la cigarette, mais dans le but de persuader le fumeur à changer de marque et non pas pour attirer de nouveaux fumeurs surtout chez les jeunes gens.

De plus, nous avons ajouté certaines restrictions et développé certains points pour mettre en valeur l'interprétation particulière que nous donnons à ces normes. Un exemple: d'après les Lois sur la radiodiffusion, il n'y a pas de restriction sur la publicité de la cigarette comme cela existe dans le domaine de l'alimentation, des drogues et des cosmétiques etc. Toute la publicité dans laquelle s'appliquent les Lois sur la médecine et les médicaments, et les aliments et drogues doit être approuvée par le ministère de la Santé. C'est pourquoi, la Société a essayé d'exercer le même genre de contrôle sur les affirmations au sujet de la cigarette que le contrôle exercé par la Loi sur la radiodiffusion en ce qui concerne l'alimentation et les drogues. C'est pour cette raison que nous n'acceptons pas qu'aucune déclaration et les drogues. C'est santé soit incluse dans la publicité sur la cigarette.

Les déclarations au sujet de la performance des filtres en ce qui concerne le goudron et la nicotine sont acceptables, mais elles doivent être basées sur des faits et ne doivent conte-

[Texte]

brands. We have no intention of being party to a renewal of the "Tar Derby" which plagued the United States in the fifties.

While it could be argued that to accept any claim concerning the efficacy of filters is a concession to the Industry, it was our feeling that statements of filter performance, properly controlled can, in fact, provide an important service to smokers by enabling them to select those cigarettes which are low in tar content and, in a negative sense, (from the advertiser's point of view at least) point out the health hazard of cigarettes to the smoker.

In summary, the Corporation policies governing cigarette advertising are intended to limit such advertising to brand advertising only, to prevent the use of "tar and nicotine" statistics in comparisons and to ensure that such advertising is not designed to appeal to adolescents. When you have had a chance to glance at the actual regulations which have been distributed, you will see exactly what I mean by this.

The question of smoking and health in relation to radio and television advertising is, of course, a matter of continuing concern for the Corporation. It is for this reason that the standards governing cigarette commercials are being assessed on a continuous basis.

The Corporation has in the past given consideration to the effects of withdrawing completely from cigarette advertising but has come to the conclusion that the isolation of the CBC in this field would do little actually to modify the attitudes to cigarette smoking.

• 1555

It is generally felt that if the Corporation decided to ban cigarette advertising, cigarette advertisers would almost certainly increase their advertising purchases on competing stations or in newspapers or on billboards. The CBC's affiliated private stations could also continue to book cigarette advertising. This would mean that cigarette commercials would be scheduled adjacent to CBC programs in station breaks, between CBC programs and even in station breaks within CBC programs. In addition, affiliated private stations would be able to schedule cigarette commercials in those CBC network programs made available through them for local sale. Only in the case of CBC owned stations would there be a complete ban on cigarette advertising. This, in our opinion, would have a relatively small effect on the total impact of radio and television advertising.

[Interprétation]

nir aucune comparaison avec les autres marques. Nous n'avons pas l'intention de nous associer à cette «course au goudron» survenue aux États-Unis dans les années 50.

Bien que l'on puisse dire qu'accepter les déclarations sur l'efficacité des filtres est une concession à l'industrie, nous avons pensé que ces déclarations, si elles sont bien contrôlées, peuvent rendre un service aux fumeurs en leur permettant de choisir ces cigarettes dont le contenu en goudron est peu élevé et, d'une façon négative, en leur indiquant les dangers que la cigarette peut représenter pour le fumeur.

En résumé, la politique de la société au sujet de la publicité sur la cigarette veut limiter la publicité aux marques seulement, voir à ce que les chiffres relatifs au contenu en goudron et nicotine des cigarettes ne soient pas utilisés en comparaison avec celui d'autres cigarettes, et voir à ce que cette publicité ne soit pas faite pour attirer les adolescents. Lorsque vous aurez eu la chance de jeter un coup d'œil sur les règlements que nous avons établis, et dont vous avez reçu un exemplaire, vous comprendrez exactement ce que je veux dire. Cette question du tabac et de la santé, par rapport à la publicité à la radio et à la télévision intéresse beaucoup la Société. C'est pour cette raison que les normes qui régissent la publicité sur la cigarette sont sans cesse réévaluées.

La Société, dans le passé, a étudié la possibilité de se retirer complètement du domaine de la publicité sur la cigarette mais elle en est venue à la conclusion qu'une telle décision n'aurait pas grand effet sur l'attitude du public à l'endroit de la cigarette.

Nous croyons que, si la Société décidait d'interdire la publicité sur la cigarette, les agences de publicité consacraient fort probablement plus d'argent à cette publicité sur les ondes des stations rivales, dans les journaux et sur les panneaux-réclames. Les stations affiliées à Radio-Canada pourraient également continuer à accepter de la publicité sur la cigarette. Ce qui signifie que de tels messages publicitaires pourraient être accolés à des émissions de Radio-Canada, insérés entre des émissions de Radio-Canada. De plus, les stations privées affiliées à Radio-Canada pourraient insérer leur publicité sur la cigarette dans des émissions que Radio-Canada leur a vendues. Seules les stations qui sont la propriété de Radio-Canada ne diffuseraient aucune publicité sur la cigarette. Ce qui, à notre avis, n'aurait qu'un effet minime.

[Text]

The decision to continue to accept cigarette advertising on CBC stations was taken on the basis of this background. It was felt that unless the broadcast media as a whole gave up cigarette advertising, there would be no significant change in the impact of cigarette advertising as such in the broadcasting media.

• 1556

Monsieur le président, voilà ce que j'ai à dire comme déclaration initiale. Mes collègues et moi sommes parfaitement prêts à répondre à toutes les questions que messieurs les députés voudront bien nous poser.

The Chairman: Thank you, Mr. Ouimet. The meeting is now open for questions. Mr. McBride.

Mr. McBride: Thank you, Mr. Chairman. I have just a few questions of clarification. I assume this sheet is before all of us and, therefore, I will go to Item No. 2 on the sheet entitled "Advertising for Tobacco Products".

It seems to me that every young person, every child, every adolescent wants, ipso facto or automatically, to grow up to be an adult who is desirable, attractive, outgoing and successful and therefore it is very difficult for me to understand Item No. 2. How can you have any sort of advertising that shows attractive adults water skiing or on skidoos or some such things and then say that it is not designed to appeal to children and adults? It is just that you do not use the children in your set, I take it?

Mr. Ouimet: This is quite right and I think Mr. Switallo could expound on this, but the actual purpose, as I explained in the notes I just read some moments ago, is not to push young adults or adolescents or children to imitate the veritable adults by smoking. We have to recognize that smoking, I suppose, to a very great extent is an adult addiction. I stand here as one of the prime examples.

I think if the commercials are so designed as to appeal to young people, you are more liable to have them acquire the habit than if the people represented as smokers are people with whom they have a generation gap, and in our day and age today, the generation gap, as we all know, is pretty rapidly sensed.

Mr. McBride: Mr. Chairman, in Item No. 9, I assume that the emphasis there is on the words "is essential" because otherwise the whole thrust of advertising is automatically, shall we say, helpful. You are drawing a fine line here and though it may help you to be

[Interpretation]

La décision de continuer à accepter la publicité sur la cigarette, à Radio-Canada, est basée sur ces raisons. Nous avons pensé que, à moins que tous les postes abandonnent cette publicité, son abandon par Radio-Canada n'entraînerait aucun changement d'importance.

Mr. Chairman, this is all I have to say in my opening statement. My colleagues and I are ready to reply to any questions which the members may wish to ask us.

Le président: Merci, monsieur Ouimet. Maintenant vous pouvez poser des questions. Monsieur McBride.

M. McBride: Merci M. le président. Je n'ai que quelques questions à poser. Je suppose que nous avons tous une copie de ce document. Je me réfère donc à l'article 2 de ce «Code relatif aux tabacs». Il me semble que tous les enfants et les adolescents veulent devenir des adultes acceptables, attrayants et heureux et, par conséquent, j'ai peine à comprendre l'article numéro 2. Comment peut-on préparer de la publicité qui montre des gens se livrant à des sports tels que l'auto-neige et le ski nautique et affirmer qu'elle n'est pas conçue pour séduire les enfants et les adultes?

M. Ouimet: M. Switallo pourrait peut-être vous répondre, mais le but, le véritable but de cet article, comme je l'ai expliqué dans les notes que je viens de vous lire, c'est d'éviter de pousser les enfants, les adolescents à imiter les adultes qui fument. Nous devons reconnaître que fumer est un penchant qui se retrouve principalement chez les adultes. J'en suis d'ailleurs moi-même un exemple.

Je crois que si les messages publicitaires étaient conçus pour séduire les jeunes ils contracteraient cette habitude beaucoup plus rapidement que s'il existe un écart de génération entre eux et les fumeurs qu'on leur présente. Et nous savons tous qu'aujourd'hui, les jeunes voient rapidement cet écart de génération.

M. McBride: Je suppose, monsieur le président, qu'à l'article 9, les mots importants sont «il est essentiel» parce qu'autrement la publicité serait automatiquement utile. Fumer peut vous aider à être séduisant, à avoir la vedette et à réussir dans la vie, mais ce n'est

[Texte]

more romantic, prominent, successful and to get on better as a person, it is not absolutely essential. So the emphasis is on the words "is essential", I take it?

• 1600

Mr. Ouimet: I would like Mr. Switallo to answer this one, sir, if I may, as he was, over the years, mostly responsible for the actual wording of this clause.

Mr. McBride: He decides what is essential to romance, I take it?

Mr. Robert Switallo (Assistant Director of Commercial Sales Policy and Planning, Canadian Broadcasting Corporation): Mr. McBride, I wonder if I could answer your last question by going back to point number two. I think you raised a very good point there, because it relates directly to number nine. It is a question of social values that you find in cigarette advertising. The general environment seems to be the good life. And in the good life, manliness, attractiveness to the opposite sex, all of this has played a very important role and it gets you into the area of the purpose of advertising, its information or persuasion, and the proportion that you have of persuasion with your information. When does it become misleading?

As far as cigarettes go, this particular area leads right into the question of smoking and teenagers. You can get commercials that have this hedonistic atmosphere, and by the letter of the policy that we have here they do not—you underline the word—they are not, in fact, essential to romance, prominence, success or personal advancement. But they do tie in to adolescence.

I do not think there is a question of there being any cigarette commercials, as such, that are directed at teenagers or directed at children. It is the question of commercial appeal to them and the emulative effect that they have on children. This is one area that has caused us a great deal of concern, where you draw the line and where you draw the limit.

As I say, we have only turned down one. We have never really run across commercials aimed at young people, and in my experience we have only had one case where we had a commercial that we turned down on those grounds, where the principal actor, the music, the general background, seemed to be teenage oriented. But I do not know what the word is; I guess environment and atmos-

[Interprétation]

pas absolument nécessaire. Donc les mots importants sont «il est essentiel», n'est-ce pas?

M. Ouimet: Je préférerais que Monsieur Switallo réponde à votre question puisqu'il fut, en quelque sorte, responsable de la phraséologie de ces articles.

M. McBride: C'est donc lui qui décide ce qu'il faut pour être séduisant?

M. Robert Switallo (directeur adjoint de la Politique commerciale et du Programme de vente, Société Radio-Canada): Monsieur McBride, je me demande si je peux répondre à votre question en revenant au point n° 2. Il me semble que vous avez soulevé un point très valide qui se rattache directement au paragraphe n° 9. Il s'agit notamment de la question de la valeur sociale dans la publicité pour les cigarettes. Et il semble que ce qui se dégage de l'impression psychologique c'est celle d'une bonne vie, d'attrait, de qualité virile, tout cela joue un rôle très important et vous amène aux objectifs de la réclame, à ses renseignements ou à sa persuasion, et à la proportion de persuasion dans les renseignements. Quand la réclame devient-elle fallacieuse?

En ce qui concerne les cigarettes, cela nous mène directement à la question de l'habitude de fumer, et des adolescents. On a parfois des messages publicitaires qui créent cette atmosphère hédonistique et en raison de la politique qu'on applique ici, vous avez bien souligné les mots, cela n'est peut-être pas essentiel pour être séduisant, avoir la vedette et réussir dans la vie mais ils touchent les adolescents. Et je ne pense pas qu'il soit tellement question de messages publicitaires pour la cigarette, comme tels, qui soient destinés aux enfants ou aux adolescents. Il s'agit plutôt de leur attrait commercial et de leur effet émulateur sur les enfants. C'est quelque chose qui nous préoccupe beaucoup. Où, entre, va-t-on tirer la ligne de démarcation, où va-t-on imposer la limite.

Je le répète, nous n'avons refusé qu'une. Nous n'avons jamais trouvé de messages publicitaires destinés aux adolescents, et à ma connaissance, il n'y a qu'un message publicitaire que nous avons dû rejeter parce que le principal comédien, la musique et toute l'ambiance semblaient être destinés aux adolescents. Mais je ne connais pas le terme; je suppose que les termes, milieu, atmosphère, valeur sociale se

[Text]

phere, social values relate to this thing. What we try to do when we review these commercials is to draw that fine line.

Mr. McBride: Mr. Chairman, I thank the speaker for that answer. Going on, then, to a couple of other questions, would it be accurate to say that the CBC attempts to be neutral in this whole question that is really not so much before the CBC as it is before our society, and attempts to neither condemn nor condone cigarette smoking, but advertise it in such a way that you are simply reflecting what is being done in the society? Would this be an accurate statement?

Mr. Ouimet: Mr. McBride, I would say that the CBC, far from being neutral, has adopted this very restrictive code which does not exist, to my knowledge, on any other network or any other station except CBC stations in Canada. We have adopted it voluntarily. We adopted it, mind you, with the co-operation of cigarette manufacturers, to a very great extent, in 1963 when they came out, as I pointed out, with the industry code. But we have adopted it to the point that literally some accounts went away from CBC airways because we would not accept certain types of commercials as presented to us.

• 1605

Mr. McBride: May I ask why this feeling appeared in the CBC, or is this too complicated a subject?

Mr. Ouimet: I think it is in part—Mr. Shugg could supplement this—it is part and parcel of our whole approach to commercial policy. For many years we had some very numerous restrictions on the type of commercials we would accept, on the type of products that we would accept to advertise. These, as society evolved, have gradually disappeared. I have been long enough with the CBC and so have my colleagues, to remember when it was felt that such products as bathroom tissue and women's undergarments would not be accepted on the CBC.

We have modified this as we felt the temper of society evolved. But in the case of cigarettes, because we did not have any guidelines, for all intents and purposes, notwithstanding the fact that we were all conscious that there might be a hazard because this

[Interpretation]

rattachent à cet objectif. Lorsque nous revisons ces messages publicitaires, il nous faut évidemment tirer cette fine ligne de démarcation.

Mr. McBride: Monsieur le président, je remercie le témoin de cette réponse. Je pense maintenant à deux autres questions. Ai-je raison de dire que Radio-Canada essaie d'adopter une position de neutralité? Ce n'est pas tellement un problème qui se pose à Radio-Canada, mais plutôt à toute la société. Que Radio-Canada essaie peut-être ni de condamner, ni d'excuser l'usage de la cigarette, mais de l'annoncer de façon simplement à refléter ce qui se fait en société? Cette déclaration est-elle juste?

M. Ouimet: Monsieur McBride, je dirais que Radio-Canada, loin d'être neutre, a adopté ce code très restrictif qui n'existe pas, du moins à ma connaissance, sur tout autre réseau, sur tout autre poste, sauf les postes de Radio-Canada au Canada. Nous avons adopté ce code volontairement. Nous l'avons adopté, bien entendu, avec la collaboration des fabricants de cigarettes, en grande partie, en 1963, lorsqu'ils ont adopté, comme je l'ai souligné, un code industriel. Mais nous l'avons adopté à un tel point que littéralement certains annonceurs ont quitté les ondes de Radio-Canada parce que nous refusions d'accepter certaines annonces telles qu'elles étaient présentées.

M. McBride: Puis-je vous demander la raison de cette impression à Radio-Canada, ou est-ce un sujet trop compliqué?

M. Ouimet: Je crois, qu'il l'est en partie (M. Shugg pourrait en dire plus long), c'est une partie intégrale de l'ensemble de notre politique commerciale. Depuis bien des années, nous imposons de nombreuses restrictions aux genres d'annonces que nous acceptons, aux genres de produits que nous acceptons d'annoncer. Au fur et à mesure que la société a évolué, elles ont disparu. Il y a assez longtemps que je travaille à Radio-Canada de même que mes collègues, pour me rappeler de l'époque où on estimait que des produits tels que le papier de toilette et les sous-vêtements de femmes ne devraient pas être annoncés.

Nous avons modifié cette politique au fur et à mesure que la société évoluait. Mais dans le cas de la cigarette, parce que nous n'avions pas de directives, à toutes fins pratiques, en dépit du fait que les gens sont tous au courant de la menace que peut causer la ciga-

[Texte]

has been going on for many years, we voluntarily applied certain rules.

We do not contend, mind you, that these rules are perfect, that they are foolproof, because in the Commercial acceptance department we have no medical experts or other experts to guide us really. But it was voluntary and, in my opinion at least, the corporate view was that we had a responsibility to the public.

Mr. McBride: A specific question. What proportion of your total advertising revenue comes from cigarette advertising?

Mr. Ouimet: The proportion of cigarette advertising in the total revenue at one point was felt to be of some importance. To be brutally frank, at this point, it is not considerable. In fact, we were discussing this, my colleagues and I, this morning, and we were looking up the list of cigarette advertising accounts we have.

In total, I can say that this year we might reap \$700,000 net revenue from cigarette advertising—out of \$29 million net. A year ago or so, it might have been at the level of about \$1,050,000. It has gone down because cigarette advertisers, mind you, now do not buy—I think they are conscious of the present campaign—they do not buy on a 52-week basis as they used to. They place their orders on a 13-week basis or something of the sort. But roughly, on both radio and television, on CBC, it is about \$700,000.

Mr. McBride: Very good. Two other related questions which may or may not come directly under your Department. I, myself, and perhaps the CBC as well, from time to time receive complaints, not about the advertising of cigarettes, but about the prevalence of smoking among TV hosts and interviewers. People make such generalized statements but, you know, they have a guest on, an interesting guest, and he is just enveloped with smoke, and so on. That is sort of an observation, but to draw specific questions out of that, have you received such complaints at the CBC?

Mr. Ouimet: We have complaints, mind you, quite regularly. I was a broadcaster at one point but in the days when we could sit within the four walls of a radio studio and nobody realized whether you smoked or not. I

[Interprétation]

rette. Nous avons volontairement appliqué certains règlements.

Nous ne prétendons pas que ces règlements soient parfaits, car à notre service publicitaire nous n'avons pas d'experts médicaux ou d'autres spécialistes qui puissent vraiment nous donner des directives. C'est volontairement que nous avons adopté ces directives, et, à mon avis, du moins, le point de vue de la Société était que nous avions des responsabilités envers le public.

M. McBride: Question précise. Quelle proportion des recettes totales de la réclame provient de la publicité pour les cigarettes?

M. Ouimet: La proportion des recettes totales représentée par les cigarettes, à un moment donné, a été considérée comme assez importante. Pour être très franc, à l'heure actuelle, cette réclame n'est pas considérable. De fait, j'en discutais avec mes collègues ce matin, et nous examinâmes la liste de nos comptes, de publicité pour la cigarette.

Au total, cette année, nous atteindrons peut-être \$700,000 de recettes nettes, sur un total net de 29 millions de dollars. L'année dernière ou à peu près s'aurait été aux environs de \$1,050,000. Le revenu a baissé parce que les fabricants, bien entendu, n'achètent pas. Je crois qu'ils sont conscients du fait, à l'heure actuelle, de la campagne qui se poursuit. Ils n'achètent pas des annonces cinquante-deux semaines à l'avance. Ils placent les commandes pour une période de treize semaines ou à peu près. Mais de façon générale, et à la radio et à la télévision, c'est environ \$700,000.

M. McBride: Très bien. Deux autres questions connexes qui ne relèvent peut-être pas directement de votre service. Moi-même et peut-être Radio-Canada aussi, à l'occasion, nous recevons des plaintes non seulement au sujet de la réclame des cigarettes, mais au sujet de l'habitude de fumer que semblent avoir presque tous les hôtes et les interviewers à la télévision. On a un invité à telle ou telle émission qui semble fumer beaucoup. Il s'agit d'une observation, mais j'aimerais poser une question à ce sujet. Avez-vous reçu des critiques de ce genre à Radio-Canada?

M. Ouimet: Nous recevons des critiques assez souvent à ce sujet. J'ai déjà fait du micro, mais alors nous pouvions être dans un studio et personne ne savait si on fumait ou non. Je suppose que, pour certains, il est

imagine that for some people it would not be easy to be on camera for a half hour without

assez difficile d'être devant une caméra pendant une demi-heure sans fumer. Cela peut

[Text]

smoking. This may apply, mind you, to our own people or it may apply to people being interviewed in a particular field, in the religious field or otherwise.

We try, through persuasion again, to discourage our interviewers from smoking because we feel, mind you, that in many instances—it all depends how the set happens to be drawn up—that it gives the impression that the guest disappears behind a cloud of smoke if the guest himself is not smoking. At the same time we have to accept that smoking on this type of show involves personal freedom to a certain extent. Whether we would succeed in convincing our people to give up smoking any time they are on the air without some protests or grievances from the unions is doubtful. This is the same thing, mind you, as when we tell a man to take his beard off.

Mr. Mather: Not exactly, no.

Mr. Ouimet: Perhaps not exactly, but we try by all means to discourage smoking by our hosts and interviewers and, in fact, I think there has been progress.

Mr. McBride: Do complaints on that score roughly equal complaints about the advertising of cigarettes? These are two parallel different issues.

Mr. Ouimet: The complaints on this score are not that it is a bad example; the complaints that come in generally relate to the fact that it is a lack of courtesy on the part of the interviewer to blow his smoke in the guest's face.

Mr. McBride: It depends what his goal or aim is.

Mr. Ouimet: That is generally it; there is no question at that point of whether the man smokes or not. They just feel it is out of place.

Mr. McBride: Some guests need to be smoked. That is all, thank you.

The Chairman: Mrs. MacInnis?

Mrs. MacInnis (Vancouver-Kingsway): I notice in that you refer to "negative copy" being unacceptable. By that, Mr. Ouimet do you mean copy which denigrates a rival manufacturer's product?

Mr. Ouimet: That would be it, but Mr. Switallo can give you exactly the intent of this. It is basically that.

Mr. Switallo: Yes, this particular point refers mainly to comparisons and its origin

[Interpretation]

s'appliquer à notre propre personnel. Cela peut s'appliquer aussi aux interviewés dans un domaine particulier, la religion par exemple.

Nous essayons, de nouveau par la persuasion, de dissuader nos interviewers de fumer car nous estimons que dans bien des cas, tout dépend de la façon dont le décor a été construit, le témoin disparaît dans un nuage de fumée, s'il ne fume pas lui-même. De plus, il nous faut accepter le fait que l'usage de la cigarette à ce genre d'émissions met en cause la liberté personnelle. J'ignore si nous pourrions réussir à convaincre notre personnel d'abandonner l'usage de la cigarette lorsqu'il paraît à la télévision sans susciter des protestations ou des griefs de la part des syndicats d'employés. C'est exactement la même situation que lorsque nous disons à un employé de couper sa barbe.

M. Mather: Peut-être pas exactement.

M. Ouimet: Peut-être pas exactement, non. Mais nous essayons par tous les moyens possibles de dissuader nos interviewers et même nos invités de fumer. Et il y a eu un certain progrès en ce sens.

M. McBride: A ce sujet, est-ce que les critiques que vous recevez sont à peu près égales à celles reçues au sujet de la réclame?

M. Ouimet: Les critiques que nous recevons ne font pas mention du mauvais exemple donné; on nous fait plutôt remarquer qu'il n'est pas tellement poli pour l'interviewer d'envoyer la fumée de sa cigarette dans le visage de son invité.

M. McBride: Cela dépend du but qu'il poursuit.

M. Ouimet: On s'inquiète peu du fait que l'invité fume ou non. On trouve cela déplacé, c'est tout.

M. McBride: Il faut fumer certains invités. C'est tout. Merci.

Le président: Madame MacInnis?

Mme MacInnis (Vancouver-Kingsway): Vous dites que les textes négatifs sont à rejeter. Est-il question ici, Monsieur Ouimet, de textes qui voudraient dénigrer le produit d'un concurrent?

M. Ouimet: C'est cela, mais Monsieur Switallo peut vous préciser davantage le but poursuivi.

M. Switallo: Cet article se rapporte principalement aux comparaisons. Son origine

[Texte]

stems from the tar-nicotine war that developed in the United States in the late fifties. It barely started here before it ended in the States and we moved in quite quickly to avoid getting into the same situation, where one cigarette would be compared with competing brands so far as tar and nicotine are concerned. It is merely an extension of a basic policy that we have with respect to derogatory comparison regardless of the product being advertised.

Mrs. MacInnis (Vancouver-Kingsway):

Thank you. Now, when I was dealing with that word "negative" another question came into my mind. The CBC—probably this one is for Mr. Ouimet—has a number of documentary programs on pretty touchy subjects. You had one in "The Way It Is" about abortion and you have had others that were even more contentious on delicate subjects.

I am wondering whether or not you have considered putting on one or two documentaries or discussion panels or something of that nature about this matter of smoking. I have in mind two directions, perhaps—one being to take the case of what happens to a good many inveterate smokers and follow them right through into the operating room where their lungs are shown and everything else; in other words, a horror movie of that.

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The other one occurred to me when I saw this little booklet of the American Cancer Society which, in very lighthearted vein, shows parents what happens when they smoke and gives the figures to show that there is a far greater likelihood of their children smoking if they smoke. Even if one parent smokes there are figures to show the greater likelihood of their children smoking; there is a much greater likelihood with two parents but there is a greater likelihood with one parent than if neither smoke.

Now, I am wondering whether the CBC is considering at this time, with the mood of the public as it is, putting on one or two very good shows which actually will give just the facts in that way and highlight and point them up.

Mr. Ouimet: Mrs. MacInnis, I can say we have already done it, perhaps not in prime time, but some weeks ago on "Take 30", the women's program in the afternoon, we had a documentary case on the dangers of smoking which lasted, I believe, something like a half hour. Mind you, we also co-operate quite fully, perhaps not as much as the officials of the

[Interprétation]

découle de la guerre qui a vu le jour aux États-Unis vers la fin des années 50 au sujet du contenu, en goudron et nicotine, des cigarettes. Cette situation a vu le jour au Canada alors qu'elle n'était pas encore complètement réglée aux États-Unis. Nous nous sommes empressés de prendre des décisions pour nous assurer qu'aucune cigarette ne puisse être comparée à une autre, quant à leur teneur respective en goudron et nicotine. Cette politique de non-comparaison, nous l'appliquons, quel que soit le genre de produits en cause.

Mme MacInnis (Vancouver-Kingsway):

Merci. Une question me vient à l'esprit, qui s'adresse probablement à Monsieur Ouimet. Radio-Canada a produit un certain nombre d'émissions sur des sujets assez délicats. Il y en a une sur l'avortement à «The Way it Is» et d'autres sur des sujets tout aussi délicats.

Je me demande si vous avez songé à présenter une ou deux émissions documentaires ou des tables rondes sur la question de l'usage du tabac. Par exemple, une émission durant laquelle on suivrait un certain nombre de fumeurs invétérés jusqu'à la salle d'opération, où l'on montrerait même leurs poumons. Une film d'horreur, quoi! L'autre sujet m'est venu à l'idée lorsque j'ai pris connaissance de cette brochure de la Société américaine du

cancer. Sur un ton léger, la brochure indique aux parents ce qui arrive lorsqu'ils fument et cite des chiffres pour prouver qu'il est plus que probable que leurs enfants fumeront s'ils fument eux-mêmes. La possibilité est beaucoup plus grande si le père et la mère fument mais cette possibilité demeure même si l'un ou l'autre, seulement fume.

J'aimerais savoir si Radio-Canada songe à produire une ou deux émissions pour étaler les faits tels qu'ils sont et pour en faire ressortir les points saillants.

M. Ouimet: Je puis dire, madame MacInnis que nous l'avons déjà fait, peut-être pas au moment opportun. Il y a quelques semaines, au cours de l'émission «Take 30», une émission féminine diffusée l'après-midi, nous avons présenté, sur les dangers de la cigarette, un documentaire qui durait, je crois, une demi-heure. Et nous co-opérons avec le ministère

[Text]

Department of Health and Welfare would like us to do, in scheduling anti-smoking spot announcements.

We have so many institutional spots that perhaps we cannot give as much time as we would like to the anti-smoking spots. At the same time we are carrying them on all our owned and operated stations in English and French and we have carried them on the network. The Program Council of the CBC—the Program Council being made up of me as Chairman and the three General Managers of the regional networks took the decision last November to schedule these one minute spots in prime time; that is, between 7.30 p.m. and 10.00 p.m.

We also have in the making a program which has not yet come off the ground because it is not an easy one to prepare, but which will be along the lines of two programs you may have seen, "The National Driving Test" and "The National Fitness Test". Now we are thinking of and really working on a program which would deal with "The National Smoking Test". When this will come off the ground I am not in a position to tell you, but I know we are working on it in order to sensibiliser the public to the dangers.

Mrs. MacInnis (Vancouver-Kingsway): I am very glad to hear this, but may I just suggest one word of caution? I have discovered that programs put on for women are regarded as second-rate programs. I would like to see a drama in "The Way It Is" spot, the 10 o'clock spot, in addition to this, because I am quite sure that is when you get the real over-all audience of men, women and young people, and I wish that could be considered.

Mr. Ouimet: I am quite sure, Mrs. MacInnis, that where we have it prepared, "The National Smoking Test" will go on some time around 9 o'clock at night on a very good night.

Mrs. MacInnis (Vancouver-Kingsway): Good. May I ask another question? We were given the regulations in 21 countries for advertising on radio and television, I believe. I notice that the regulations are given for these 21 countries, but we have not as yet been given the results of the application of these regulations. Mr. Ouimet, have you any knowledge of other countries such as Great Britain and France who have banned cigarette advertising entirely from their television? I believe it has been banned on television and radio in Czechoslovakia, Norway, Sweden, Denmark, Switzerland and Italy.

[Interpretation]

de la Santé, mais peut-être pas autant que ses dirigeants le voudraient, en présentant des messages soulignant les méfaits de la cigarette.

Nous ne pouvons nous permettre d'en diffuser autant que nous le voudrions, cependant. Nous présentons ces messages sur les ondes des postes qui sont la propriété de Radio-Canada ainsi qu'au cours d'émissions de réseau. Le Conseil des programmes de Radio-Canada, dont je suis le président, et sur lequel siègent également les trois directeurs-généraux des réseaux régionaux, a décidé en novembre dernier de diffuser ces messages d'une minute durant les meilleures heures d'écoute, soit entre 7 heures 30 et 10 heures le soir.

Nous sommes aussi en train de préparer une émission qui n'est pas encore prête—c'est une émission difficile à préparer—qui s'apparentera à deux émissions que vous avez peut-être vues: «The National Driving Test» et «The National Fitness Test». Nous songeons sérieusement à cette émission qui pourrait s'intituler «The National Smoking Test». J'ignore quand nous pourrions présenter cette émission mais nous y travaillons car nous voulons sensibiliser le public aux dangers de la cigarette.

Mme MacInnis (Vancouver-Kingsway): Me permettez-vous de donner un mot d'avertissement? J'ai découvert que les émissions qui s'adressent aux femmes sont considérées comme des émissions de deuxième ordre. J'aimerais, de plus, qu'une émission dramatique soit présentée, par exemple, vers les 10 heures du soir, alors que les émissions attirent le nombre le plus élevé d'hommes, de femmes et de jeunes gens.

M. Ouimet: Je suis sûr, madame MacInnis, que lorsque cette émission sera prête, elle sera présentée vers les 9 heures du soir et que le soir sera choisi pour attirer le plus d'auditeurs possible.

Mme MacInnis (Vancouver-Kingsway): Une autre question. On nous a donné les règlements qui régissent la réclame, à la radio et à la télévision, dans 21 pays, mais on ne nous a pas encore donné les résultats de l'application de ces règlements. Savez-vous si d'autres pays, par exemple la Grande-Bretagne et la France, ont banni la réclame en faveur de la cigarette, à la télévision? Je crois que cette réclame est interdite à la radio et à la télévision en Tchécoslovaquie, en Norvège, en Suède, au Danemark, en Suisse et en Italie.

[Texte]

Now, to go a little further, these countries have banned cigarette commercials. Have you any knowledge of what the result of the ban in those countries has been so far as a lessening in cigarette smoking is concerned?

Mr. Ouimet: No, I think it would be very hard for us to get the results. I think the Department of Health and Welfare would be in a better position, through co-operation with the departments of health and welfare of these interested countries, to get statistics of the results.

You mentioned, for instance, that cigarette advertising has been banned in the U.K. Of course, there are no commercials on the BBC at all. I may be wrong, but to my knowledge what has happened to the BBC is that the BBC suppressed, or will suppress, all advertising from their publications announcing their programs, that is *The BBC Times* and *The BBC Listener*. What ITV has done perhaps my colleagues know, but I have no actual facts that up to now cigarette advertising is definitely banned on television in the U.K.

Mrs. MacInnis (Vancouver-Kingsway): This is a report which we got through American embassies from the National Clearinghouse for Smoking and Health and it reads:

...cigarette advertising on television and/or radio. It is barred from television in England and France, and from television and radio in Czechoslovakia, Norway, Sweden, Denmark, Switzerland and Italy.

My colleague, Barry Mather, tells me that it is three years since it has been banned from British television. I just wondered if being—

Mr. Ouimet: I would like to check this because I have a clipping here which reads—

Mr. Mather: That probably refers to publications.

Mr. Ouimet: —“Radio Times to ban cigarette advertising”.

Mr. Mather: That is a follow-up on their channels banning.

Mrs. MacInnis (Vancouver-Kingsway): Yes. Mr. Chairman, may I suggest at this point that we approach the Department of National Health and Welfare to try and get some information on the result of this.

The Chairman: It is my understanding they are going to appear before us.

[Interprétation]

Ces pays ont banni la réclame en faveur de la cigarette. Connaissez-vous les résultats que cette restriction a eus dans ces pays?

M. Ouimet: Non. Je crois qu'il serait très difficile d'obtenir les résultats. Le ministère de la Santé serait peut-être plus en mesure, avec la collaboration des ministères de la Santé des pays pertinents, d'obtenir des statistiques sur ces résultats.

Vous avez dit que la réclame en faveur de la cigarette est interdite au Royaume-Uni. Évidemment, puisque toute réclame commerciale est interdite à la BBC. Je crois, d'autre part, que la BBC a supprimé ou supprimera toute réclame qui apparaît dans ses publications, *The BBC Times* et *The BBC Listener*. Mes collègues savent peut-être ce qu'a décidé le réseau ITV, mais, personnellement, je ne possède aucun détail qui me permettra de dire que la réclame commerciale en faveur de la cigarette est interdite au Royaume-Uni.

Mme MacInnis (Vancouver-Kingsway): Ce rapport du National Clearinghouse for Smoking and Health, que nous avons obtenu par l'entremise de l'ambassade américaine, dit que la réclame de la cigarette à la télévision est interdite en Angleterre, en France, et à la télévision et à la radio en Tchécoslovaquie, en Norvège, en Suède, au Danemark, en Suisse et en Italie.

Mon collègue, M. Barry Mather, me dit qu'il y a déjà trois que les annonces de la cigarette sont interdites à la télévision britannique.

M. Ouimet: C'est à vérifier madame MacInnis. De fait, j'ai une coupure de journal, ici qui...

M. Mather: Il s'agit probablement des publications.

M. Ouimet: C'est le *Radio Times*, qui veut interdire la réclame sur la cigarette.

M. Mather: C'est la suite logique de l'interdiction sur les ondes.

Mme MacInnis (Vancouver-Kingsway): Monsieur le président, permettez-moi de suggérer que nous devrions demander au ministère de la Santé d'obtenir des renseignements sur les résultats de cette mesure.

Le président: Je crois qu'ils viendront témoigner au comité.

[Text]

Mrs. MacInnis (Vancouver-Kingsway): I have only one more question. Am I correct in believing, Mr. Ouimet, that on television and radio advertising on the CBC—or is it on the CBC—there continues to be an element of advertising cigarettes to the public on the basis that they aid relaxation, they help one to become relaxed. I think I have continued to see and hear that type of advertising. Am I mistaken, or is that within your policy?

Mr. Switallo: We do not have a specific policy that restricts claims concerning relaxation, and what have you. I cannot think of any particular commercial that might use that approach, but if one came up we would probably accept it. It would depend, of course, on how it was developed. I think you mean just an incidental reference to the "sit back and relax" type of theme. We have always taken this.

Mrs. MacInnis (Vancouver-Kingsway): Do you not think that is more deadly than sex?

Mr. Ouimet: It is another form of relaxation!

Mrs. MacInnis (Vancouver-Kingsway): I know, but if sex is to be barred as an approach—and I am quite serious about this—it seems to me that this appeal to relaxation is a very insidious form of persuasion with the stresses of today.

Mr. Monteith: Actually, I find it quite relaxing, Mrs. MacInnis.

Mrs. MacInnis (Vancouver-Kingsway): You see? Mr. Chairman, because I cannot seem to get those persons present to give any serious consideration to this question, I thank the gentlemen and I will renew this topic at the next possible opportunity.

Mr. Foster: Mr. Ouimet, you say that since you introduced this code your revenues have gone down. Is there any indication whether the advertisers have just switched to other networks or has it gone to other forms of advertising?

Mr. Ouimet: No, it is not actually since we introduced the code. The code has been in effect—perhaps not in its latest form—for quite some time. Actually, since the beginning of television, and we have refined it again. As

[Interpretation]

Mme MacInnis (Vancouver-Kingsway): Monsieur Ouimet, ai-je raison de croire qu'il y a toujours dans la publicité à la télévision et à la radio, à Radio-Canada, un élément de la publicité qui prône que c'est une détente, que la cigarette aide à se détendre. Il me semble que j'entends toujours ce genre de réclame. Est-ce que j'ai raison?

M. Switallo: Nous n'avons pas de politique spéciale qui restreint la publicité qui prétend détendre ou quoi que ce soit. Si une annonce avait de telles prétentions nous l'accepterions probablement, si elle est bien présentée, bien entendu. Mais lorsqu'on mentionne simplement que la cigarette détend, sur le thème de prendre le temps de s'asseoir et de se détendre avec une cigarette, on ne peut rien faire contre cela.

Mme MacInnis (Vancouver-Kingsway): Ne croyez-vous pas que c'est plus grave que le sexe?

M. Ouimet: C'est une autre forme de détente.

Mme MacInnis (Vancouver-Kingsway): Je sais, mais si on doit interdire la publicité qui fait appel au sexe, il me semble que cet appel à la détente est une forme de persuasion très insidieuse.

M. Monteith: Je trouve que c'est une excellente détente, Mme MacInnis.

Mme MacInnis (Vancouver-Kingsway): Monsieur le président, puisque je ne peux pas obtenir qu'on étudie cette question sérieusement, je vous remercie de m'avoir écoutée et je reprendrai cette question une autre fois.

M. Foster: Monsieur Ouimet, vous dites qu'à la suite de l'introduction de ce code, vos recettes ont baissé. Savez-vous si les commanditaires ont passé à d'autres réseaux ou à d'autres formes de publicité?

M. Ouimet: Non, ce n'est pas vraiment depuis que nous avons introduit ce code. Le code, sinon dans sa forme définitive, est appliqué depuis assez longtemps, depuis le début de la télévision. Nous l'avons raffiné de

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you can see, it is dated June 26, 1968. This question has been discussed as the CBC board a number of times and no definite conclusions have been arrived at. I put forward the rea-

nouveau. Vous voyez qu'il date du 26 juin 1968. Cette question a été débattue au Bureau des gouverneurs de Radio-Canada à maintes reprises et on n'en est pas arrivé à une con-

[Texte]

sons for this which was in my exposé, to the effect that what further results would be achieved by unilateral action on our part than we are achieving at the moment. Frankly, we estimate the over-all revenue of radio and television stations throughout Canada from cigarette advertising at \$5 million. I told you that our portion of this is about \$700,000.

I think the real reason for this is that our salesmen are not going all out after cigarette advertising, as they would on other products. They bend backwards, and it is not that they do not want to serve the tobacco industry as they serve other industries, but they certainly do not go—and I think my colleagues will bear me out on this—as all out in securing accounts in this field as they might in other fields.

The fact is that since 1963—though it has affected us perhaps more than others—cigarettes have not been advertised on television until 9 o'clock at night. They are advertised on radio during the daytime and, of course, daytime radio is as potent—at least relatively speaking—as nighttime television.

Mr. Foster: They are not advertised on radio in the daytime?

Mr. Ouimet: They are advertised on radio in the daytime.

Mr. Foster: Oh, they are.

Mr. Ouimet: But our radio revenue, comparatively speaking, is not that significant out of the total.

Mr. Foster: Has the proposition been presented to your board to ban all cigarette advertising?

Mr. Ouimet: This was suggested in a number of circumstances by some board members but, for the very reasons that I brought up, I do not believe there was ever unanimity on it.

It is all very well, mind you, for us to stand out as an example, but let us say that a year ago we would have had to consider the loss of perhaps \$1.1 million in revenue and today perhaps the loss of \$700,000, and this revenue will be going to the competition; to newspapers, magazines or to billboards. Will the people literally see the difference? Will it influence people to that extent?

The CBC networks are part of a dual composition. The CBC owns stations and affiliates. We could not tell our affiliates to stop advertising cigarettes. They would still go on, mind you, advertising cigarettes right next to one

[Interprétation]

clusion déterminée. Je vous ai donné les raisons dans mon exposé, par exemple, qu'une action unilatérale de notre part donnerait des résultats positifs. Mais, franchement, nous estimons que les recettes de la télévision et de la radio au Canada, qui provient de la réclame sur le tabac, est de 5 millions de dollars. Et je vous ai dit que notre tranche était d'environ \$700,000.

Je pense que la véritable raison en est que nos vendeurs ne font pas autant d'efforts pour obtenir les annonces sur la cigarette que pour d'autres produits. Ils font pour ainsi dire exprès pour ne pas les obtenir, non pas parce qu'ils ne veulent pas desservir l'industrie du tabac, et je pense que mes collègues m'appuieront, ils ne font pas de grands efforts pour s'assurer des contrats publicitaires sur la cigarette comme ils le feraient pour d'autres produits.

Et depuis 1963, ce qui nous a peut-être affectés plus que d'autres, on n'annonce pas la cigarette avant 9 heures du soir. A la radio, la publicité se fait de jour, et la radio du jour est relativement aussi efficace que la télévision du soir.

M. Foster: La cigarette n'est pas annoncée de jour à la radio?

M. Ouimet: Oui, elle l'est.

M. Foster: Merci.

M. Ouimet: Mais comparativement, nos recettes qui proviennent de la radio ne sont pas très importantes par rapport au total.

M. Foster: Est-ce que votre Bureau a songé à interdire toute publicité sur la cigarette?

M. Ouimet: Certains membres du Bureau l'ont suggéré, mais je ne pense pas, pour les raisons que j'ai déjà données, qu'on ait jamais été unanime.

C'est très bien de donner l'exemple, mais il y a un an nous aurions dû envisager la perte de \$1.1 million et qu'actuellement nous perdions \$700,000 en recettes qui iraient à nos concurrents, soit les revues, magazines, journaux. Est-ce que les gens y verront la différence? Est-ce que cela aura une telle influence sur les gens?

Les réseaux de Radio-Canada ont une double composition. Il y a les postes du réseau et les postes affiliés. On ne peut pas interdire à nos affiliés de faire de la réclame pour la cigarette. Ils continueraient de les annoncer

[Text]

of our programs. In many areas the effect of a total ban on our part would be completely diminished.

Mr. Foster: Does your board consider they have special responsibility to look at problems such as this and to look at the effects on our society more so than a private corporation?

Mr. Ouimet: They certainly do in all aspects, not only cigarettes. However, I must point out that the last board to consider this particular question went out of office in March and it was replaced by a new board on April 1. The new board has not as yet been delegated to study this particular question. I was discussing the problem with the president the other day and certainly he would not be adverse—arising out of meetings that we have had and meetings of this Committee—to recommending that his new board have another look at cigarette advertising on the CBC.

Mr. Foster: Referring to the ban suggested for certain age groups in item 6, it seems to me this is not a particularly effective age limit. Young people seem to idolize people much older than this, and I suppose they may have a little trouble identifying with them, but 25 seems quite young. Certainly many of our hockey stars, and such people, are older than this.

Mr. Ouimet: But we would keep a hockey star from advertising cigarettes.

Mr. Foster: Yes. I applaud your action in that area, but the age of 25 seems quite low to me.

Mr. Ouimet: Mind you, I think it is part and parcel of our present society. In French we have the expression "les croulants". A "croulant" in my generation, I suppose, was a man of 35, but now I find—and I tell this to my children—that you start to be a "croulant" at 25. So how far is it going to go down?

Mr. Mather: To 17.

Mr. Ouimet: I have a teenage daughter. There is no getting away from it, a good part of the instinct to smoke is to be "in" with the other people who are doing it. I believe this

[Interpretation]

juste avant un de nos programmes. Et dans maints endroits, l'effet d'une interdiction complète de cette publicité de notre part serait complètement neutralisé.

M. Foster: Est-ce que Radio-Canada considère qu'il a une responsabilité spéciale, vis-à-vis des effets sur la société, plus que les postes privés?

M. Ouimet: Oui, certainement nous avons cette responsabilité, non pas seulement au point de vue du tabac ou de la cigarette, mais depuis que le bureau a considéré cette question, il a été remplacé le 1^{er} avril. Le nouveau Bureau n'a pas encore été en mesure d'étudier cette question. Je discutais de ce problème avec le président l'autre jour et à la suite de réunions que nous avons tenues et à la suite des réunions de ce comité, le président serait prêt à recommander au nouveau Bureau d'étudier encore une fois la question de la publicité sur la cigarette.

M. Foster: Il me semble que l'abolition pour certains groupes d'âge à la proposition n° 6 n'est pas valable parce que les jeunes tendent à admirer les personnes d'âge beaucoup plus mûr, beaucoup plus de 25 ans, en tous cas. Nous avons par exemple, des joueurs de hockey qui sont âgés de plus de 25 ans.

M. Ouimet: Mais nous pourrions empêcher une étoile du hockey de faire de la publicité sur la cigarette.

M. Foster: Mais je pense que 25 ans c'est un peu jeune.

M. Ouimet: Tout cela fait partie du contexte de notre société. En français, ce que nous appelons les croulants, étaient, de mon temps, des gens de plus de 35 ans. Mais maintenant, les jeunes considèrent qu'à 25 ans, on est déjà un «croulant». Alors, jusqu'où va-t-on aller?

M. Mather: Jusqu'à 17 ans.

M. Ouimet: J'ai une fille adolescente et c'est sûr que l'instinct, le désir de fumer fait partie du désir d'être à la mode. C'est un des aspects de notre génération. Des jeunes gens sains,

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is a manifestation of our present day society. Clean-cut young men and women who are not

qui ne fument pas avant l'âge de 25 ans ont l'espoir de ne jamais fumer. Si je n'avais pas

[Texte]

actually smoking before they are 25, have a good chance of never smoking. If I had not started at 19 most probably I would not be smoking today.

Mr. Foster: Item 3 concerning general advertising states that advertising should be aimed at persuading people to switch from one brand to another. I doubt that this is possible. I would think it is very difficult to control advertising and if such advertising endeavours to persuade people to switch brands the same advertising, by its very nature, will promote smoking.

Mr. Ouimet: I do not know whether you are a smoker or not, but when the Department of Health and Welfare six or eight weeks ago published a list of various brands analyzing the tar and nicotine content of cigarettes, one brand, which I happened to smoke—and I will not mention it—was not available in this city or in Hull over the a full weekend. I tried to buy that very same brand down the street here this afternoon and I could not get it because the publicity given was such that people had switched. So I think encouragement to switch brands is an idea—but of course not on the basis of tar or nicotine.

Mr. Switallo: Put very simply, what we mean here is that we just do not accept advertising that says, and I put this in parenthesis, "If you want to enjoy something really pleasurable, take up smoking". If you think about it and analyze it you will find that most of the themes in cigarette commercials today go along the line of "Move up in taste. Do you want a new taste; if so try this brand." or "We have something else—we have a menthol" or what have you. It is directed at a particular taste or the pleasure of smoking related to a specific brand—the attribute of a

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cigarette. It is really not that fine a line. We are very strict in this respect to always ensure that what is being talked about is the brand—what your brand has to offer which is different from competing brands.

If I could just digress for a minute and revert to the point you raised on Number 6, the intent of that paragraph is to ensure that the actors or people in these commercials do not appear to be younger than 25 years of age. The reason for that is the emulative effect social values that one finds in commercials. Young people seek to identify with the adult world and with the pleasures of the adult world but not necessarily with adults—

[Interprétation]

commencé à fumer à 19 ans, je ne fumerais pas aujourd'hui.

M. Foster: En ce qui concerne l'article 3 visant la réclame générale qui vise à persuader les gens de changer de marque; je ne pense pas que cela soit possible. Si on annonce la cigarette, c'est le tabac qu'on annonce et il est difficile de contrôler la publicité. Si on essaie de faire changer les gens de marque de cigarettes, en même temps, on influence les gens à fumer.

M. Ouimet: Je ne sais pas si vous fumez ou non, mais lorsque le ministère de la Santé, il y a environ 6 ou 8 semaines, a publié une liste des différentes marques de cigarettes en donnant la teneur de goudron et de nicotine dans chaque marque, il y a une marque de cigarettes que l'on ne pouvait pas trouver dans les magasins de Hull et d'Ottawa. J'ai essayé d'acheter cette marque cet après-midi et on ne peut pas se la procurer parce que la publicité créée par cette analyse a poussé les gens à changer de marque. Par conséquent, l'encouragement à changer de marque est une idée, mais évidemment pas à base de la teneur en nicotine ou en goudron.

M. Switallo: Tout simplement ce que nous voulons dire ici, c'est que nous n'acceptons pas de réclame disant que: «si vous voulez faire quelque chose d'agréable, il vous faut fumer». Si on analyse la réclame, on verra que le terme de la publicité sur la cigarette en ce moment consiste à dire aux gens qu'ils doivent essayer une nouvelle marque, qui a meilleur goût et on parle surtout de la saveur d'une cigarette en particulier. Et je pense que la distinction est très fine. Nous sommes très stricts sur ce rapport. Il faut toujours voir à ce que l'on parle seulement de la marque.

Qu'est-ce que votre marque a à offrir comparativement aux concurrentes, aux marques concurrentes?

Et je voudrais revenir au point que vous avez soulevé par rapport à l'article 6. Le but de cette restriction, c'est de nous assurer que les artistes ou les personnes visibles dans la publicité ne semblent pas avoir moins de 25 ans. Et la raison pour laquelle nous avons décidé cela, c'est que l'émulation de la publicité est un aspect social. Les jeunes gens tendent à s'identifier avec le monde adulte. Et ils veulent participer aux plaisirs du monde

[Text]

to teenagers, someone 25 or 30 is pretty ancient.

We feel this is a fairly effective device by which to cut down this type of identification. We feel that if you have commercials where the participants are in fact teenagers then a teenage audience is more likely to identify with the people as well as with the environment. On one occasion we turned down a commercial where the actress was over 30 but appeared at least 15, and we turned it down on that ground.

Mr. Foster: This may be true but generally they still idolize people of a more mature age than this. I recall one gentleman last spring that was idolized and I understand he was around 48.

Mr. Mather: Pierre Trudeau.

Mr. Foster: Getting back to this other point, where you say advertising is limited to switching from one brand to another, I recall one ad where it gave the brand name and showed people from the West riding horses in a Rocky Mountains setting. It seems to me that young people are bound to identify with individuals and particular things in which they are interested in this type of an ad. I doubt that you could have controlled advertising where it only appeals to people to switch from one brand to the other without affecting young people.

Mr. Switallo: What you say is probably true but I think that appeal would be an indirect one. I think what you are really concerned with is the over-all social environment that attracts young people and I do not think that is so much a question of advertising—that is asking, people directly to start smoking—as just making it look attractive to them. I think this is secondary. It is the background of the commercial that appeals to young people. We are well aware of that problem and are considering right now just how to control this type of approach, because of its effect on young people as well as adults.

Mr. Foster: May I revert to this item mentioned earlier by one member, that we have an educational program on cigarette smoking in prime time. I read an article in *Reader's Digest* last spring to the effect that they do not tell you about the people in this country. It referred to this previous ad that I mentioned and explained the gruesome situation in cancer hospitals. I think it would be an

[Interpretation]

adulte mais nécessairement avec les adultes. Et pour les jeunes gens, une personne de 25 ans est assez âgée.

C'est une manière de faire disparaître cette identification. Si on avait des annonces où les participants seraient des adolescents, alors les adolescents seraient plus aptes à s'identifier avec ces artistes.

A l'occasion, nous avons refusé des messages publicitaires où les artistes avaient plus de 30 ans mais avaient l'air d'avoir moins de 15 ans.

M. Foster: Lorsque vous dites que les adolescents adorent les personnes qui sont plus âgées qu'eux, je me souviens d'une personne qui avait environ 48 ans le printemps dernier deau, n'est-ce pas?

M. Mather: Vous voulez parler de M. Trudeau n'est-ce pas?

M. Foster: Mais pour revenir à ce que vous dites; vous dites que la publicité se limite, se résume à influencer les gens à changer de marque. Je me souviens que les gens de l'Ouest fumaient une certaine marque de cigarettes. Et sur l'emballage desquelles on voyait des gens à cheval dans un décor des montagnes rocheuses. Il me semble que les jeunes gens tendent à s'identifier avec ces personnes, ces choses que l'on montre dans ces annonces. Et je doute que vous puissiez contrôler la publicité qui influence les gens à changer de marque sans toucher la jeunesse.

M. Switallo: C'est un appel indirect à la jeunesse. Ce qui les concerne, c'est l'environnement social total qui attire les jeunes gens. Il ne s'agit pas seulement de demander aux gens de commencer à fumer ou seulement de rendre la chose agréable, attirante. C'est un problème que nous étudions activement en ce moment et nous voulons savoir comment contrôler ce genre de publicité.

M. Foster: J'en reviens à l'article mentionné par un autre membre du comité plus tôt au sujet d'un programme éducatif sur la cigarette aux heures de pointe.

J'ai lu un article dans le *Reader's Digest* du printemps dernier qui disait qu'on ne parle pas des gens de notre pays. On parlait de la situation terrible dans les hôpitaux où l'on traite le cancer. Et je pense que les sujets

[Texte]

excellent thing if some of the items mentioned in this article were included on the program.

Mr. Ouimet: Mind you, in a good number of the spots that we carry on an institutional basis for the Canadian Cancer Society, the Heart Foundation and so on, mention is made of tobacco as one of the hazards leading to cancer and heart disease. Then we have the directly produced spots of the Department of National Health and Welfare which we are now scheduling—I could not tell you the exact frequency—in prime time and in network time.

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On top of this, a number of our public affairs programs, both on the French and English networks, from time to time have interviewed doctors on the subject. However, I am thinking in terms of the possibility of a national smoking test, properly advertised in advance, with people checking on the results if those who smoke 40 a day, 30 a day, 15 a day, and the inveterate smoker. This would have more of an impact, and this is what we are working on at the moment. There have been countless illusions on radio and TV in respect of this problem.

Mr. Foster: Do you have any idea of the amount of time that you allocate to this in prime time advertising?

Mr. Ouimet: Unfortunately I have not the figures, but I know that on some stations in one month we carried as many as 18 one-minute spots, which is considerable when you take the over-all institutional spots carried on individual stations of the CBC in one month.

Mr. Foster: Thank you very much.

Mr. Mather: Mr. Chairman, I have a few questions I would like to ask Mr. Ouimet. I would like to say first of all that as one member of this Committee I much appreciate its presence here and that of his aides and assistants in our deliberations on this very important and serious question of what to do about not promoting cigarette disease through broadcasting.

[Interprétation]

mentionnés dans cet article, devraient être mentionnés dans ces programmes.

M. Ouimet: Bon nombre des émissions que nous avons et sont commanditées par des institutions, par exemple, de la Société du cancer du Canada, la Fondation du cœur. Elles mentionnent effectivement le tabac comme l'une des menaces. L'un des dangers qui peut causer le cancer, qui peut causer aussi des maladies de cœur et des troubles cardiaques. Puis, nous avons les émissions directement réalisées par le ministère de la Santé nationale et du Bien-être social que nous présentons maintenant. Je ne saurais vous dire combien fréquemment cette émission paraît et à quelle heure elle paraît, mais je crois que c'est à une heure assez importante et à une heure d'écoute très populaire et alors que les émissions passent au réseau.

Outre cela, il y a eu aussi nos émissions d'affaires publiques au réseau anglais et au réseau français; on a, à l'occasion, interviewé des médecins, le sujet a été discuté peut-être pas exactement en vue d'exercer une influence particulière, non pas comme une possibilité d'un test national de l'usage du tabac, d'un relevé national, savoir si quelqu'un fume 10, 15 ou 20 cigarettes par jour; faire notre relevé au moyen de ce sondage avec échantillonnage, cela aurait peut-être plus d'influence, de répercussion et nous y travaillons à l'heure actuelle. Mais il y a eu un nombre infini de références à l'heure actuelle à la télévision au cours des émissions ordinaires.

M. Foster: Avez-vous une idée du temps que vous y consacrez?

M. Ouimet: Je n'ai malheureusement pas les chiffres, mais je sais qu'à certains postes, au cours d'un mois donné, nous pouvons donner jusqu'à 18 annonces-éclaircs d'une minute, ce qui est considérable si vous tenez compte de l'ensemble des annonces-éclaircs passées sur les ondes des différentes stations de Radio-Canada au cours d'un mois.

M. Foster: Merci beaucoup.

M. Mather: Monsieur le président, j'aimerais poser quelques questions à M. Ouimet. Je tiens à signaler tout d'abord que j'apprécie fort sa présence ici, son assistance et sa collaboration, à l'occasion de nos délibérations sur cette question très importante et très délicate, à savoir que faire pour ne pas répandre davantage le fléau de la cigarette au moyen de la réclame. Ai-je raison de

[Text]

Am I right, sir, in summarizing the position of the CBC as I heard it today in this way, that the corporation is operating under the broadcast legislation and the food and drug legislation, and that within those limits you are accepting cigarette advertising in the qualified way that you have indicated?

Further, I could pose one other question. Would you think that there would be little use of prohibiting cigarette advertising on the CBC unless there would be an over-all prohibition of it throughout the broadcast media?

Mr. Ouimet: It has been the feeling of the board and the feeling of management over the years that unilateral action may have some effect. It would decrease our revenues, but what other effect it would have in our opinion would be fairly negligible unless the same position was adopted by other media.

Mr. Mather: I think it is true to say that part of the deliberations of our Committee may, at least hopefully on my part, lead to some over-all legislation in that way.

But going now to another question, for some years Canada has been spending a good deal of tax money trying to educate people, particularly young people, on the disease and troubles promoted by cigarette smoking. During the same years the CBC, which is also very largely publicly financed—personally I think it is a wonderful organization and I am all for it—has been promoting in a qualified way the continuance or the general idea of acceptability of cigarette smoking. Does it not strike you that this is a rather illogical situation for both the legislators of the country and the broadcasters to be in?

Mr. Ouimet: It may be Mr. Mather. It may look like an illogical situation, but if we made a test around this table, among the members of the Committee who persistently look at CBC stations, I wonder how many members of this Committee or ourselves would be able to point out where we do advertise cigarettes.

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The volume of advertising is relatively small compared to other products such as beer and soap.

As I pointed out, \$700,000 net out of \$29 million net is a very small percentage.

Mr. Mather: Seeing that the actual net revenue to the public corporation in the broadcasting of a dangerous product is so very little, would you not consider that in the interest of national and public health, you

[Interpretation]

résumer la position de Radio-Canada à l'heure actuelle, de la façon suivante: la société relève, bien entendu, de la Loi sur la radiodiffusion, de la Loi sur les aliments et drogues et, à l'intérieur de ces limites, vous acceptez la réclame de la cigarette de la façon mitigée que vous avez indiquée.

J'arrive tout de suite à cette autre question: pensez-vous qu'il servirait à peu d'interdire la réclame pour la cigarette à Radio-Canada, à moins qu'il y ait une interdiction dans tout le domaine de la radiodiffusion?

M. Ouimet: C'est le sentiment de la direction et du conseil d'administration depuis des années. Cette option unilatérale aura peut-être certains effets mais, à notre avis, les autres effets que cela pourrait avoir seront assez négligeables, à moins que la même position soit adoptée par les autres moyens de diffusion.

M. Mather: Au cours des délibérations de notre Comité, nous pourrions peut-être mettre au point une mesure législative englobante.

Une autre question. Depuis un certain nombre d'années, le Canada dépense assez d'argent pour éduquer les jeunes, notamment sur les maladies, les troubles causés par l'usage de la cigarette. Au cours de la même année, Radio-Canada, qui est aussi financée dans une large mesure par le public,—je crois d'abord que c'est une magnifique organisation, soit dit en passant,—a fait la promotion mitigée mais continue de l'acceptabilité de la cigarette. Est-ce que cela ne vous étonne pas, cela ne vous semble pas une situation illogique et pour les législateurs et pour les radiodiffuseurs?

M. Ouimet: Peut-être, monsieur Mather, cela semble-t-il illogique mais, néanmoins, si nous faisons un petit essai parmi les membres du Comité qui regardent de façon assidue les émissions de Radio-Canada, je me demande combien de députés, membres du Comité, pourraient signaler les émissions où

se font les annonces de la cigarette, car la quantité d'annonces est minime comparative-ment à d'autres produits comme la bière, le savon, etc.

\$700,000 net sur 29 millions, ce n'est pas une proportion considérable.

M. Mather: Nous voyons que le revenu net que reçoit Radio-Canada en annonçant ces produits est minime, mais ne pensez-vous pas, quand il s'agit de problème national de santé, que vous pourriez fort bien donner

[Texte]

could well set an example, take the lead in this situation and do away with it. You make peanuts out of it, \$700,000 a year.

Would you not consider that the gesture made by the public agency in this field would be a good one? Do away with the product?

Mr. Ouimet: We certainly would like to be examples in many fields, provided that the people we report to when the chips are down would realize that perhaps giving up \$700,000—those \$700,000 have got to be picked up somewhere else.

Mr. Mather: I realize that.

Mr. Ouimet: This is actually one of our predicaments.

Mr. Mather: Yes sir. But the experience in Britain has been that the prohibition of broadcasts of cigarette advertising resulted in no actual loss of revenue, because the space vacated by that type of advertising was very quickly taken over by other types. However, Mrs. MacInnis has outlined—and we have the report here from the Department of National Health and Welfare—the situation in regard to a number of other countries who are, I would say, ahead of us in regard to smoking and health broadcast legislation.

I will not go over them again, but I was particularly interested in what the government of Ireland is planning, which is, according to this statement, that they plan to phase out—not chop off—but phase out all cigarette advertising on television and radio within the next two years, commencing, I think, in April of this year.

Would you think this would be a better approach to curtailment or abolition of broadcast cigarette advertising than a complete immediate abolition?

Mr. Ouimet: This could very well be, but again I would say that this would be literally out of my particular province. I could, with management, make such a recommendation to the Board of the CBC, but it would be up to the Board of the CBC to accept the recommendation or reject it. This would be definitely a Board decision. It would not be strictly a management decision.

Mr. Mather: Yes, this I am sure is appreciated. The CBC is operating in the field of cigarette advertising naturally within the present legislation. We are meeting here as a committee to consider whether we should recommend changes in the legislation. If we recommend changes, one change might be

[Interprétation]

l'exemple et supprimer ces annonces. Vous dites que \$700,000 par année ce n'est à peu près rien, ne pensez-vous pas que le geste posé par une organisation publique serait un excellent exemple?

M. Ouimet: Nous aimerions sûrement donner l'exemple dans un bon nombre de domaines. Mais, soit dit en passant, les gens à qui nous sommes comptables lorsque nous avons d'autres difficultés financières verraient peut-être d'un autre œil le fait d'abandonner \$700,000 et il faudrait peut-être obtenir cette somme de \$700,000 ailleurs.

M. Mather: Je sais.

M. Ouimet: C'est, de fait, l'un de nos obstacles.

M. Mather: Mais l'expérience en Grande-Bretagne a été la suivante: l'interdiction d'annonces sur la cigarette, à la radio, n'a pas entraîné de pertes de revenus, car le temps dégagé par ces annonces a été rempli par d'autres genres d'annonces. Cependant, M^{me} MacInnis l'a souligné,—nous avons ici le rapport du ministère de la Santé,—bon nombre de pays sont en avance sur nous en ce qui concerne l'interdiction de la réclame sur l'usage du tabac.

J'ai été notamment intéressé par ce que le gouvernement d'Irlande compte faire; d'après ce rapport il compte atténuer, non pas supprimer complètement, mais atténuer peu à peu, progressivement, toute réclame de la cigarette à la radio et à la télévision au cours des deux prochaines années, à compter d'avril prochain. Ne pensez-vous pas que ce serait là une meilleure méthode en vue de l'abolition progressive de l'annonce, plutôt que de l'abolition complète et instantanée?

M. Ouimet: C'est peut-être le cas, mais, encore une fois, il me semble que je peux fort bien faire une recommandation en ce sens au conseil d'administration de Radio-Canada, mais cela dépasse ma compétence et il appartiendrait au conseil d'administration d'accepter ou non la recommandation. Il s'agirait d'une décision du conseil d'administration.

M. Mather: J'en conviens. Radio-Canada reçoit à l'heure actuelle, accepte des annonces sur la cigarette dans le cadre de la Loi.

Notre Comité se demande s'il doit recommander des modifications à la Loi. Si nous recommandons des modifications, une d'entre elles exigera peut-être qu'on atténue la ré-

[Text]

that we phase out broadcast or other advertising of cigarette products over the next two or three years. I just leave you with that idea, Mr. Chairman.

Mr. Ouimet: In that case I think I could say quite readily that you would not find considerable opposition on the part of the CBC to such a suggestion.

Mr. O. J. W. Shugg (Director of Commercial Sales Policy and Planning, Canadian Broadcasting Corporation): Mr. Chairman, could I add a word on Mr. Mather's last expression about phasing? As an advertising man I would say that if we are going to get out, let us get out, with no phasing.

Mr. Mather: You are going to cut the habit like that?

Mr. Shugg: Yes, because it simplifies the whole administrative process.

Mr. Mather: One further question, Mr. Chairman. Are the CBC people aware of the fact that the Federal Trade Commission in the United States in its most recent recommendation to their Congress came out with six very strong recommendations against cigarette advertising in every area, and the first one being that cigarette advertising on television and radio should be banned. You know that?

Mr. Ouimet: Yes, I heard this on the six o'clock news last night, and I read it in this morning's papers. And I was literally

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astonished to realize that the product of cigarette advertising to the United States broadcasting industry, with all comparisons made between the Canadian population and the United States population, represents \$312 million. It will represent a \$312 million loss in revenue in the United States, while in Canada to the broadcasting industry as far as we can assess it would represent \$5 million. Let us multiply by 20; that is \$100 million, which is a very far cry evidently from the situation which is being faced in the United States. It is three times the amount of advertising over-all.

Mr. Mather: Does this not underline the significance of the need for a similar action in North America? We have here a figure from the United States Public Health Service. The death rate for the smokers of cigarettes is about 70 per cent higher than for nonsmokers, in general health terms. This is a very long-range serious deep-rooted problem, sir, and I personally want to conclude my

[Interpretation]

clame sur l'usage du tabac au cours des deux ou trois prochaines années. Je vous laisse simplement cette idée.

M. Ouimet: Je peux dire alors sans plus qu'il n'y aurait pas beaucoup d'opposition à ce changement, à cette proposition, de la part de Radio-Canada.

M. O. J. W. Shugg (Directeur des ventes et de la planification commerciale, Radio-Canada): Puis-je ajouter un mot au sujet de la dernière question de M. Mather? Comme quelqu'un qui s'occupe de réclame, je crois que s'il s'agit d'interdire la réclame qu'on l'interdise, mais qu'il n'y ait pas d'atténuation.

M. Mather: Vous allez supprimer l'habitude comme ça?

M. Shugg: Oui. Cela simplifie tout le processus administratif.

M. Mather: Une dernière question, monsieur le président. Radio-Canada est-elle au courant du fait que les six dernières recommandations de la Commission fédérale américaine sur le commerce s'opposent à la réclame sur la cigarette et que la première recommandation exige l'interdiction totale de la publicité sur la cigarette, à la radio et à la télévision. Vous êtes au courant de cela?

M. Ouimet: J'ai entendu cela hier soir, aux nouvelles de 6 heures; je l'ai vu aussi dans le journal de ce matin, et j'ai été étonné de voir

que le produit de la réclame de la cigarette, pour l'industrie américaine, compte tenu des populations canadienne et américaine, représente \$312,000,000. Cela représente une perte de \$312,000,000 pour les États-Unis alors qu'au Canada, pour autant que nous puissions voir, cela représenterait \$5,000,000 et, si vous multipliez par 20, cela donnerait \$100,000,000, ce qui est beaucoup moins grave, évidemment, que la situation qui existe aux États-Unis. C'est trois fois moins de réclame.

M. Mather: Est-ce que cela ne démontre pas la nécessité d'une action uniforme à travers l'Amérique du Nord? Nous avons ici les données statistiques de la Commission américaine de la santé. Le taux de décès dans le cas de diverses maladies, dont le cancer du poumon, est beaucoup plus élevé dans le cas des fumeurs de cigarettes que dans le cas des non-fumeurs. Je tiens à terminer mes observations

[Texte]

remarks by complimenting the CBC on its very fine educational free-time work which has been carried, but I hope that we can find at the end of our deliberations we will come to some legislation as well as education. Thank you.

The Chairman: Mr. Robinson.

Mr. Robinson: Mr. Chairman, I have listened with interest to what has been said already and I do not want to cover the same ground, but I have several preliminary questions and then certain questions about the standards of advertising set out in this blue sheet.

First of all, Mr. Ouimet, from where did you get your terms of reference to provide your statement of the nine points of advertising ethics?

Mr. Ouimet: The normal practice is for management to approach, let us say, a certain policy and practice, to discuss it at length, and then to have it endorsed by the Board, whereupon it becomes regulation across the system.

Mr. Robinson: Can I assume that the same consideration is given to all other products advertised on CBC television?

Mr. Shugg: Yes, absolutely.

Mr. Robinson: Does this policy apply to all tobacco products or just to cigarettes?

Mr. Ouimet: All tobacco products; but I would say, of course, that the emphasis, as we all know, is mostly on cigarettes.

I noticed in a copy of one of the bills that the Chairman was kind enough to send me that only cigarettes and cigarillos are being mentioned. We are asking ourselves this morning about pipe smokers and cigar smokers, like my colleague to the right. He says, "I do not inhale". Perhaps that makes it less of a hazard.

Mr. Robinson: This is one of the points that concern me, too, about the advertising. It is the whole question of the use of tobacco, whether it is smoking cigarettes, cigars or pipes, or chewing tobacco.

Is the advertising designed to cover all of these various aspects or is it just the smoking of cigarettes that is covered?

Mr. Switallo: Perhaps you could repeat the question, please.

Mr. Robinson: I will put it this way: In your No. 1 advertising ethic you say, "Adver-

[Interprétation]

en félicitant Radio-Canada de ses excellentes émissions éducatives. J'espère qu'à la fin de nos délibérations nous pourrions en venir à une mesure législative et à des recommandations. Merci.

Le président: Monsieur Robinson.

M. Robinson: Monsieur le président, j'ai écouté avec beaucoup d'intérêt ce qui a été dit auparavant. Je ne veux pas revenir sur ce qui a été dit, mais il y a quelques questions que j'aimerais poser, en guise de préliminaire notamment au sujet des normes publicitaires qui nous sont données dans cette feuille bleue.

Tout d'abord, monsieur Ouimet, où prenez-vous vos références pour votre déclaration sur les neuf points de l'éthique publicitaire?

M. Ouimet: La manière habituelle pour la direction d'aborder certaines politiques et leur mise en application est, disons-le, de les discuter à fond, puis de les soumettre à l'approbation du Conseil d'administration. Elles acquièrent alors force de règlement dans toute la société.

M. Robinson: Est-ce qu'il en va de même pour tous les autres produits qui sont annoncés à Radio-Canada?

M. Shugg: Oui. Absolument.

M. Robinson: Est-ce que cette politique s'applique aussi aux produits du tabac ou seulement à la cigarette?

M. Ouimet: A tous les produits du tabac, mais comme vous le savez, c'est surtout sur la cigarette qu'on met l'accent. Je constate que, dans l'un des bills, que le président a eu l'amabilité de me montrer, on ne mentionne que les cigarettes et les cigarillos. Que dire des fumeurs de pipe et de cigares comme mon collègue à ma droite? Mais il dit qu'il n'aspire pas la fumée. Ce n'est peut-être pas un danger aussi grave.

M. Robinson: C'est l'un des points qui m'intéressent aussi, en ce qui a trait à la publicité. C'est toute la question de l'utilisation du tabac, qu'il s'agisse de la cigarette, de la pipe, du cigare, ou du tabac à chiquer. Est-ce que l'annonce va couvrir tous ces aspects, ou seulement la cigarette?

M. Switallo: Peut-être pourriez-vous reformuler votre question?

M. Robinson: Voilà. Si je jette un coup d'œil à votre code d'éthique publicitaire, on y

[Text]

tising for tobacco products..." Should that not read, "Advertising the use of tobacco products"? "Using," I assume, would convey that we are concerned about the smoking.

I think what the Committee is concerned about is the health hazard from the actual smoking of tobacco, and smoking to me indicates inhaling the nicotine and tar contents; whereas if one is chewing tobacco I do not suppose one gets this; if not, I suppose, does one get the same tar and nicotine content from smoking cigars or a pipe.

Mr. Switallo: Actually, the intent of the policy is that it apply equally to cigarettes, pipe and cigars, taking into account, of

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course, that the reported incidence of health hazard relating to these products differs somewhat. But we are not really differentiating between them, in fact, when we say, "Advertising for tobacco products"; we feel it is fairly inclusive—that it includes smoking, regardless of what the product is.

Mr. Robinson: But it seems to me what we are concerned about is the effects of the tobacco through smoking only. Suppose you were smoking something else.

Mr. Switallo: Such as what—pot, or heroin?

Mr. Robinson: It might be birch bark, or something...

Mr. Ouimet: We do not advertise the use of tobacco products as a cure for certain diseases, although this may have been the case, mind you, relative to the medicaments designed by the early settlers of this country, the Indians. They may have used tobacco for some cures, I do not know; I am not a doctor. Perhaps the medical men in the Committee would know about this.

But we are not advertising the use. Of course, any advertising is designed to bring about the use of what is advertised, whether it be soap or anything else.

Mr. Robinson: In your advertising ethic No. 2 you speak of "...children or adolescents..." I assume when you use the term "children" you mean up to the age of about eight, or nine, or ten, or something like that and, by "adolescents," up to about the age of 15 or 16? Is this what you mean?

Mr. Switallo: What we mean is children—pre-teens, adolescents, teenagers.

Mr. Robinson: Then we are considering the chronological age in this context, are we?

[Interpretation]

lit: «La publicité pour les produits du tabac...». Pourquoi pas «la publicité pour l'utilisation des produits du tabac»? Je suppose que ce qui nous intéresse, c'est le danger que représente pour la santé le fait de fumer. Et, fumer, pour moi, cela veut dire inhaler la nicotine et les goudrons de la cigarette, alors que si vous ne faites que mâcher le tabac vous n'absorbez sans doute pas la même quantité de ces produits. Si vous fumez le cigare vous n'aspirez sûrement pas autant de nicotine ou de goudrons.

M. Switallo: Actuellement, le but de cette politique c'est de s'appliquer également à la cigarette, à la pipe et au cigare, tenant

compte, bien entendu, du fait que les incidences signalées sur l'état de santé diffèrent quelque peu. Nous n'établissons pourtant pas de distinction entre les annonces pour les produits du tabac; c'est une proposition inclusive, sans égard aux produits consommés.

M. Robinson: Il me semble pourtant que l'objet de notre préoccupation, ce sont les effets produits par la fumée du tabac seulement—Supposons que l'on fume autre chose.

M. Switallo: Comme quoi? La Marijuana?

M. Robinson: Cela pourrait être de l'écorce de bouleau, ou autre chose.

M. Ouimet: Nous ne faisons pas de publicité pour l'emploi du tabac à fins curatives, bien que cela aurait pu être le cas pour certains médicaments mis au point par les indigènes du pays. Les Indiens pouvaient fort bien avoir utilisé le tabac pour certains traitements, je ne sais pas, je ne suis pas médecin. Messieurs les médecins, membres du Comité en ont peut-être connaissance. Mais nous ne faisons pas de publicité pour cet usage. Bien entendu, toute réclame est destinée à généraliser l'utilisation du produit annoncé, qu'il s'agisse d'un savon ou de quoi que ce soit d'autre.

M. Robinson: Au deuxième point de votre code publicitaire, vous parlez des enfants et des adolescents. A quels enfants songez-vous? Aux enfants de 8 ou 10 ans et aux adolescents âgés de 15 ou 16 ans? Est-ce bien cela?

M. Switallo: Nous voulons dire par là les enfants pré-adolescents, et les adolescents.

M. Robinson: Il s'agit donc d'âge chronologique dans le contexte, n'est-ce pas?

[Texte]

Mr. Ouimet: Just about yes; except that the children of today are more precocious than we were and the teenagers of today are also more precocious than we were.

Mr. Robinson: I notice there is no actual age limit; and when you talk about...

Mr. Ouimet: Roughly, 19 would be the limit when we talk of "adolescents." In fact, in the industry there has had a tendency over the years to refer to adolescents as young adults. I do not necessarily agree with this, but...

Mr. Robinson: If I may make my personal observation on this, it seems to me that if children see advertising of any kind, whether it be utilizing children or adults, they have a tendency to imitate and emulate. This is part of their growing-up procedure and all children do it.

Therefore, I do not see how you really avoid the problem merely by saying that those who will be used as participants in the commercials will be at least 25 years of age.

Mr. Switallo: It does not solve the problem entirely, but I think one can divide the problem into two sections. One is the identification that the adolescent or the teenager seeks with the adult world, as such, which is a real problem relating to social values; and the other aspect is that if in that type of environment you were to have teenagers—the peers of the adolescent—you would have a greater degree of identification. Call it control by degree, if you will, but we feel that by eliminating the teenager from the commercial we control the identification.

Mr. Robinson: In other words, you accept the fact that this is only partially effective?

Mr. Switallo: Absolutely; and this is one of our biggest problems in the review of commercials.

The adult world—the good life—that is portrayed in cigarette commercials appeals to adults, no doubt, relative to the switching of brands, it also has a very strong appeal to teenagers. This is where we have to focus our attention when we look at the whole problem of smoking and the teenager—the question of social values as they are portrayed in cigarette advertising.

Mr. Robinson: When I look at ethic No. 3, which pertains particularly to brands, I notice the absence of the words "tobacco",

[Interprétation]

M. Ouimet: A peu près, sauf que les enfants d'aujourd'hui sont beaucoup plus précoces que nous ne l'étions, de même que les adolescents.

M. Robinson: Je constate qu'il n'y a pas de limite d'âge d'indiquée.

M. Ouimet: En parlant d'«adolescents», 19 ans serait approximativement la limite. De fait, on constate dans l'industrie, au fil des années, la tendance à parler des adolescents comme de jeunes adultes—ce que je n'approuve pas nécessairement d'ailleurs—

M. Robinson: Il me semble, si vous me permettez cette observation, que lorsque des enfants voient des annonces de quelque genre que ce soit, qu'il s'agisse d'annonces pour enfants ou pour adultes, ils ont tendance à l'imitation, à l'émulation. C'est là un élément de leur processus de croissance et tous les enfants le font. Je ne pense pas qu'on puisse contourner le problème en disant simplement que les personnes appelées à réagir à des messages commerciaux auront au moins 25 ans.

M. Switallo: Je ne pense pas que cela règle le problème complètement, mais on doit pouvoir le séparer en deux parties. Premièrement, le fait que l'adolescent cherche à s'identifier au monde des adultes ce qui est un véritable problème touchant aux valeurs sociales. L'autre aspect, c'est que, dans ce contexte, avec des adolescents qui semblent être des adultes, vous aurez un degré plus intense d'identification. Appelez cela contrôle par degrés si vous voulez, mais nous estimons qu'en éliminant les adolescents de ces annonces, nous contrôlons, jusqu'à un certain point, le sentiment d'identification.

M. Robinson: Vous admettez donc le fait que ce n'est là qu'une solution partielle?

M. Switallo: Absolument. C'est l'un des plus grands problèmes que nous ayons dans le domaine de la réclame. Le monde des adultes, la vie agréable dépeinte dans les messages commerciaux pour cigarettes, si cela est fait pour séduire les adultes, de par les jeux de la publicité, exerce indubitablement une très forte séduction sur les adolescents. Et, voilà précisément où nous devons concentrer notre attention en étudiant tout le problème de la cigarette et de l'adolescent: la question des valeurs sociales telles qu'elles sont décrites dans la publicité des cigarettes.

M. Robinson: Au troisième point de votre code d'éthique, qui a trait aux marques, notamment, je constate que l'on ne mentionne

[Text]

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"cigarettes", "cigars", and so on. Am I to assume that it is quite all right to advertise if you say "Smoke British Consols", or "Smoke Players", but it is not right to say, "Smoke Players' cigarettes"?

Mr. Switallo: No, the intent of that is really what it says—to get the smoker to switch brands. Commercial use that as the basis for their theme to be developed in a format of "try our brand for a different taste".

Mr. Robinson: But the point is that this is all concerned with the habit of smoking tobacco.

Mr. Switallo: That is right.

Mr. Robinson: But suppose it was the smoking of something else. You could have a brand name product that smells, tastes and looks like tobacco, and has practically everything except the tars and nicotine. Why could you not just advertise it on that basis—that it is your brand name?

Mr. Shugg: Mr. Chairman, surely the subject at the top is the key to everything that follows. The subject at the top says, "Advertising for Tobacco Products" and everything that follows must then relate to tobacco products.

Mr. Robinson: I appreciate that, but supposing somebody comes along with something that looks and tastes and smells like tobacco and wants to compete with tobacco. Would it not fall under the same kind of advertising ethics?

Mr. Shugg: When that happens we will have to have another policy to cover that particular kind of subject.

Mr. Ouimet: It may be, mind you, that in such a case we would ask the advice of the Food and Drug Directorate to know what kind of product this happens to be.

Mr. Robinson: Looking at No. 4, would it be possible to advertise in such a manner as this: smoke these and you will live longer?

Mr. Switallo: No, absolutely not; we consider that a direct health claim. As far as we will go is: smoke this particular cigarette with this filter which delivers 9.9 milligrammes of tar—period.

[Interpretation]

pas les mots: tabac, cigarette, cigare, etc. Dois-je en conclure qu'on peut très bien faire de la réclame en disant: fumez les «Players», ou les «Consul», mais qu'on ne doit pas dire: fumez les cigarettes «Players»?

Mr. Switallo: Non, ce n'est pas du tout la question. Il s'agit plutôt d'inciter le fumeur à changer de marque. Les messages commerciaux utilisent ce moyen pour le convaincre d'essayer une nouvelle marque, «pour un goût différent.»

Mr. Robinson: Mais il n'en reste pas moins que tout cela relève de l'habitude de fumer du tabac?

Mr. Switallo: C'est exact.

Mr. Robinson: Mais, supposons qu'on fume autre chose, un autre produit que le tabac? Vous pourriez avoir un produit commercialisé ayant l'odeur, le goût et l'apparence du tabac, et qui en a pratiquement toutes les caractéristiques à l'exclusion de nicotine et de goudron. Ne pourrait-on pas annoncer un produit de ce genre?

Mr. Shugg: Monsieur le président, assurément, le sujet primordial, c'est celui qui est indiqué au sommet. Ici, le titre est: «Publicité pour les produits du tabac», et tout ce qui suit doit donc traiter des produits du tabac.

Mr. Robinson: Bien sûr, mais supposons que quelqu'un présente un produit qui aurait le goût et l'odeur du tabac et veuille concurrencer le tabac. Est-ce que cela ne tomberait pas sous le coup du même mode d'éthique publicitaire?

Mr. Shugg: Quand cela se produira, il nous faudra une autre politique pour ce sujet particulier.

Mr. Ouimet: Il se peut que, dans ce cas, nous demandions conseil à la Direction des aliments et drogues pour savoir de quel genre de produit il s'agit.

Mr. Robinson: Pour ce qui est du n° 4, serait-il possible de faire des annonces de ce genre: «Fumez les cigarettes de cette marque, et vous vivrez plus longtemps.»

Mr. Switallo: Non, absolument pas. Ce serait là un appel direct à la question de la santé. La seule chose que l'on puisse dire, c'est: «Fumez cette cigarette, avec tel filtre, qui laisse passer 9.9 milligrammes de goudron.» Un point, c'est tout.

[Texte]

Mr. Robinson: Supposing there is something along with the tobacco that is helpful such as, say, menthol? Are you allowed to advertise in this manner: smoke menthol—you do not say, smoke tobacco; you just say smoke menthols, I suppose—and it will clear up your sinuses or something like this?

Mr. Switallo: If, in fact, there was that type of element in cigarettes, which there is not—making your question hypothetical—we would say no within the over-all context of cigarettes, because there would still be the element of tar and nicotine. We would still allow for it, of course. They could make a factual statement of whatever it does.

Mr. Robinson: Could they say, for instance, that it helps your smoker's cough or something of this nature?

Mr. Switallo: I could not answer that on the basis of its being a hypothetical question. If, in fact, there was some sort of element in a cigarette that had a bearing on the health factor, we would allow a statistical claim analogous to say, tar and nicotine content. That, of course, would have to be determined on the basis of an individual commercial and a specific claim.

Mr. Robinson: Would you allow advertising something like this: our cigarette has less tar and nicotine than that considered a safe level by such and such an organization or by the Department of Health and Welfare or by Dr. So and So?

Mr. Switallo: No, we feel that would go too far. We have been applying the point to a factual statement only—a filter that delivers so many milligrammes of tar, period. We go no further than that on the grounds that we feel that in permitting tar and nicotine statistics in a commercial, we in fact do provide some form of service to the smoker by way of health considerations, giving him information as to a cigarette that has a low tar and nicotine content. We do not allow advertisers to exploit that because regardless of the amount of tar and nicotine in a cigarette, you still have the question of a health hazard; it is just a question of degree.

Mr. Robinson: Looking at No. 9, can you say that something is, not necessarily essen-

[Interprétation]

M. Robinson: Et s'il y a quelque chose, en même temps que le tabac, qui peut être bénéfique—comme le menthol? Avez-vous le droit de faire des annonces du genre: «Fumez du menthol»—vous ne dites pas du tabac mentholé, mais seulement du menthol—«cela dégagera vos sinus». Est-ce que vous pouvez dire des choses de ce genre?

M. Switallo: Supposons qu'il y ait un tel élément dans les cigarettes—qu'en fait il n'y a pas—nous disions non tout de même, pour ce qui est de la cigarette, parce qu'il y aurait toujours l'élément du goudron et de la nicotine. Bien sûr, nous autoriserions que l'on déclare les faits positifs.

M. Robinson: Par exemple, est-ce que l'on pourrait dire que cela aide à soulager la toux du fumeur ou quelque chose de ce genre?

M. Switallo: Je ne pourrais pas répondre à cela, parce que c'est une question hypothétique. Si, de fait, il existait un élément dans une cigarette donnée qui avait une influence sur le facteur santé, nous permettrions des déclarations statistiques analogues, disons, à celles qui indiquent la proportion de goudron et de nicotine. Mais cela, bien entendu, devrait être déterminé pour chaque annonce en particulier.

M. Robinson: Est-ce que vous permettriez une annonce du genre: «la teneur en nicotine et en goudron de notre cigarette est inférieure à celle que considèrent comme étant à la limite de la sécurité tel organisme, tel médecin, ou le ministère de la Santé nationale et du Bien-être social»?

M. Switallo: Non, cela irait trop loin. Nous permettons seulement de dire que le filtre laisse passer tant de milligrammes de goudron, c'est tout. Car nous pensons qu'en permettant les données statistiques sur le goudron et la nicotine dans la publicité, nous rendons service au fumeur en ce qui concerne les questions de santé, en l'informant sur les cigarettes dont la teneur en goudron et en nicotine est faible. Nous ne permettons pas aux annonceurs d'exploiter cet aspect parce que, quelle que soit la teneur en goudron et en nicotine d'une cigarette, il y a toujours un danger pour la santé; c'est simplement une question de degré.

M. Robinson: Au sujet du n° 9, pouvez-vous dire que quelque chose est, non pas forcé-

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tial, but rather preferable, or that it enhances? In other words this question of degree comes up here and I am just wonder-

ment essentiel, mais préférable, ou que cela rehausse? Autrement dit, cette question de degré se pose encore une fois, et je me

[Text]

ing how much latitude you have in this regard.

Mr. Switallo: I could give you an example. A commercial based on a theme of switching from a certain brand of cigarettes to another and suddenly getting a promotion or marrying the boss's daughter is what we mean here. The idea that you present a taste theme for cigarettes against a background of sylvan beauty and bubbling streams and pretty women we consider background and incidental and we do not consider it the essential copy theme of the commercial and we would accept that.

I think if you look at almost any cigarette commercial on television today you will find that background. It is associated and it is presented with the pleasures of smoking. I will admit to you, quite candidly, that it is a problem area; probably, "the" problem area in cigarette advertising today on television.

Mr. Robinson: How do you control the approach to the power of suggestion in the advertising that is presented to you?

Mr. Switallo: Well, you said it there; it is by degree. It is a question of individual review and by rule of thumb, keeping the good life in the background and not using it as the dominant theme or tying it directly with the sell.

Mr. Robinson: Those are all the questions I have at the present time, Mr. Chairman.

The Chairman: Are there any other questions?

Mr. Yewchuk: You mentioned that the advertising is supposed to be directed towards the changing of the brands because of a different taste, but I remember when I was younger and did not smoke at all—I have occasionally since then—this very fact that taste was stressed made me very curious to see what this taste was like. My contention is that this does attract young people to smoking.

Secondly, there is the problem of identification. Teenagers identify more with teenagers, but I think this is catching the problem too late because the personality by this time is already formed. Really you have to go farther back to the age of six or seven where children identify more with their parents or with people who are similar to their parents. What is happening in this form of advertising is that younger children are identifying with

[Interpretation]

demande quelle latitude vous avez à cet égard?

M. Switallo: Je pourrais vous donner un exemple. Une réclame dont le thème est de passer d'une marque de cigarette à une autre et d'obtenir soudain une promotion ou d'épouser la fille du patron, c'est ce que nous voulons dire. Par contre, nous permettons que l'on présente un thème relatif au goût d'une cigarette dans un décor champêtre, avec des ruisseaux et de jolies femmes, car nous considérons cela comme faisant partie du décor et non comme étant le thème central de l'annonce.

Si vous regardez n'importe quelle annonce de cigarette à la télévision, à l'heure actuelle, vous verrez qu'il y a ce genre de décor. Cela est associé et présenté avec les plaisirs de la cigarette. Mais je dois vous avouer, en toute franchise, que cela nous cause des problèmes; c'est peut-être le problème essentiel, aujourd'hui, de la publicité des cigarettes à la télévision.

M. Robinson: Comment contrôler le pouvoir de suggestion des réclames que l'on vous propose?

M. Switallo: Vous l'avez dit: c'est une question de degré. Nous devons juger les cas individuels et y aller au flair, pour garder à l'arrière le thème de la vie agréable et ne pas l'utiliser comme le thème dominant ou le mettre en rapport direct avec le produit à vendre.

M. Robinson: C'est là toutes les questions que j'ai à poser pour le moment, monsieur le président.

Le président: Y a-t-il d'autres questions?

M. Yewchuk: Vous avez mentionné que la réclame est censée être dirigée vers un changement de marque à cause de la différence de goût. Mais je me souviens que lorsque j'étais plus jeune et que je ne fumais pas du tout—il m'est arrivé de fumer depuis—le fait même que l'on insistait sur le goût me rendait très curieux d'essayer la chose pour voir ce qu'était ce goût. Et cela, à mon avis, pousse les jeunes à fumer.

Deuxièmement, il y a le problème de l'identification. Les adolescents s'identifient plutôt avec les jeunes de leur âge. Mais il est déjà trop tard, car la personnalité est déjà formée. En fait, il faut remonter jusqu'à l'âge de six ou sept ans, où les enfants s'identifient davantage à leurs parents ou aux adultes qui les entourent. Avec ce genre de réclame, les jeunes enfants s'identifient aux adultes auxquels ils veulent ressembler. Et je

[Texte]

adults like whom they want to be. I think this is just as harmful, or as enticing, to children younger than teenage as teenagers smoking and enticing other teenagers to start smoking.

Mr. Ouimet: I think, mind you, that one of the safeguards there, Mr. Chairman, is the fact that cigarette advertising is not actually put on the air until 9 o'clock at night, although many 12-year-olds are still up. We have that problem in this field; we have it in many other fields. Canada's CBC, or any broadcaster for that matter, takes over the responsibility of the parents or of the school authorities or of the educational authorities, the health departments of the provinces and of the federal government.

We know, and this is one of our worries, that in many instances television in too many families has become a sort of electronic baby-sitter. But when you talk of children below 12, they should not be exposed to cigarette advertising before 9 o'clock and at that time I would expect them to be in bed, or if they are not in bed, to be studying or finishing their homework. This may not be the case in many families, but this is one of the problems we have in many other fields which I do not care to discuss.

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Mr. Robinson: Mr. Chairman, I want to mention that these are old-fashioned ideas. We must get up to date on what the children are actually doing now. What are their living habits? They are not doing the same things, as you mentioned yourself, Mr. Ouimet, that you and I did as children.

Mr. Ouimet: Oh, I think we have a pretty good idea of the living habits of children today through research and so forth.

Mr. Robinson: This brings up a supplementary question.

Mr. Ouimet: To give you an idea, somebody from the Film Board gave me a staggering figure the other day. They have estimated that by the time a child reaches college he has seen 500 feature films, and he has been exposed to about 15,000 hours of television. This is staggering, but these figures were given not longer than 10 days ago by someone who happens to be in a parent industry.

[Interprétation]

pense que cela est aussi nuisible, ou attirant, pour les enfants que l'exemple des adolescents qui fument et encouragent les jeunes de leur âge à fumer.

M. Ouimet: Remarquez, monsieur le président, je pense qu'il y a une certaine protection dans le fait que les réclames pour la cigarette ne sont pas diffusées avant neuf heures du soir, encore qu'il y ait certainement des enfants de douze ans qui sont debout à cette heure-là. C'est un problème auquel nous devons faire face dans ce domaine, mais qui existe aussi dans bien d'autres domaines. La Société Radio-Canada, ou tout organisme de radiodiffusion, d'ailleurs, assume la responsabilité des parents, des autorités scolaires ou éducatives, et des ministères de la santé fédéral et provinciaux.

Nous savons très bien, et c'est ce qui nous inquiète, que, dans bien des cas, le poste de télévision est devenu une sorte de gardienne d'enfants électronique, dans un trop grand nombre de familles. Mais lorsqu'il s'agit d'enfants de moins de douze ans, ils ne devraient pas être exposés à la réclame pour les cigarettes avant neuf heures du soir, et à cette heure-là, ils devraient être au lit, ou s'ils ne sont pas couchés être en train d'étudier ou de finir leurs devoirs. Cela n'est peut-être pas le cas dans bien des familles. Mais c'est là un des problèmes qui se posent dans bien d'autres domaines, et dont je ne veux pas parler ici.

M. Robinson: Monsieur le président, ce sont là des idées démodées. Nous devons nous mettre à jour sur la manière dont les enfants vivent aujourd'hui. Ils ne vivent pas comme nous le faisons vous et moi lorsque nous étions enfants.

M. Ouimet: Nous connaissons assez bien le mode de vie des enfants aujourd'hui, grâce aux recherches, etc.

M. Robinson: Cela amène une question supplémentaire.

M. Ouimet: Pour vous donner un exemple, une personne de l'Office national du film m'a donné l'autre jour un chiffre affolant. On a estimé que lorsque l'enfant arrive à l'âge du collège, il a déjà vu 500 films à long métrage, et a été exposé à environ 15,000 heures de télévision. Ce sont des chiffres stupéfiants mais qui nous ont été donnés il y a environ dix jours par une personne qui est dans une industrie semblable à la nôtre.

[Text]

Mr. Robinson: Mr. Ouimet, does the CBC have any definite anti-smoking campaign going on at the present time?

Mr. Ouimet: No, we have no definite anti-smoking campaign, but we certainly are conscious of the necessity for fully co-operating with the authorities in this field, and of our public responsibility.

Mr. Robinson: You mentioned earlier that you do have a certain amount of public service announcements regarding this kind of thing; are they all sponsored by interested groups in the community?

Mr. Ouimet: They are the product of the federal Department of National Health and Welfare.

Mr. Robinson: Does the tobacco industry in any of its forms, whether retailers, producers, growers or what have you, provide any public service announcements on the CBC with regard to health hazards in the use of tobacco?

Mr. Ouimet: Not to my knowledge, sir. At the same time, I have no evidence to the effect that the use of these announcements has been protested by the advertisers. We were discussing this at a meeting just a few days ago with some people who came from the tobacco belt where a private television station is running these announcements, and even the people in the tobacco belt are not opposing them.

Mr. Robinson: Does the Department have any evidence to the effect that the use of these public service announcements has helped people to stop smoking?

Mr. Ouimet: You would have to ask this of the directorate responsible for this particular campaign. They told me definitely it has had an impact; that these announcements have had an impact because, there is no getting away from it, they are well done and they attract attention.

The Chairman: If there are no further questions, gentlemen, I wish, on your behalf to thank Mr. Ouimet...

...pour sa présence et sa collaboration.

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I wish also to thank the Director of Commercial Sales Policy and Planning, Mr. Shugg and also his assistant Mr. Robert Switallo. Thank you very much, gentlemen.

We will let you know when the next meeting will take place. The meeting is adjourned to the call of the Chair.

[Interpretation]

M. Robinson: Est-ce que la Société Radio-Canada a entrepris une campagne contre le tabac en ce moment?

M. Ouimet: Non, nous n'avons pas de campagne spéciale contre le tabac mais nous sommes conscients de la nécessité de collaborer avec les autorités dans ce domaine et nous sommes conscients aussi de notre responsabilité envers le public.

M. Robinson: Les commerciaux d'intérêt public sont-ils commandités par des groupes intéressés dans la communauté canadienne?

M. Ouimet: Ils sont produits par le ministère de la santé et du Bien-être social.

M. Robinson: Est-ce que l'industrie du tabac, les détaillants, les producteurs ou les fabricants, procurent à Radio-Canada des annonces au sujet des dangers de la cigarette?

M. Ouimet: Non, pas à ma connaissance. En même temps, je dois dire que je n'ai aucune preuve que les annonceurs aient protesté contre ces programmes. Nous avons eu une réunion il y a quelques jours, avec des gens qui viennent des régions productrices de tabac et ils m'ont dit qu'un poste indépendant de télévision dans cette région-même diffusait aussi ces programmes.

M. Robinson: Pensez-vous que ces programmes ont aidé les gens à cesser de fumer?

M. Ouimet: Je pense qu'il faudrait demander cela au Service chargé de ces campagnes contre le tabac. Selon ce département, cette campagne a été d'une certaine utilité, ces programmes ont eu une influence, parce qu'ils sont bien préparés, ils attirent l'attention du public.

Le président: Si vous n'avez pas d'autres questions, je voudrais en votre nom remercier M. Ouimet for his presence here.

Je veux aussi remercier M. Shugg et son assistant M. Switallo. Merci beaucoup messieurs. Nous vous ferons savoir quand aura lieu la prochaine réunion. La séance est levée.

OFFICIAL BILINGUAL ISSUE

HOUSE OF COMMONS

First Session

Twenty-eighth Parliament, 1968-69

FASCICULE BILINGUE OFFICIEL

CHAMBRE DES COMMUNES

Première session de la

vingt-huitième législature, 1968-1969

STANDING COMMITTEE

ON

**HEALTH, WELFARE AND
SOCIAL AFFAIRS**

Chairman

M. Gaston Isabelle

COMITÉ PERMANENT

DE LA

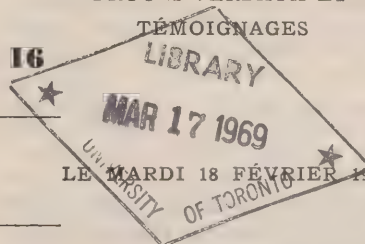
**SANTÉ, DU BIEN-ÊTRE SOCIAL
ET DES AFFAIRES SOCIALES**

Président

MINUTES OF PROCEEDINGS
AND EVIDENCE

No. 16

PROCÈS-VERBAUX ET
TÉMOIGNAGES



TUESDAY, FEBRUARY 18, 1969

LE MARDI 18 FÉVRIER 1969

Respecting

BILL C-102,

An Act to amend the Patent Act, the Trade
Marks Act and the Food and Drugs Act.

Concernant

Le BILL C-102.

Loi modifiant la Loi sur les brevets, la Loi
sur les marques de commerce et la Loi
des aliments et drogues.

Appearing:

Minister of Consumer and Corporate Affairs

Hon. Stanley Ronald Basford

Parliamentary Counsel

M. Maurice Ollivier, c.r.

Ont comparu:

Ministre de la Consommation
et des Corporations

Conseiller parlementaire

WITNESSES—TÉMOINS

(See Minutes of Proceedings)

(Voir Procès-verbaux)

THE QUEEN'S PRINTER, OTTAWA, 1969
L'IMPRIMEUR DE LA REINE, OTTAWA, 1969

STANDING COMMITTEE ON
HEALTH, WELFARE AND
SOCIAL AFFAIRS

Chairman
Vice-Chairman

M. Gaston Isabelle
Mr. Steve Otto

and Messrs.
et Messieurs

COMITÉ PERMANENT DE
LA SANTÉ, DU BIEN-ÊTRE SOCIAL
ET DES AFFAIRES SOCIALES

Président
Vice-président

⁴ Crossman,
Forget,
Fortin,
Foster,
Godin,
⁵ Guilbault,

Howe,
Mrs. MacInnis (M^{me}),
McBride,
Monteith,
Ritchie,
Robinson,

Rochon,
² Rynard,
⁵ Saltsman,
Thomas (*Maisonneuve*),
¹ Whicher,
Yewchuk—(20).
(Quorum 11)

La secrétaire du Comité:
Gabrielle Savard
Clerk of the Committee.

Pursuant to S.O. 65(4)(b)

Conformément à l'article 65(4) b) du
Règlement

¹ Replaced Mr. Boulanger on February 7

¹ Remplace M. Boulanger le 7 février

² Replaced Mr. Knowles (Norfolk-Hal-
dmand) on February 17

² Remplace M. Knowles (Norfolk-Haldi-
mand) le 17 février

³ Replaced Mr. Haidasz on February 17

³ Remplace M. Haidasz le 17 février

⁴ Replaced Mr. Gendron on February 17

⁴ Remplace M. Gendron le 17 février

⁵ Replaced Mr. Mather on February 18

⁵ Remplace M. Mather le 18 février

(Text)

MINUTES OF PROCEEDINGS

TUESDAY, February 18, 1969.
(19)

The Standing Committee on Health, Welfare and Social Affairs met this day at 10.45 o'clock a.m. The Chairman, Mr. Gaston Isabelle, presided.

Members present: Mrs. MacInnis, Messrs. Crossman, Forget, Foster, Guilbault, Howe, Isabelle, McBride, Monteith, Otto, Ritchie, Robinson, Rochon, Rynard, Saltsman, Thomas (*Maisonneuve*), Yewchuk—(17).

Other members present: Messrs. Émard and Watson.

Appearing: The Hon. Stanley Ronald Basford, Minister of Consumer and Corporate Affairs; Mr. Maurice Ollivier, Parliamentary Counsel.

Witnesses: Dr. R. A. Chapman, Director General, Food and Drug Directorate, Department of National Health and Welfare; Mr. D. H. W. Henry, Q.C., Director of Investigation and Research, Combines Investigation Act, Department of Consumer and Corporate Affairs.

The Committee resumed consideration of Clause 5 of Bill C-102, An Act to amend the Patent Act, the Trade Marks Act and the Food and Drugs Act.

The Chairman presented the Fifth Report of the Subcommittee on Agenda and Procedure as follows:

The Subcommittee recommends:

1. That a letter dated February 7, received from Dr. Ferguson of Connaught Medical Research Laboratories, and a telegram received on February 7 from Doctors Ford, Pernarowski and Darrach be read into the record of the Committee;
2. That the suggestions contained in Mr. Ian Watson's letter of February

(Texte)

PROCÈS-VERBAL

Le MARDI 18 février 1969
(19)

Le Comité permanent de la Santé, du Bien-être social et des Affaires sociales se réunit aujourd'hui à 10 h. 45 du matin, sous la présidence de M. Gaston Isabelle.

Présents: M^{me} MacInnis et MM. Crossman, Forget, Foster, Guilbault, Howe, Isabelle, McBride, Monteith, Otto, Ritchie, Robinson, Rochon, Rynard, Saltsman, Thomas (*Maisonneuve*), Yewchuk (17).

Autres députés présents: MM. Émard et Watson.

Ont comparu: L'honorable Stanley Ronald Basford, ministre de la Consommation et des Corporations; M. Maurice Ollivier, c.r., conseiller parlementaire.

Témoins: D^r R. A. Chapman, directeur général, Direction des aliments et drogues, ministère de la Santé nationale et du Bien-être social; M. D. H. W. Henry, c.r., directeur des enquêtes et recherches sur la coalition, Loi relative aux enquêtes sur la coalition, ministère de la Consommation et des Corporations.

Le Comité reprend l'étude de l'article 5 du Bill C-102, Loi modifiant la Loi sur les brevets, la Loi sur les marques de commerce et la Loi des aliments et drogues.

Le Président présente le Cinquième Rapport du sous-comité du programme et de la procédure comme suit:

Le sous-comité recommande:

1. Que la lettre du D^r Ferguson, des Laboratoires de recherches médicales Connaught, et la dépêche reçue le 7 février des Docteurs Ford, Pernarowski et Darrach soient incorporées au compte rendu du Comité;
2. Qu'on ne donne pas suite aux suggestions contenues dans la lettre du 6 février de M. Ian Watson, étant donné

6 be not followed as they do not comply with the resolution adopted January 28;

3. That the document received from the Pharmaceutical Manufacturers Association of Canada be acknowledged, but be not considered as new evidence.

After debate thereon, Mrs. MacInnis moved, seconded by Mr. Robinson, that the Fifth Report of the Subcommittee on Agenda and Procedure be adopted. The motion carried on the following division: YEAS 11, NAYS 5.

Mr. Saltsman moved that a new paragraph (c) be added to subsection (1a) in Clause 5 as follows:

“(c) The establishment of a Crown Corporation on behalf of Her Majesty which shall be empowered to manufacture, sell, distribute and promote drugs offered for sale in Canada.”

Mr. Ollivier was consulted, and the Chairman ruled the amendment out of order.

Mrs. MacInnis moved that a new paragraph (c) be added to subsection (1a) in Clause 5 as follows:

“(c) The permitting of hospital pharmacies, under the direction of a licensed pharmacist, to provide narcotics and control drugs on prescription under the Food and Drug Act and The Narcotics Control Act.”

After consultation with the Parliamentary Counsel, the amendment was ruled out of order by the Chairman.

Mr. Saltsman moved that a new paragraph (c) be added to subsection (1a) in Clause 5 as follows:

“(c) All prior submission of advertisements on prescription drugs addressed to doctors, pharmacists, hospitals and health institutions should be made to the Food and Drug Directorate including information relating to side effects,

qu'elles ne sont pas conformes à la résolution adoptée le 28 janvier;

3. Qu'un accusé de réception soit adressé à l'Association canadienne des fabricants en pharmacie (PMAC), mais que son document ne soit pas considéré comme apportant des éléments nouveaux.

Après discussion, M^{me} MacInnis propose, appuyé par M. Robinson, que le Cinquième Rapport du sous-comité du programme et de la procédure soit adopté. La proposition est adoptée sur division: POUR, 11; CONTRE, 5.

M. Saltsman propose qu'un nouvel alinéa c) au paragraphe (1a) soit inséré à l'article 5 comme suit:

«c) La création d'une société de la Couronne qui aura le pouvoir de fabriquer des médicaments, de les annoncer, de les vendre et de les distribuer au Canada.»

Après consultation avec le conseiller parlementaire, l'amendement est déclaré irrecevable par le Président.

M^{me} MacInnis propose qu'un nouvel alinéa c) au paragraphe (1a) soit inséré à l'article 5 comme suit:

«c) Qu'il soit permis aux pharmacies des hôpitaux, sous la direction d'un pharmacien diplômé, de fournir sur ordonnance des narcotics et des médicaments contrôlés, conformément à la Loi des aliments et drogues et à la Loi sur les stupéfiants.»

M. Ollivier est consulté et le président déclare l'amendement irrecevable.

M. Saltsman propose qu'un nouvel alinéa c) au paragraphe (1a) soit inséré à l'article 5 comme suit:

«c) La réclame expédiée aux médecins, aux pharmaciens, aux hôpitaux et aux institutions de santé au sujet de médicaments, soit d'abord soumise à la Direction des aliments et drogues et qu'on y ajoute les renseignements per-

contra-indications, and effectiveness.”

After consultation with the Parliamentary Counsel and debate thereon, the question being put on the amendment, it was resolved in the negative on the following division: YEAS 2; NAYS 11.

Mrs. MacInnis moved that a new paragraph (c) be added to subsection (1a) in Clause 5 as follows:

“(c) The prohibition of distribution of drug samples by drug manufacturers for purposes of advertising and promotion, except when a physician or the pharmacist makes a separate specific written request for samples of the particular drug or drugs in which he may be interested.”

After consultation with the Parliamentary Counsel, the Chairman ruled the amendment out of order.

After further discussion,

Clause 5 carried.

The Title carried.

The Bill carried, and the Chairman was instructed to report the Bill to the House.

The Chairman thanked the Minister. He also thanked the officials present, and the Parliamentary Counsel for their co-operation. The Minister thanked the Members for their consideration of the Bill and asked for their co-operation and support at the report stage in the House.

At 12.15 p.m., the Committee adjourned to 3.30 p.m. this day.

tinents relatifs aux effets secondaires, aux contre-indications et à l'efficacité de ces mêmes médicaments.»

Après consultation avec le conseiller parlementaire et après discussion, ladite proposition d'amendement, mise aux voix, est rejetée sur division: POUR, 2; CONTRE, 11.

M^{me} MacInnis propose qu'un nouvel alinéa c) au paragraphe (1a) soit inséré à l'article 5 comme suit:

«c) La distribution par les fabricants des échantillons de produits pharmaceutiques dans un seul but publicitaire, sauf si un médecin ou un pharmacien demande expressément par écrit des échantillons de tel ou tel médicament qui l'intéresse.»

Après consultation avec le conseiller parlementaire, l'amendement est déclaré irrecevable par le Président.

Après plus ample discussion,

l'article 5 est adopté.

Le titre est adopté.

Le Bill est adopté et le Président est prié d'en faire rapport à la Chambre.

Le Président remercie le ministre et les hauts fonctionnaires présents de leur coopération, de même que le conseiller parlementaire. Le ministre à son tour remercie les membres du Comité pour leur étude du Bill et il sollicite leur coopération et leur appui lors de la présentation du Bill à la Chambre.

A 12 h. 15 de l'après-midi, le Comité s'ajourne à 3 h. 30, ce jour.

*La secrétaire du Comité,
Gabrielle Savard
Clerk of the Committee.*

[Text]

EVIDENCE

(Recorded by Electronic Apparatus)

Tuesday February 18, 1969

• 1041

The Chairman: Lady and gentlemen, I now see a quorum.

We are now resuming consideration of Clause 5 of Bill No. C-102. Before we proceed I would like to inform the Committee of the subcommittee's report.

(See Minutes of Proceedings)

The Chairman: Is there any discussion on the report?

Mr. Watson: I was not at the meeting at which it was decided that witnesses from the Economic Council of Canada would be called. What is the basis for your deciding that it would be worth while calling witnesses from the Economic Council of Canada? It was on this basis that the whole question of witnesses was opened up last week and it was on this basis that my suggestion was made, because the Economic Council of Canada and the Department of Industry and Dr. Firestone, I thought, gave inadequate reasoning for their inability to answer questions, or they did not, in my view, explain away their inability to answer the question.

I think the questions that were posed are capable of being answered but this individual and the two departments simply indicated they did not feel able to do it. It was opened up in this Committee; now, just how was it opened up? If it was opened up for witnesses from the Economic Council of Canada why has the door suddenly been closed? On what basis have you closed the door?

The Chairman: Well, we did not close the door—it depends on what you mean by closing the door. We have to stick to our own rulings and the ruling that we made on January 28 is very clear, that no witnesses be called because the subject was fully covered in the previous sessions, and unless good and valid arguments are given that there is brand new evidence, the Committee should not hear any new witnesses.

Furthermore, I believe that if the Chairman of the Economic Council of Canada, if Dr. Firestone and if an economist from the

[Interprétation]

TÉMOIGNAGES

(Enregistrement électronique)

Le mardi 18 février 1969.

Le président: Madame et messieurs, je crois qu'il y a maintenant quorum.

Nous reprenons l'étude de l'article 5 du Bill C-102. Avant que nous ne commencions la discussion, j'aimerais vous faire connaître le rapport du sous-comité.

(Voir les procès-verbaux).

Le président: Y a-t-il discussion là-dessus?

M. Watson: Je n'étais pas présent à la séance au cours de laquelle on a décidé de convoquer des témoins du Conseil économique du Canada. Quelle raison vous a poussés à prendre cette décision? Car la raison pour laquelle toute la question des témoins a été soulevée la semaine dernière et que j'ai fait ma proposition, c'est que le Conseil économique du Canada et le ministère de l'Industrie et M. Firestone avaient présenté, à mon sens, des arguments insuffisants pour expliquer pourquoi ils ne pouvaient pas répondre aux questions.

A mon avis, les questions posées méritaient une réponse mais la personne en cause et les deux ministères ont indiqué qu'ils n'étaient pas aptes à répondre. Comment cette question a-t-elle été soulevée au comité? Si on l'a soulevée à l'égard des témoins du Conseil économique du Canada pourquoi cette décision?

Le président: Nous n'avons pas fermé la porte, tout dépend de ce que vous voulez dire. Il faut que nous nous en tenions à nos propres décisions et celle prise le 28 janvier est très claire, à savoir, qu'aucun témoin ne serait convoqué puisque le sujet avait été étudié de façon exhaustive, lors des sessions antérieures, à moins qu'on prouve qu'il existe de nouvelles preuves.

En outre, je crois que si le président du Conseil économique du Canada, le docteur Firestone, ou un économiste du ministère du

[Text]

• 1045

Department of Industry could not provide us with new evidence and also could not provide us with projections—because no one can forecast projections of what this bill is going to do; we believe what the Minister has said is what the bill is going to do—but if these three who are authorities on the matter could not come before us and state something that has not been said yet, there is no use having them.

I do not see your point. This has been ruled on and we have to stick to what was passed by this Committee on January 28, not by reopening or asking to reopen new inquiries in this will new ideas be brought to us. Therefore, I think this has been fully covered by the Steering Committee; we have our suggestion this morning and it is the Committee who will decide. You can rest assured that the steering committee have thoroughly discussed this.

Mr. Watson: Mr. Chairman, I do not want to belabour this point, but it is obvious the Committee must have felt, when it decided to invite witnesses from the Economic Council of Canada, that it was entitled to do this in spite of its original decision not to call witnesses. This implies to me that there was a change in the Committee's approach to the calling of witnesses.

You decided you could call a witness from the Economic Council of Canada. Now, the Economic Council of Canada replied, as did the Department of Industry and Dr. Firestone, that with the knowledge they had when they wrote the letters they felt unable to come before the Committee to testify. I think it is implied in their letters that they could only testify before the Committee if further studies were made and they would then testify in the light of these further studies.

The suggestion which I made is simply that we commission these further studies in order to obtain the information which obviously even they do not have and which the Committee certainly does not have. I just want to put on record why I wrote this letter. Mr. Henry, when I pointed out on February 6 that his department had not undertaken any study of the effects of the possible shifting of some sources of supply of basic drug ingredients to plants abroad, also to the question of whether manufacturers may become distributors to a greater extent than they are now, and to the question that Canadian drug manufacturing would tend to concentrate on those products which Canadians can produce most efficiently—when I pointed out to him that he made these remarks as possible consequences of

[Interpretation]

Commerce et de l'Industrie ne peuvent pas nous apporter de nouvelles preuves, ni des extrapolations, car apparemment personne ne peut prévoir les conséquences du projet de loi, nous estimons que ce que le ministre a dit correspond à ce qui surviendra, mais si aucune des trois autorités en la matière ne peut fournir des preuves véritablement nouvelles, à quoi bon les convoquer.

On a arrêté une décision là-dessus. Il faut nous en tenir maintenant à notre décision du 28 janvier 1968 et ce n'est pas en ouvrant une nouvelle enquête dans ce domaine que nous allons découvrir de nouvelles choses. Je crois que cette question a été suffisamment étudiée par le comité de direction. Nous avons maintenant le rapport du comité, il appartiendra au comité de décider. Soyez assuré que le sous-comité a étudié cette question à fond.

M. Watson: Je ne veux pas insister là-dessus, monsieur le président, mais il est manifeste que lorsque le comité a décidé d'inviter des témoins du Conseil économique, il a dû croire qu'il avait le droit de le faire en dépit de sa première décision. A mon avis, cela constitue un écart de la décision prise par le comité puisque vous avez décidé de convoquer des témoins. La réponse du Conseil économique du Canada, du ministère de l'Industrie et de M. Firestone, est qu'ils ne peuvent pas témoigner devant le comité avec les connaissances dont ils disposent. Je crois qu'il est sous-entendu dans leur lettre, qu'ils ne pourront témoigner que si d'autres études étaient faites et seulement à la lumière de ces études.

Ma proposition est très simple, c'est que nous mettions sur pied ces autres études afin d'obtenir les renseignements que nous voulons avoir. Je tiens simplement à signaler pourquoi j'ai écrit cette lettre. J'ai signalé à M. Henry le 6 février, que son ministère n'avait pas étudié les conséquences d'un changement éventuel des sources d'approvisionnement à l'étranger en ce qui concerne les ingrédients de base des produits pharmaceutiques. Je lui ai demandé si les fabricants assumeront davantage un rôle de distributeurs, et si les fabricants canadiens de produits pharmaceutiques s'attacheraient davantage aux produits qu'ils fabriquent plus efficacement. Lorsque j'ai signalé que ses remarques, faites le 7 février 1967 au Comité Harley, indiquaient les conséquences éventuelles de ce

[Texte]

this type of legislation to the Harley Committee—he made these remarks to the Harley Committee on February 7, 1967—we did not on February 6 have any indication from Mr. Henry that a study had been made of these consequences by his department.

It is evident, Mr. Chairman, that no study has been made, even though they were clearly set forth as being possible consequences of this type of legislation back in 1967. Now, it seems to me that when you have the possibility of these kinds of consequences we should be looking into the effect they would have on

• 1050

capital investment in the industry and on the effects they might have on certain of the supply industries, the raw material supply industries, and I mentioned one in particular, the PMU industry. Now, I realize that it is not easy.

The Chairman: How many pages do you have there, Mr. Watson?

Mr. Watson: I am summing up what I said in my letter and I will not be long. Mr. Chairman, if I am taking a bit of time it is better that the time be taken here than in the House of Commons and this is, I think, the purpose of these committees.

Mr. Chairman, the other morning I also quoted from what was a basic principle enunciated in the Harley Committee Report and it was, and I am quoting from page 2604:

No recommendations could be considered which although designed to lower drug prices...might...have a detrimental effect upon other aspects of the Canadian economy.

Now this was set forth as a basic principle of the Harley Committee. And it is my submission to you, Mr. Chairman, that if we do not give at least some consideration here to the economic consequences of the bill, then we are going contrary to this enunciated principle which the Harley Committee stated as being at the very base of its studies.

I have a particular concern here because some proof of the economic consequences has been brought to my attention. And I have mentioned, for example, that a company—I did not mention it by name—an American-controlled company which has its head offices in Montreal, built a pilot plant in Rouses Point, New York, shortly after the predecessor of Bill C-102 was introduced.

I have in my hands a photocopy of a news item in the *Press-Republican* in Plattsburg,

[Interprétation]

genre de mesures, M. Henry ne nous avait pas encore fait savoir, le 6 février, qu'une étude des conséquences avait été faite par son ministère.

Il est manifeste, monsieur le président, qu'aucune étude n'a été faite, bien que les conséquences possibles de ces mesures étaient énumérées dès 1967. Il me semble que lorsqu'on constate la possibilité de telles conséquences nous devrions considérer leurs effets sur les immobilisations dans ce secteur indus-

triel et sur les industries d'approvisionnement en matières premières. Je sais fort bien que ce n'est pas facile.

Le président: Combien de pages vous restait-il à lire, monsieur Watson?

M. Watson: Je ne fais que résumer ce que j'ai écrit dans ma lettre, ce ne sera pas long. Il vaut mieux prendre plus de temps ici qu'à la Chambre des communes, c'est, je crois, le but des comités.

Monsieur le président, l'autre jour j'ai cité un principe fondamental énoncé dans le rapport de la Commission Harley, à la page 2604:

«Ainsi, on ne devrait retenir aucune recommandation qui, même si elle a pour objet de réduire les prix des produits pharmaceutiques... pourrait... avoir un effet nuisible sur d'autres aspects de l'économie canadienne.»

Cela a été établi comme principe fondamental de la Commission Harley et j'aimerais signaler, monsieur le président, que si nous ne tenons pas compte des conséquences économiques du bill, nous allons à l'encontre de ce principe qui, au dire de la Commission Harley, est fondamental.

Cette question me préoccupe fort car on m'a signalé certaines conséquences économiques. J'ai rapporté l'exemple d'une société—je ne l'ai pas nommée—d'une société américaine dont le siège social est à Montréal et qui a construit une usine à Rouses Point (New York) peu après la présentation du projet de loi qui a précédé le bill C-102.

J'ai ici la photocopie d'un article paru dans le *Press-Republican* de Plattsburg (New

[Text]

N.Y., and now this same company is putting in a \$2 million research lab at Chazy, N.Y., in northern New York State. And there is about as much reason, Mr. Chairman, to be putting these facilities into northern New York State as there is to be building them in Canada's Arctic. It is simply that the only reason they are being built in northern New York State is that they are close to Montreal and it is, as far as I am concerned, very clear proof of the economic consequences of Bill C-102 and its predecessor that this particular company which incidentally has been praised by the Minister as being one of Canada's outstanding research drug firms...

The Chairman: Mr. Watson, on this point, it has been discussed thoroughly and I believe that you will be misleading this Committee because there are reasons behind what you have said that are not in your statement. If you would look at the records of what has been said, I think this question came up previously.

Mr. Watson: As a question...

Mr. Monteith: Mr. Chairman, I think Mr. Watson should be allowed to discuss this because it is a very important point. It has to do with the economic consequences. I think it is new evidence. I think he should be allowed to go ahead and discuss it.

Mr. Watson: This particular press item, Mr. Chairman, dated January 31, 1969, that the \$2 million research lab—and I am quite certain that it has never been discussed by this Committee or any other Committee of the House because it is a very recent decision. It is a program which is just getting under way and the construction program will only be getting started this spring.

I introduce this simply to underline the fact that there have been some economic consequences which I feel have occurred, and when I spoke to the House on January 20 I mentioned that a second Montreal-based firm had recently lost out on a much, much larger investment, running, according to my information, up to \$40 million.

In the second case, in all honesty, I do not think that Bill C-102 or Bill C-190 were the only factors. I think that there were other factors including the general economic climate in Quebec and also obviously some factors in the United States. In this second case, there were other factors.

But I am reliably informed, Mr. Chairman,

[Interpretation]

York); cette société est en train de mettre sur pied un laboratoire de deux millions de dollars à Chazy, dans le nord de l'État de New York. Monsieur le président, il y a autant de raisons de construire ce laboratoire dans l'État de New-York que dans l'Arctique canadien. La seule raison pour le faire, c'est parce qu'on est près de Montréal. Et c'est à mon avis la preuve très nette des conséquences économiques du bill C-102 et du bill qui l'a précédé; cette société qui, au dire du ministre, est l'une des meilleures sociétés de recherche en produits pharmaceutiques...

Le président: Monsieur Watson, ce sujet a été longuement débattu et je crois que vous êtes en train d'induire le Comité en erreur, car vous invoquez des raisons qui n'étaient pas dans votre déclaration. Si vous jetez un coup d'œil sur ce qui a été dit, je crois que cette question a déjà été discutée.

M. Watson: La question que...

M. Monteith: Je crois, monsieur le président, que M. Watson devrait pouvoir s'exprimer sur ce sujet car il s'agit d'une question très importante, en l'occurrence de conséquences économiques. Je crois qu'il s'agit là de nouvelles preuves et qu'on devrait lui permettre de continuer.

M. Watson: Dans cet article en date du 31 janvier 1969, il est question du laboratoire de recherches de deux millions de dollars; je suis sûr que cette question n'a jamais été discutée par notre Comité ou par un autre comité de la Chambre, car il s'agit là d'une nouvelle récente. C'est un programme qui est en voie de réalisation et la construction ne commencera qu'au printemps.

Je tiens simplement à souligner qu'il y a eu des répercussions économiques; lorsque j'ai pris la parole à la Chambre le 20 janvier, j'ai dit qu'une deuxième société établie à Montréal avait perdu récemment un investissement très important se chiffrant, selon les renseignements que j'ai, à près de 40 millions de dollars.

Dans ce second cas, je dois reconnaître en toute honnêteté que les bills C-102 ou C-190 n'ont pas été les seuls facteurs qui ont joué. Il y avait sans doute d'autres raisons, y compris le climat qui règne au Québec et évidemment certains facteurs propres aux États-Unis. Dans ce deuxième cas il y avait d'autres facteurs.

Mais, monsieur le président, je sais de

[Texte]

● 1056

that it was a major factor in the decision not to put these second facilities into Montreal. According to the thinking of the people who are sitting in their head offices in the United States, the climate has become uncertain here in Canada for the drug industry, and this was a factor.

The reason, Mr. Chairman, for me bringing all this to your attention was that I felt that if the Committee looked into the economic consequences, then there might be a feeling after study by the Committee, that some measure would be useful. Perhaps some amendments to this bill would be useful in at least improving the climate in the minds of the druggists because, quite frankly, I think it is more a psychological thing on the part of the industry than anything else. I think perhaps there was an over-reaction on the part of these industries that decided not to install their facilities here in Canada.

I do not think it was entirely justified by the bill. But the fact is, Mr. Chairman, that these decisions were made, largely due to what they felt was an uncertain climate created by the bill. I do not think they are entirely justified in feeling this way, but the fact is that they did feel this way and they do feel this way, and I think it is incumbent upon us, if we are to act responsibly to mitigate these fears in some way.

I have discussed this privately with the Department. Unfortunately, I was away with my own Committee the first week that your Committee was studying this matter, but I felt that an amendment to Clause 1 of this bill would have been useful. This amendment would have simply put into statutory effect the four-to-five-year new drugs status protection which the Minister has indicated affords a new drug in Canada sufficient protection to enable it to get going and to establish a market here.

After discussing this with responsible sections of the industry, I have come to the conclusion that if this four or five year new drugs status protection were made statutory, this would have a real effect on the parent companies in the United States which are responsible for putting...

● 1059

Le président: Monsieur Watson, je vous en prie, je ne voudrais pas que le débat soit de nouveau ouvert sur l'article 1. Si vous avez des amendements à proposer maintenant, parce que vous n'étiez pas ici alors que...

[Interprétation]

source sûre que c'était là une des raisons principales de la décision de ne pas construire cette deuxième usine à Montréal. Dans l'idée des gens qui siègent à la direction des entreprises aux États-Unis, le climat est devenu incertain pour une industrie de produits pharmaceutiques au Canada.

La raison, monsieur le président, pour laquelle je soulève toutes ces questions, c'est que j'estime que si le Comité étudie les conséquences économiques, il pourra en conclure que peut-être certaines mesures seraient utiles. Certains amendements au bill pourraient au moins améliorer le climat psychologique car je crois qu'il s'agit beaucoup plus d'un élément psychologique que d'autre chose. Peut-être y a-t-il eu une réaction exagérée de la part de ceux qui ont décidé de ne pas installer leur service au Canada. Je ne pense pas que cela ait été entièrement justifié par le Bill mais il n'en demeure pas moins, monsieur le président, que ces décisions ont été arrêtées en raison de ce qui était, pensait-on, un climat incertain.

Je ne pense pas qu'ils aient eu raison de réagir ainsi, mais c'est ce qu'ils pensaient et ce qu'ils pensent encore et je crois qu'il nous incombe, si nous voulons agir de façon sérieuse, de mitiger ces craintes d'une façon ou d'une autre.

J'en ai discuté en privé avec des fonctionnaires du ministère. Malheureusement je siégeais à un autre comité la première semaine que vous avez étudié cette question, mais il me semblait qu'un amendement de l'article 1 du bill aurait été utile. Cet amendement aurait simplement reconnu officiellement la protection de quatre à cinq ans dont jouissent les nouvelles drogues pour leur permettre, comme l'a mentionné le ministre, de s'établir sur le marché.

Après avoir discuté de cette question avec des représentants sérieux de l'industrie, j'en suis venu à la conclusion que si cette période de protection de quatre ou cinq ans dans le cas de nouvelles drogues, devenait une disposition législative, cela aurait des effets sérieux sur les compagnies mères des États-Unis qui sont responsables de...

The Chairman: Mr. Watson, I would not want the debate to reopen on clause 1. If you have certain amendments to propose now, because you were not here when...

[Text]

...all the members were here at the time you were away with your Committee. I agree with this, but you do not have to...

Mr. Watson: I just want to finish my...

The Chairman: Just a minute. This Committee spent a lot of time reopening the question. I would suggest that if you have some amendment to present on Clause 1, you have the opportunity to do it in the House. Now, if you have something else to discuss on what we have just read from this Steering Committee report—we have been discussing it for nearly half an hour now. Other members also have some representations to make or some discussion dealing with this matter. So get to an end or get to the point.

Mr. Watson: Mr. Chairman, I am sorry I have taken so much time. I can complete my remarks in about one minute, I think. I feel that such an amendment would have put the Canadian management of these firms in a position where they can argue more effectively with their foreign head offices for the funds which are available for investment outside the United States or outside Europe. There are many subsidiaries applying for these investment funds in manufacturing and research facilities.

Let us at least put our people in a better position, and we can do it without affect to the Canadian consumer. That is my point and I have made it, and I thank you, Mr. Chairman, for permitting me to make it.

The Chairman: Thank you, Mr. Watson. Are there discussions on the report?

Mr. Rynard: Mr. Chairman, I think Mr. Watson has made a very nice presentation of the whole problem and I feel that he is quite right when he says the Harley Committee did not go into the economics of it. But they did point out one very definite thing: that any lowering of the price of drugs must take into account the economy.

To date we have had no economic reports, we have had no feasibility studies, and I think that this Committee has a right to hear witnesses on this point. While we are a steering committee—and I sat on that steering committee at one of the meetings—I think that in the final analysis it has to come back here right to this Committee and this Committee has the final say, Mr. Chairman, with all due respect to your remarks. I feel that Mr. Watson has brought up a very fundamental point. If you are going to say all this is based on the Harley Committee reports, you have to have somebody come in here and give us a feasibility study and say: this is the

[Interpretation]

... tous les autres membres étaient présents lorsque vous siégiez à votre Comité. Je suis d'accord avec cela, mais vous n'avez pas à...

M. Watson: Je veux seulement finir mon...

Le président: Une minute, le Comité a passé beaucoup de temps et ne devrait pas maintenant réouvrir la question. Si vous avez des modifications à présenter sur l'article 1, vous aurez la possibilité de le faire à la Chambre des communes. Si vous avez quelque chose à discuter de ce que nous venons de lire... nous vous écoutons depuis près d'une demi-heure. D'autres députés ont sans doute des commentaires à faire sur la question, donc achevez ou venez-en au fait.

M. Watson: Je regrette d'avoir pris autant de temps, monsieur le président, je puis terminer mes observations en une minute, je pense. J'estime que cette modification aurait mis les directions de ces compagnies canadiennes de drogues dans une position où elles puissent discuter efficacement avec leur compagnie-mère à l'étranger pour obtenir les fonds disponibles à l'investissement hors des États-Unis ou d'Europe. Il y a beaucoup de filiales au Canada qui demandent des fonds pour la fabrication et la recherche.

Plaçons-les au moins dans la meilleure position possible. Et nous pouvons le faire sans nuire au consommateur canadien. Voilà mon opinion, monsieur le président, je vous remercie.

Le président: Y a-t-il d'autres commentaires sur le rapport?

M. Rynard: Monsieur le président, je crois que M. Watson a fort bien énoncé tout le problème. Je crois qu'il a raison de dire que le Comité Harley n'a pas étudié l'aspect économique mais a signalé une chose: que toute réduction du prix des médicaments doit tenir compte de l'aspect économique de la question.

Jusqu'à présent nous n'avons eu ni rapports économiques, ni études du possible, et je crois que le Comité a le devoir de convoquer et d'entendre des témoins à ce sujet. Car, même si nous siégeons en sous-comité (de fait j'ai siégé au sous-comité moi-même) je crois qu'en dernière analyse c'est le comité plénier qui a la dernière voix au chapitre. J'estime donc que M. Watson a soulevé un point fondamental. Si l'on veut dire que tout cela est fondé sur le rapport de la Commission Harley, alors qu'on nous amène quelqu'un qui vienne nous présenter ici les conséquences économiques de cette initiative et nous dise quels seront les effets sur l'économie. Et je

[Texte]

effect on the economy. The basic principle was that there must be no harm to the economy but we have never had that study. I say here, and I want to put it on the record, that I feel that a witness should be brought before us who can give it.

As one of the members said the other day, they can get it within 2 per cent. What excuse have we got to offer for a probable delay in the House of Commons for not having done our homework sufficiently here? This is something that has never been done and I want to support Mr. Watson's idea right through that this has not been done and that it should be done. This Committee, in my opinion, will not be carrying out its functions unless it does call a witness on the economic effects.

The Chairman: Thank you, Dr. Rynard. Mr. Émard.

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M. Émard: Je serai très bref, monsieur le président. Je voudrais d'abord dire que j'endors la représentation faite ce matin par M. Watson et j'ai eu l'occasion de faire valoir les mêmes arguments à des réunions précédentes.

Maintenant, si j'ai bien compris ce que vous avez dit tout à l'heure, les trois témoins que vous avez invités ont décliné l'invitation de venir comparaître devant ce comité?

Le président: Vous avez lu le dernier fascicule?

M. Émard: Non, je ne l'ai pas lu.

Le président: Alors, pour résumer rapidement. Tout d'abord, le Conseil économique du Canada n'a pu présenter un rapport qu'il n'avait pas encore commencé à étudier et même s'il l'avait eu, cela faisait partie d'un rapport complet qu'il ne pouvait pas dévoiler avant sa parution.

Par la suite, on nous a recommandé le docteur Firestone, qui nous a répondu que cela lui ferait plaisir, mais qu'il est dans l'impossibilité de le faire avant d'avoir relu tout ce qui a été dit sur cette question.

Ensuite, nous avons approché les secteurs de l'industrie et du commerce. Vous avez lu la lettre qui est attachée au dossier et par laquelle on nous dit qu'il est impossible de faire des projections économiques dans ce domaine-là, pour le moment, c'est-à-dire tant et aussi longtemps que ce bill n'aura pas été en vigueur, ils ne peuvent en offrir plus que ce que nous avons étudié jusqu'à ce jour.

Alors, c'est pour cela, tout a été expliqué dans le dernier fascicule.

[Interprétation]

tiens à bien signaler que jusqu'à ce que cela soit fait et jusqu'à ce que des témoins viennent nous donner des renseignements à ce sujet.

Comme l'a signalé l'autre jour un des membres de ce comité, on peut obtenir des prévisions avec une marge de 2 p. 100. Quelle excuse avons-nous pour ne pas recevoir ces témoins? Et on va retarder le travail à la Chambre des communes, si nous ne faisons pas le travail de base ici même. Je tiens à soutenir le point de vue de M. Watson à savoir que cela n'a pas été fait et devrait être fait et que le comité ne remplira pas son travail à moins de convoquer des témoins sur les questions économiques.

Le président: Merci, Monsieur Émard?

Mr. Émard: Mr. Chairman, I shall be very brief. I would like to say first of all that I agree with the arguments put forth this morning by Mr. Watson. I have had the opportunity of presenting the same arguments in preceding meetings.

Now, if I understood what you said a moment ago, the three witnesses that you have invited declined the invitation to appear before this Committee?

The Chairman: Did you read the last report?

Mr. Émard: No.

The Chairman: To sum it up briefly, first of all, the Economic Council of Canada could not present a report which it had not yet begun to study and even if it had had this report, it was part of a complete report that the Council could not divulge before it was published.

Thereafter, Dr. Firestone was recommended to us and he replied that he would like to accept to come as a witness but that he cannot do it before having re-read everything that has been said on this question.

Then we got in touch with the various sectors of industry and commerce. You have read the letter which is included with the file and according to which it is impossible to make any economic projections in this field for the time being, i.e. as long as the bill will not have been enforced, they cannot make any projections that go beyond what we have studied to this date.

This is why everything has been explained in the last issue.

[Text]

M. Émard: Si vous voulez me permettre une remarque, monsieur le président. On m'a dit que la lettre d'invitation qui a été envoyée a été rédigée de telle manière qu'il eût été très difficile d'accepter cette invitation.

Le président: Non, je ne pense pas. La lettre...

M. Émard: C'est tout ce que j'ai à dire.

Mr. Monteith: Do we have a copy of that? Could we have it read?

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M. Émard: La lettre d'invitation stipule qu'on doit apporter des faits absolument nouveaux; alors, cela fournit l'occasion à n'importe quel témoin de décliner l'invitation.

Mr. Monteith: Could we have that letter of invitation to come before us read?

The Chairman: To whom?

Mr. Monteith: Which one was the member referring to?

The Chairman: What are we talking about? It would be very interesting to know what you are talking about.

Mr. Monteith: I gathered the letters of invitation where...

M. Émard: Les trois lettres qui ont été envoyées à trois docteurs, je crois.

The Chairman: Is it the wish of the Committee that I read the letter that was sent to the University of British Columbia?

M. Émard: Je n'ai pas compris, monsieur le président.

Le président: Je demandais si vous vouliez que je lise la lettre?

—that I was authorized to send by the steering committee.

Ottawa, February 4, 1969.

Dr. Marvin Darrach,
Professor of Biochemistry,
University of British Columbia,
Vancouver, B.C.

Dear Dr. Darrach,

Re: Bill C-102, An Act to amend the Patent Act, the Trade Marks Act and the Food and Drugs Act

This is to acknowledge receipt of your telegram dated January 29 expressing your willingness and that of Doctors Ford and Per-

[Interpretation]

Mr. Émard: Mr. Chairman, if you will allow me to make a remark, I was told that the invitation letter which was forwarded was written in such a way that it would have been very difficult indeed to accept the invitation.

The Chairman: I do not think so. The letter... Any other remarks?

Mr. Émard: That is all I have to say.

M. Monteith: Si nous en avons une copie, on pourrait peut-être la lire?

Mr. Émard: The invitation letter stipulates that absolutely new facts must be brought forward. This gives any witness the opportunity to refuse the invitation.

M. Monteith: Est-ce que vous pourriez nous lire la lettre d'invitation?

Le président: A qui?

M. Monteith: A qui le député faisait-il allusion?

Le président: De quoi parlons-nous? J'aimerais le savoir.

M. Monteith: Je croyais qu'il s'agissait des lettres d'invitation qui...

Mr. Émard: The three letters which were sent to three doctors, I believe.

Le président: Le Comité souhaite-t-il que je lise la lettre qui a été envoyée à l'Université de Colombie-Britannique?

Mr. Émard: I did not understand, Mr. Chairman.

The Chairman: I was wondering whether you wanted me to read the letter,

...lettre que j'ai été autorisé à envoyer par le comité directeur:

Ottawa, le 4 février 1969.

Docteur Marvin Darrach
Professeur de biochimie
Université de la Colombie-Britannique
Vancouver.

Monsieur,

Objet: Projet de loi C-102, Loi modifiant la Loi sur les brevets, la Loi sur les marques de commerce et la Loi des aliments et drogues.

J'accuse réception de votre télégramme en date du 29 janvier dernier exprimant votre désir et celui du docteur Ford et du docteur

[Texte]

narowski to testify before the Committee on the above-mentioned bill.

Your telegram was read to the Committee on the 30th and referred to the Subcommittee on Agenda and Procedure for consideration.

The Subcommittee recommended that where it had been directly approached by those who wanted to appear as witnesses, they be informed of the Committee's resolution of January 28, which reads as follows:

"Resolved—That no new witnesses be called, because the subject was fully covered in previous sessions; and unless good and valid arguments are given that there is brand new evidence, the Committee should not hear any new witnesses."

The Subcommittee also recommended that a letter be sent to you, including a copy of Bill C-102, acknowledging your telegram and asking if Dr. Pernarowski, Dr. Ford and yourself are in possession of *brand new evidence*, in accordance with the Committee's resolution of January 28th, and *relevant to the said Bill*. The above two recommendations of the Sub-committee were concurred in unanimously by the Committee this morning.

Please let me have your comments immediately by telegram to enable the Committee to conclude its consideration of this Bill.

Yours very truly,

Gaston Isabelle, M.D., M.P.

Enclosure: 1

M. Émard: Monsieur le président, si on considère le commencement de la lettre qui dit, je crois, en anglais:

Following your telegram indicating your willingness to appear on this Committee

ne trouvez-vous pas étrange qu'à la suite de votre invitation, les mêmes témoins qui ont exprimé leur désir de venir comparaître au Comité, se trouvent des excuses pour refuser.

Comme je vous le disais, ne croyez-vous pas que la teneur de cette lettre ne constitue pas une sorte d'encouragement à décliner l'invitation?

Le président: C'est peut-être votre opinion, monsieur Émard, mais ce n'est pas celle du comité directeur.

M. Émard: J'ai fini, monsieur le président.

[Interprétation]

Pernarowski de venir témoigner devant le Comité chargé de l'étude du projet de loi susmentionné.

Votre télégramme a été lu au Comité le 30 janvier dernier et a été référé au sous-comité du programme et de la procédure, pour plus ample étude.

Le sous-comité a recommandé que ceux qui l'ont approché directement afin de venir témoigner devant le Comité permanent soient renseignés au sujet de la résolution du Comité du 28 janvier dernier qui se lit comme suit:

«Adopté,—Qu'aucun nouveau témoin ne soit entendu, vu que la question traitée dans le bill a été discutée à fond lors de sessions précédentes, à moins qu'il ne soit établi hors de tout doute que des éléments entièrement nouveaux pourraient être apportés.»

Le sous-comité a aussi recommandé qu'on vous envoie une lettre, ainsi qu'un exemplaire du projet de loi C-102, accusant réception de votre télégramme et vous demandant ainsi qu'au docteur Pernarowski et au docteur Ford, si vous êtes en possession de *faits complètement nouveaux*, selon la résolution adoptée par le Comité le 28 janvier dernier et *pertinents audit projet de loi*. Les deux points ci-dessus ont été adoptés unanimement par le Comité ce matin même.

Vous voudrez bien me faire parvenir vos commentaires immédiatement par télégramme afin de permettre au Comité d'achever l'étude de ce projet de loi.

Veuillez agréer, monsieur, mes meilleures salutations.

Gaston Isabelle, M.D., M.P.

Pièce jointe: 1

Mr. Émard: Mr. Chairman, the beginning of the letter stated, I believe, as follows:

...à la suite de votre télégramme indiquant votre désir de témoigner devant ce comité...

Do you not feel that it is rather strange that after your invitation, the same witnesses who expressed their wish to appear at the Committee should find excuses to refuse?

Moreover, don't you think that the way in which the letter was written was an encouragement to have them refuse the invitation.

The Chairman: This might be your opinion, Mr. Émard, but it is not that of the Steering Committee.

Mr. Émard: I'm through, Mr. Chairman.

[Text]

Le président: D'autres questions? Monsieur Ritchie.

Mr. Ritchie: Mr. Chairman, I believe the steering committee reached the proper decision under the terms of "no new evidence" which apparently it had received from the Committee. I am not too knowledgeable about these things. The reason, of course, is that all evidence will be in the nature of projections and postulates.

I would suggest, however, that there are three areas on which the Committee could well hear at least one or two witnesses, and that these areas are, first, the economic effects on the industry. There is no doubt in my mind that if enough import licences are issued, a good portion of the manufacturing will be exported out of the country. This may or may not be a good idea. I am of mixed feelings on this matter.

When we export, if the industry should move out we will lose quite a bit of research which is of some importance to us, but we have had no projections. If I recall correctly, you did suggest in the steering committee, Dr.

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Isabelle, that the submissions to the Harley Committee made little or no reference to the effect on the industry and that the witnesses had not availed themselves of the opportunity to do that and this may be so. Anyway, I think it is worthy of one or two knowledgeable witnesses.

The second area is in the safety measures. The effect of importing more drugs is not as simple as in importing more mousetraps. We have the safety factor to consider and the Food and Drug Directorate is going to spend a good many millions of dollars to make sure our safety factor is as good as it can be. There are many statements of the Food and Drug Directorate running through the Harley Committee to the effect that they have been understaffed and so on.

Yet we are going to introduce to the Food and Drug Directorate an enormously greater, at least if this is successful, load. We should have some idea whether this will be adequate because, after all, the success of this bill depends on convincing physicians that the use of copy or generic drugs, whatever you want to call them, at a much cheaper level is adequate and that they are as safe as we can possibly make them. It might be the Committee would recommend that more money be allocated or that we support the Minister in acquiring at least more facilities. I would like

[Interpretation]

The Chairman: Any other questions? Mr. Ritchie.

M. Ritchie: Monsieur le président, je crois que le comité directeur est arrivé à une décision appropriée, vu qu'après le mandat que lui avait confié le Comité, il ne devait accepter que des témoins ayant de nouveaux témoignages à faire. Je ne suis pas très au courant, mais s'il y a de nouveaux témoignages à faire, les témoignages seront toujours sous forme d'extrapolations et d'hypothèses. Cependant, j'estime qu'il y a trois domaines dans lesquels le Comité pourrait entendre deux ou trois témoins. Ces domaines sont les suivants: premièrement, les répercussions économiques dans l'industrie; car il est indéniable dans mon esprit que si des licences d'importation sont accordées, une bonne proportion des produits seront manufacturés. C'est peut-être là une bonne ou une mauvaise affaire. Je n'ai pas d'idées bien définies à ce sujet.

Si l'industrie exporte, nous perdons la recherche, et c'est très important pour nous. Mais nous n'avons pas eu d'extrapolation. Si je m'en souviens bien, au comité directeur, docteur Isabelle, vous avez laissé entendre

que les mémoires présentés à la Commission Harley n'avaient que peu ou pas étudié les répercussions sur l'industrie. Et c'est peut-être le cas. Quoi qu'il en soit, je pense que nous pourrions certainement avoir un ou deux témoins compétents sur ce sujet.

Ensuite, nous devrions parler des mesures de sécurité. Si importer davantage des médicaments était aussi simple que d'importer des pièges à souris, il n'y aurait pas de problèmes. Mais le Directeurat des aliments et drogues dépensera des millions et des millions de dollars pour nous assurer que le facteur de sécurité est aussi élevé que possible. Jusqu'ici, le Directeurat des aliments et drogues a fait de nombreuses déclarations concernant son manque de personnel.

Cependant, nous allons donner à la Direction des aliments et drogues un travail beaucoup plus lourd si le bill est adopté. Après tout, pour assurer le succès de ce bill, il faudra convaincre les médecins que l'utilisation de médicaments de noms génériques, qui seront beaucoup moins chers, seront parfaitement sûrs.

A mon avis, le Comité devrait recommander que l'on donne davantage d'argent ou aider le ministre à acquérir plus d'installations. Je voudrais entendre l'opinion d'un ou deux témoins de l'extérieur ayant des con-

[Texte]

to ask one or two outside witnesses who have knowledge in this field whether they feel that what Food and Drug has in enough.

Finally, what will be the effect from the introduction of new drugs? We are worried about the consumers of today but we would be less than responsible if we did not think of the consumers of tomorrow. After all, if we had stopped introducing new drugs when aspirin was first introduced we would have cheap aspirin but we would not have any other new drugs.

In my opinion this bill will slow down the dissemination of knowledge and the promotion of new drugs. Perhaps the Committee has not even thought about that. I am sure that for the future welfare of Canadians we want as many new drugs as possible.

Not many new drugs are being promoted right now but there will be a whole flock of them within the next few years. Good drugs are coming on the market—what we call “specific” drugs for “specific” illnesses—and we would be less than responsible if we did not consider this. I would suggest that we amend the bill slightly to promote the introduction of new drugs. That is all I have to say.

Mr. Otto: Mr. Chairman, I think it may be a good idea just to review the purpose of this Committee. Dr. Rynard has said that it is the duty of this Committee to hear evidence on the effect the bill might have on pharmaceutical manufacturers. I strongly suggest that this is not the purpose of this Committee nor of the bill. The purpose of the bill is to reduce the price of drugs to the consumer. It is not the purpose of this bill, or this Committee, to gauge the effects on the manufacturers. If such was the case, it would be tantamount to the medicare legislation being concerned primarily with the effects on the medical profession. That was not the point, and it is not the point here. The purpose of this bill is to reduce the cost of drugs to the consumer.

Had the pharmaceutical manufacturers been willing to present arguments to show, apart from the economic effects on their industry, that the bill would not reduce the cost of drugs then I could see some argument for inviting them.

I now want to deal with Mr. Watson's request. He said that he would like the Com-

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mittee to call witnesses. In line with the original resolution of the steering committee, which was passed by this Committee, we said that we would call no new evidence unless rational arguments or proof were presented

[Interprétation]

naissances dans ce domaine, si la Direction des aliments et drogues sont suffisamment munies.

Et enfin, quelles seront les répercussions de l'introduction de nouveaux médicaments? Il faut penser non seulement au consommateur d'aujourd'hui mais à celui de demain. Si l'on avait arrêté l'introduction de nouveaux médicaments après l'aspirine, on aurait de l'aspirine à meilleur marché mais on n'aurait aucun autre nouveau médicament.

A mon avis, ce bill ralentira l'introduction de nouveaux médicaments et la dissémination des connaissances. Peut-être que le Comité n'y a pas songé. Pour le bien-être des Canadiens il nous faudra autant de nouveaux médicaments que possible.

Il n'y a pas autant de nouveaux médicaments de lancés sur le marché, mais il y en aura toute une série au cours des prochaines années. On met présentement sur le marché des médicaments pour certaines maladies bien particulières et nous devrions en tenir compte. Je propose que nous devrions modifier le bill quelque peu de façon à encourager les nouveaux médicaments. C'est tout ce que j'ai à dire.

M. Otto: Monsieur le président, il serait peut-être bon de revoir les objectifs du Comité. Le docteur Rynard a dit que ce Comité doit entendre des témoignages sur les effets du bill sur la fabrication des produits pharmaceutiques. Je suis tout à fait convaincu que ce n'est pas là l'objectif du Comité ni du bill. L'objectif du bill est de réduire le prix des médicaments pour les consommateurs. Le bill et le Comité n'ont pas à étudier les répercussions sur les fabricants. Cela correspondrait en fait, pour la mesure législative sur l'Assurance-maladie, à s'intéresser essentiellement aux répercussions sur la profession médicale. Ce n'est pas le cas. Ce bill a pour objectif de faire baisser le prix des médicaments pour les consommateurs.

Si les fabricants de produits pharmaceutiques avaient présenté des arguments pour démontrer, en plus des effets économiques sur leur industrie, que le bill ne réduira pas le coût des médicaments, je serais prêt à les convoquer.

En ce qui concerne la demande de M. Watson qui voudrait que le Comité convoque des

témoins, conformément à la première résolution du comité directeur que le Comité a adopté, de ne pas convoquer de nouveaux témoins à moins que des arguments ou des preuves rationnelles aient été présentés quant

[Text]

on the type of new evidence and how this would affect it. So if Mr. Watson or the manufacturers had presented a concise resumé showing, by means of economic studies, why it would not reduce the cost of drugs then I think it could be entertained.

All I can take from Mr. Watson's letter, with great respect to him, is that he thinks such a study could be undertaken but there is no suggestion, for instance, that P. S. Ross & Partners or anyone else would even undertake such a study. It is merely an indication of the desire of Mr. Watson to have this done, and I cannot see how this can possibly comply with the original resolution.

Therefore, on Dr. Rynard's argument I cannot see why we should postpone this bill or wait for witnesses who may not present evidence dealing with the question that we are dealing with, namely, will this bill reduce the price of drugs?

Mr. Saltzman: Mr. Chairman, I had hoped that perhaps we could have moved on to Clause 5 a little more rapidly. However, I think some valid points have been raised and perhaps it is just as well that we are having this discussion on the question of economic consequences.

I think Mr. Watson's fears about the economic consequences are somewhat ill-founded. I am sure that it is something that we all have to be concerned about. But it seems to me, Mr. Chairman, that there can be no economic consequences in the sense that Mr. Watson or some of the other members have referred to them. I think the fact of the matter is that we have 21 million Canadians in this country who will at some time in their lives need drugs.

Mr. Rynard: You are about 1,000 out, are you not?

The Chairman: Gentlemen, order.

Mr. Saltzman: Well, I am quite prepared to bow to the superior statistics of Dr. Rynard who is usually very accurate. But given that leeway, we are close to 21 million Canadians. We have a government that was elected by the people of this country to ensure that their interests will be represented, we have an opposition that will scrutinize the work of that government, and it is not so much a question of whether drugs are going to be supplied in this country but who is going to supply them. Mr. Watson's suggestion, if accepted, is that unless we are prepared to meet all the conditions of the head offices of the drug companies in the United States we are not going to have any drugs in this coun-

[Interpretation]

à la nature des nouvelles preuves et ses effets. Donc, si M. Watson ou les fabricants ont présenté un résumé, avec une étude économique à l'appui, démontrant que le coût des médicaments ne se trouvera pas réduit, nous pourrions l'entendre.

D'après la lettre du docteur Watson, il semble penser qu'il serait possible de faire une telle étude, mais il ne dit pas que P. S. Ross and Partners ou d'autres entreprendront une telle étude. Il indique simplement le désir que l'on en fasse une, ce qui est nécessairement en conflit avec la résolution.

Par conséquent, reprenant l'argument de M. Rynard, je ne vois pas pourquoi nous devrions retarder ce bill ou attendre des témoignages qui ne se rapporteront peut-être pas à la question que nous étudions, à savoir, si le bill réduira le prix des médicaments.

M. Saltzman: Monsieur le président, j'aurais aimé passer à l'article 5 un peu plus vite. Quoi qu'il en soit, je crois que certaines arguments très valables ont été soulevés et qu'il est bon de discuter la question des répercussions économiques. Les craintes de M. Watson au sujet des conséquences économiques ne sont pas bien fondées. Je pense que nous devons nous préoccuper de cet aspect, mais, il me semble, monsieur le président, qu'il ne peut pas y avoir de conséquences économiques telles que les envisagent M. Watson ou d'autres députés. Le fait est qu'il y a 21 millions de Canadiens au Canada qui auront certainement besoin de médicaments à un moment ou l'autre de leur vie.

M. Rynard: Vous en avez oublié 1,000, je crois.

Le président: Messieurs, à l'ordre.

M. Saltzman: Je suis prêt à m'incliner devant les données statistiques du docteur Rynard qui, en général, ne se trompe pas. Nous sommes près de 21 millions de Canadiens avec un gouvernement élu par le peuple pour assurer la sauvegarde de leurs intérêts et une opposition qui examine le travail de ce gouvernement. Ce n'est pas tant une question de savoir si les médicaments seront vendus au Canada, mais qui les vendra.

Si l'on accepte la suggestion de M. Watson, il s'ensuivrait qu'à moins que nous soyons prêts à satisfaire aux conditions établies par les sièges sociaux des diverses sociétés pharmaceutiques aux États-Unis, nous n'aurons pas de médicaments ici. C'est une déclaration

[Texte]

try. Now that is an enormous fallacy, but perhaps it points out the differences between Mr. Watson's philosophy and my own.

Mr. Watson: Mr. Chairman, on a point of order. This is a completely erroneous statement and I want to be able to answer this after he has completed his remarks.

Mr. Saltsman: I think you are entitled to answer that, Mr. Watson, but this is the way I see it. I think you are looking at this in what you consider are the best interests of the country and the people in it, and I am not inferring any motives. However, I do think we have to be very clear about this. Whether we get drugs or not does not depend on the good will of the American head offices, it depends on our willingness to ensure that Canadians get drugs, and if they will not manufacture drugs in this country there is nothing to prevent the Government of Canada from setting up a crown corporation or encouraging other people to come into Canada to manufacture drugs. This does not mean that we will not have a drug industry in Canada.

On the contrary, in view of the abysmal performance of the drug industry in this country we may very well have a more healthy and vibrant drug industry than ever before. I think this bill is mild, it is innocuous.

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I do not see that it is going to rock the world in any particular way, and I find it difficult to understand the great opposition that is being raised against the measures in this bill. I sometimes wonder what kind of opposition would be raised if one really tried to bring in significant reforms.

I want to conclude by simply restating our position. There is absolutely no fear—there cannot be any fear of economic consequences unless the government refuses to act. I do not believe that the government will take this kind of position because they cannot afford to take it. Canadians will not permit them to take this kind of position.

If American drug companies find it inconvenient to operate in this country under the terms of reference which we think are best for the Canadian people then I think it should be fairly obvious to them that we will still get drugs, and I think we should be prepared to manufacture them ourselves, if necessary.

Le président: Monsieur Guilbault.

Mr. Guilbault: Monsieur le président, je comprends bien le point de vue de ceux qui

[Interprétation]

complètement fausse, mais elle indique bien l'écart entre nos deux philosophies.

M. Watson: J'invoque le Règlement, monsieur le président, c'est tout à fait faux et je voudrais y répondre.

M. Saltsman: Vous avez le droit d'y répondre, monsieur Watson, mais voilà comment je vois la situation. Vous examinez la situation du point de vue des meilleurs intérêts du pays, et des Canadiens, je n'insinue pas que vous avez d'autres motifs en tête, mais il faut faire la lumière. Le fait que nous ayons des médicaments ou non ne dépend pas de la bonne volonté des sièges sociaux des sociétés pharmaceutiques américaines mais bien de notre désir de fournir aux Canadiens les médicaments nécessaires, et s'ils ne veulent pas fabriquer de médicaments ici, rien n'empêche l'État de créer une société de la couronne ou encourager d'autres à venir fabriquer des médicaments au Canada.

Au contraire, si l'on se base sur les résultats pitoyables des sociétés pharmaceutiques jusqu'ici, il se peut fort bien que nous aurons une industrie des produits pharmaceutiques plus saine et active au Canada. A mon avis,

ce projet de loi est loin d'être sévère et j'ai peine à comprendre la forte opposition qu'il soulève. Je me demande quelle opposition on aurait si l'on voulait introduire des réformes de taille.

Je voudrais terminer en réitérant notre position. Il ne faut pas craindre les répercussions économiques à moins que le gouvernement refuse d'agir, et le gouvernement ne le fera pas, car il ne peut pas se permettre une telle attitude. Les Canadiens ne le permettront pas.

Si les sociétés américaines de produits pharmaceutiques préfèrent ne pas exploiter au Canada, dans les conditions qui nous semblent les meilleures pour les Canadiens, il est évident pour eux que nous aurons quand même des produits pharmaceutiques, et nous devons être prêts à les fabriquer nous-mêmes au besoin.

The Chairman: Mr. Guilbault.

Mr. Guilbault: Mr. Chairman, I understand the point of view of those who would like to

[Text]

aimeraient inviter des témoins dans le but d'approfondir la question des répercussions économiques.

Pour ma part, quand je discute un problème, j'aime bien avoir le plus d'informations possible sur tous les aspects du problème.

Cependant, plusieurs fois au cours de ma vie, j'ai été convaincu qu'il arrive rarement que l'on ait tous les détails de tous les aspects d'un problème lorsqu'il faut prendre une décision. Il y a toujours des points qui sont nébuleux; il faut toujours parier sur quelque chose.

Prenons le cas du Bill Omnibus qu'on étudie présentement à la Chambre. Quand on propose d'utiliser l'ivressomètre, est-on sûr des conséquences possibles? On ne le sait pas exactement.

Alors, comment peut-on prévoir les réactions de l'industrie, comment peut-on savoir ce qui va se passer sur le plan économique? Même les experts seraient confondus. Cependant, on sait qu'en votant ce Bill, on ferait un pas dans la bonne direction; et, à mon avis, c'est là le point important.

Étant donné qu'il n'y a personne, et j'en suis convaincu, pour nous éclairer sur des répercussions économiques éventuelles, qui sont tellement éloignées, je me demande, monsieur le président, si on ne devrait pas procéder immédiatement. Il ne faut pas nous imaginer que nous trouverons quelqu'un, au Canada, avec une boule de cristal pour nous renseigner sur des choses que nous ne saurons jamais avant quelques années. Merci.

Mr. Chairman: Any other questions?

Mr. Watson: Mr. Chairman, Mr. Saltsman indicated he thought I had implied that the U.S. drug industry would withhold drugs from Canada, if it did not get its way.

I do not think Mr. Saltsman understood what I was trying to say. When I was talking about the economic consequences on capital investment and investment in research facilities here, the point I was trying to make is simply this: Since there are subsidiaries of these companies all around the world, all of them competing for money for investment in their own countries, the managers of the subsidiaries here have a self-interest in increasing their own little domains, and they try to use as many arguments as they can to convince their houses to put money here, and it is simply a question of then being in a position to argue with their head offices for capital investment here.

[Interpretation]

have witnesses in order to deal more thoroughly with the question of economic repercussions.

In so far as I am concerned, when I discuss a problem I always like to have as much information as possible on all aspects of that specific problem.

However, I have become convinced, through a number of experiences during my life, that it is quite rare to have on hand all details and know all aspects of a given problem when a decision must be taken. There are always points which are a bit blurry, one has to take a bet at one point or another.

Take the case of the Omnibus Bill which is under consideration at present in the House. When we propose using the breathalyzer, we do not know what the exact consequences will be.

So, I wonder how we can predict the reactions of industry. How can we anticipate on economic consequences? Even experts would be puzzled. However, we know that by passing this bill we would be taking a step in the right direction, and this, in my opinion, is really the important point.

Since there is no one, and I am convinced of this, who can enlighten us on the possible economic repercussions, which are very remote indeed, I wonder, Mr. Chairman, whether we should not proceed immediately. We must not imagine that we will find somebody with a crystal ball, in Canada, to give us information on matters that will happen only in a few years. Thank you.

Le président: D'autres questions, messieurs? Monsieur Watson.

M. Watson: Monsieur le président, M. Saltsman a dit qu'il pensait que j'avais souvent entendu que l'industrie pharmaceutique américaine ferait une sorte de blocus des médicaments au Canada.

Je ne pense pas, monsieur Saltsman, que vous avez bien compris ce que j'essayais de dire. Quand je parlais des conséquences économiques de ce bill, notamment sur les services de recherche, je voulais simplement bien signaler que, quand il y a des filiales de compagnies à travers le monde qui se font concurrence entre elles pour obtenir des capitaux dans leur pays, leurs directeurs ont tout intérêt à accroître leur avoir, et ils utilisent le plus d'arguments possible pour convaincre la compagnie mère d'investir des capitaux.

[Texte]

If we were to put in this five year protection, it would be only against foreign imports; it would not affect the consumer at all because, as the Minister has already said, there is a four or five year implied protection with the new drug status, so, in effect, what I am suggesting would have no effect on this Bill except to put the industry in a better position vis-à-vis its head offices.

I would just like to ask one question here, and I do not know whether I should direct it to Dr. Henry, or...

Mr. Chairman: We are just discussing the matter. I think your point has been very well made. We are not at the question period yet. If you want to ask a question later, they are going to be here. If you have something else to add, please do it; otherwise somebody else would like...

Mr. Watson: On this point, Mr. Chairman—and I stand to be corrected by Dr. Henry—I believe the Harley Commission established roughly that the net profit of the drug manufacturing industry in Canada was in the vicinity of approximately \$15 million.

Mr. Chairman: Mr. Watson, please—you are a member of Parliament and at the same time you are a lawyer. I thought you were on a point of order in answering Mr. Saltsman but now you are making a speech. What is your point of order?

Mr. Watson: Mr. Chairman, it was just on this...

Mr. Chairman: I am sorry, but if it goes beyond that, the discussion is only on the report of the subcommittee. It is no use making speeches. You will have the opportunity of doing that so I will recognize Mrs. MacInnis.

Mrs. MacInnis (Vancouver-Kingsway): Mr. Chairman, I think half of our time is now gone and, in view of the fact that we have had a very good discussion, I would like, if I am in order, to move that the steering committee's report be adopted.

Mr. Monteith: Mr. Chairman, before you put that question, I do not know whether this can be by way of an amendment or what, but I would like to mention that I was a member of the subcommittee at the time they met back in January and my understanding, not having sat on the Harley Committee, was that there should be no new evidence apropos of what had been presented to the Harley Committee.

[Interprétation]

Si nous allions adopter cette protection de cinq ans, ce serait uniquement contre les importations; cela ne toucherait pas le consommateur, car, comme l'a dit le ministre, il y a toujours une protection de quatre ou de cinq ans et cela n'aura aucun effet sur le bill, sauf que l'industrie sera dans une meilleure position vis-à-vis son siège social.

Je ne sais pas si je devrais poser ma question au docteur Henry ou...

Le président: Nous en sommes à la discussion. Je crois que votre point de vue a été bien compris par tout le monde. Nous n'en sommes pas encore aux questions. Si vous voulez poser une question plus tard, vous le pourrez. Mais si vous avez quelque chose à ajouter, allez-y; autrement, quelqu'un d'autre aimerait...

M. Watson: Là-dessus, monsieur le président, j'estime que le Comité Harley a bien montré que le profit net de l'industrie des produits pharmaceutiques au Canada, représente environ \$15,000,000.

Le président: Monsieur Watson, vous êtes avocat tout autant que député. Je croyais que vous en appeliez au Règlement en répondant à M. Saltsman, mais vous êtes en train de faire un discours.

M. Watson: Monsieur le président, je disais que...

Le président: Je regrette, mais il me semble qu'il ne sert à rien de faire des discours; je donne donc la parole à M^{me} MacInnis.

Mme MacInnis (Vancouver-Kingsway): Monsieur le président, je constate que la moitié de la séance est maintenant passée. Comme nous avons eu une excellente discussion, j'aimerais proposer que le rapport du comité directeur soit adopté.

M. Monteith: Monsieur le président, avant de passer au vote, je me demande si je peux présenter une modification à cette proposition, mais j'aimerais mentionner que j'étais membre du sous-comité lorsqu'il s'est réuni en janvier et n'ayant pas fait parti du comité Harley, j'ai néanmoins compris que nous avions décidé qu'il ne devrait pas y avoir de nouvelles preuves au sujet de ce qui avait été présenté au Comité.

[Text]

Now, since then it has occurred to me that the Harley Committee was sitting something like three years ago and conditions are probably changed, but aside from that it occurs to me that there is possibly new evidence available, or could be available, and I am thinking of the economic facets, and so on in the industry.

As I say, whether or not I can make an amendment to the motion that the subcommittee report be adopted, I would like to move that the Committee call witnesses to give evidence in the field of economic effects on the industry, if safety measures as to therapeutic equivalency are adequate; and what effect will this Bill have on the introduction of new drugs.

I am not suggesting that a great number of witnesses be called, but it has been suggested to me that one or two knowledgeable witnesses in these fields might be Dr. L. G. Cook of the National Research Council, Dr. Bachynsky of the Health and Welfare Department and, possibly, Dr. Ferguson of Connaught Medical Research Laboratories.

Mr. Chairman: Mr. Monteith, I think you are out of order. This matter has been discussed completely at the steering committee, and re-discussed.

Mr. Monteith: As Dr. Rynard suggested earlier, Mr. Chairman, with all due respect this Committee can overrule the subcommittee at any time.

Mrs. MacInnis: On a point of order, may I point out that the amendment negates completely the report of the steering committee. Therefore, it is out of order. I would like to see the question put now and let us have a vote.

Mr. Chairman: Just a minute; on a point of clarification, the subcommittee has no authority at all. All it does is make recommendations to the Committee, and it is the Committee that adopts these recommendations. On January 28th, after lengthy discussions, you all will recall that it was made clear that no new witnesses would be called because the subject was fully covered in previous sessions and that does not mean only the Harley report; that unless there is good and valid argument that there is brand new evidence, the Committee should not hear any new witnesses. So, you cannot bring in an amendment to reverse what has been done by the Committee here.

Mr. Rynard: Mr. Chairman, I would like to speak on that. Mr. Monteith stated that...

[Interpretation]

Il y a trois ans que le Comité Harley a siégé ou à peu près, et les conditions ont sans doute changé et peut-être qu'il y a de nouvelles preuves, de nouveaux témoignages de disponibles; je songe aux facteurs économiques de l'industrie.

J'ignore si je peux présenter ici une modification à la motion, à savoir que le rapport du sous-comité soit adopté, mais j'aimerais proposer que le Comité convoque les témoins pour témoigner dans le domaine des effets économiques sur l'industrie, des mesures de sécurité et des équivalents pharmaceutiques, des effets qu'aura le bill sur l'introduction de nouveaux médicaments.

Je ne dis pas qu'un grand nombre de témoins devraient être convoqués mais, comme on me l'a suggéré, nous pourrions avoir un ou deux témoins; ça pourrait être M. L. G. Cook, du Conseil national des recherches, le D^r Bachynshy, du ministère de la Santé nationale et du Bien-être social, et peut-être le D^r Ferguson du laboratoire de recherche Connaught.

Le président: Monsieur Monteith, je crois que vos propos sont irrecevables, car ce sujet a été complètement discuté par le comité directeur, etc...

M. Monteith: Comme le D^r Rynard l'a signalé plus tôt, le Comité peut rejeter les décisions du sous-comité.

Mme MacInnis (Vancouver-Kingsway): J'invoque le Règlement. Je tiens à souligner que l'amendement contredit le rapport du comité directeur. Il est donc irrecevable. J'aimerais donc qu'on passe au vote dès maintenant.

Le président: Une explication d'abord; le sous-comité n'a aucune autorité; tout ce qu'il peut faire, c'est de formuler des recommandations au Comité, et il appartient au Comité d'adopter ces recommandations. Par conséquent, le 28 janvier, après une longue discussion, je me souviens qu'on a bien signalé qu'aucun nouveau témoin ne serait convoqué, car le sujet avait été étudié en long et en large. A moins que nous ayons de nouveaux arguments, de nouveaux témoignages, nous ne devons pas présenter de nouveaux témoins. Vous ne pouvez pas présenter un amendement pour renverser ce qu'a fait le Comité.

M. Rynard: Monsieur le président, j'aimerais dire quelque chose à ce sujet. M. Monteith a dit que...

[Texte]

Mr. Chairman: On a point of order?

Mr. Rynard: Yes, on a point of order. If there was new evidence and he was basing this on the Harley Commission Report, that it covered the economic factors and the hazards, then he is quite right and in order in bringing up the suggestion that he did.

The Chairman: Mr. Yewchuk on a point of order.

Mr. Yewchuk: My point of order was also that the recommendations of the Committee on January 28th were that if there is no new evidence, but this is a topic that has not been covered at all, and I do not see how you can say that is not new evidence.

Mr. Foster: On a point of order, Mr. Chairman? Mrs. MacInnis made a motion, so theoretically we should be discussing the motion and if these people that obviously are opposing her motion have a majority then the motion will be defeated; otherwise, the motion will be carried. Therefore, I think we should be discussing the motion.

Mr. Émard: On a point of order. If this is the case, I do not think the Chairman should have accepted this other motion. Let us get the matter straight.

Mr. Chairman: I did not accept the motion.

Mrs. MacInnis (Vancouver-Kingsway): Have I got a seconder? All right; seconded by Mr. Robinson that the report of the steering committee be now accepted.

The Chairman: We have a motion.

Mr. Rynard: On a point of order, I am wondering if we realize exactly what we are doing here. We are saying that this is to bring down the price of drugs and that alone, and no other factor counts. Now, I am saying this because the Minister of Consumer and Corporate Affairs is here and he has stated over and over again that we have to have the co-operation of the medical profession if he is going to bring the cost of drugs down, and here you are, putting through a motion that will, in effect, deny this Committee hearing evidence on the therapeutic equivalency and also on the economic factors which were never touched on in the Harley Committee Report. I think this is completely out of line. You are going to confine yourself and say that all you are going to do is bring down the price of drugs, and then admit that you have never had a feasibility study to determine whether you are going to put them up or

[Interprétation]

Le président: Invoquez-vous le Règlement?

M. Rynard: Oui. S'il y avait de nouvelles preuves, autres que la teneur du rapport du Comité Harley, qui a trait aux facteurs économiques, on pourrait fort bien demander que ces nouvelles preuves, ces nouveaux témoignages soient présentés.

Le président: Monsieur Yewchuk, qui invoque le Règlement.

M. Yewchuk: Les recommandations du Comité, le 28 janvier, tenaient compte du fait qu'il n'y avait pas de témoignage, mais on n'a pas étudié cette question, et je ne vois pas comment on peut dire qu'il n'y a pas de nouveaux témoignages.

M. Foster: J'invoque le Règlement, monsieur le président. M^{me} MacInnis a présenté une motion et nous devons l'étudier. Si ceux qui s'y opposent ont la majorité, alors la proposition sera rejetée, sinon elle sera adoptée.

M. Émard: Si c'est le cas, je pense que le président n'aurait pas dû accepter l'autre motion.

Le président: Je ne l'ai pas acceptée.

Mme MacInnis (Vancouver-Kingsway): Je propose, monsieur le président, avec l'appui de M. Robinson, que le rapport du comité directeur soit maintenant accepté.

Le président: Nous avons une proposition.

M. Rynard: J'invoque le Règlement. Je me demande si nous comprenons bien ce que nous faisons en ce moment. Nous disons effectivement que nous voulons réduire le prix des médicaments, que c'est ce facteur seulement qui compte et aucun autre. Le ministre de la Consommation et des Corporations est parmi nous, il a déclaré à multiples reprises qu'il fallait faire attention aux effets secondaires de la réduction du prix des médicaments. La motion dont nous sommes saisis empêchera le Comité d'avoir des témoignages sur les facteurs économiques que n'a jamais abordés le rapport du Comité Harley. A mon sens, cela est tout à fait à côté de la question. Vous allez vous limiter et dire que tout ce que vous allez faire, c'est réduire les prix des médicaments, puis vous allez admettre que vous n'avez pas fait faire d'étude de rentabilité pour savoir si vous alliez augmenter ou diminuer le prix des médicaments. Faites cela, et vous serez la

[Text]

down. Go ahead and do it. You will be the laughingstock of the public, and not representing them.

The Chairman: I am only the Chairman. I have a motion before me. I do not have anything...

Mr. Rynard: Then say that all you are concerned with is bringing down the cost of drugs, and then admit that you do not know whether you are going to do it or not. This, in effect, is what you are doing.

Mr. Saltsman: Mr. Chairman, on a point of order. With the greatest respect to Dr. Rynard I do believe there has been considerable evidence before this Committee on certain therapeutic equivalents and efficiencies of drugs, and I certainly tried to make the point about the economic consequences. All those matters have been discussed in this Committee; perhaps not to the complete satisfaction of yourself, Dr. Rynard, but I do not think it would be fair to say that we have not discussed, or tried to deal with those matters.

Mr. Otto: Mr. Chairman, on a point of order. I do not think Dr. Rynard's remarks should go unchallenged. The purpose of this Committee is not to pull the Minister's chestnuts out of the fire. If this Bill does not fulfil the purpose of lowering the price of drugs it is not this Committee that goes down, it is the Minister; and there are many able backbenchers who would replace him.

I think we have to follow a procedure, and it was not the procedure, for instance, in the House of Commons, on the examination clause by clause, to take away the ministerial responsibility. That, in fact, is what it is—the Minister or the Department.

The Minister has put forward a bill. Our job is to examine it, not to change it and take away the ministerial responsibility. He cannot function in such a way under the Parliamentary system. It is not the purpose of this Committee to amend the Bill and to make it what the Committee thinks is more workable, but only to examine it clause by clause and to take whatever evidence is necessary relative to the Bill and its purpose.

The Chairman: Mr. Foster, on the motion?

Mr. Foster: Yes; on the motion. It seems to me that there are two recurring themes: (1) have we got safety; and, (2) what are the economic results of this?

We have questioned Dr. Chapman at length on the matter of safety and he has satisfied

[Interpretation]

risée du public—et, de plus, vous ne le représenterez pas.

Le président: Je ne suis que le président. On m'a présenté une motion. Je n'ai rien...

M. Rynard: Dites alors que tout ce qui vous préoccupe, c'est de réduire le prix des médicaments, puis reconnaissez que vous ne savez pas si vous allez le faire ou non. C'est exactement ce que vous êtes en train de faire.

M. Saltsman: Monsieur le président, un rappel au Règlement. En toute déférence pour le docteur Rynard, je crois réellement que le Comité a reçu beaucoup de témoignages sur les équivalences et sur l'efficacité thérapeutique des médicaments, et j'ai certainement essayé de faire ressortir les répercussions économiques. Tous ces facteurs ont été discutés au sein du Comité; peut-être pas d'une façon qui vous ait donné entière satisfaction, docteur Rynard, mais je ne pense pas qu'il soit juste de dire que nous n'avons pas discuté ou essayé de discuter de ces questions.

M. Otto: Monsieur le président, j'invoque le Règlement. Je ne pense pas qu'il faille laisser passer les observations du docteur Rynard. Le but du Comité n'est pas de sortir le ministre du pétrin. Si le Bill ne réussit pas à faire baisser le prix des médicaments, ce n'est pas le Comité qui sera critiqué, mais le ministre; et il y a beaucoup de députés compétents qui pourraient le remplacer.

Je crois que nous devons suivre la procédure et l'on n'a pas l'habitude, par exemple, à la Chambre des communes, lorsqu'on examine un bill, article par article, d'enlever la responsabilité du ministre. C'est, en fait, ce dont il s'agit—du ministre, ou du ministère.

Le ministre a présenté un bill. Nous devons examiner ce bill, non pas le modifier et ôter toute responsabilité au ministre. En vertu du système parlementaire, il ne peut fonctionner de cette façon. Il n'appartient pas au Comité de modifier le Bill et d'en faire ce que le Comité estime être le plus efficace, mais uniquement de l'examiner, article par article, et de recevoir les témoignages nécessaires relatifs au Bill et à son objet.

Le président: Monsieur Foster, vous désirez faire des observations sur la motion?

M. Foster: Oui, sur la motion. Il me semble qu'il y a deux thèmes qui reviennent sans cesse: (1) avons-nous des mesures de sécurité, et (2) quels sont les résultats économiques de cette initiative? Nous avons longuement interrogé M. Chapman sur la question de la

[Texte]

the majority of us that the safety factor is well covered by this Bill and that the means of testing and evaluating drugs as they come into Canada are going to be identical to those of the past. The Food and Drug Directorate may have to expand to meet the larger number of applications coming in for drugs, but in any event there is no problem with safety. His officers and his staff are going to continue closely to scrutinize the safety factor in all drugs coming into Canada. To me this is not at issue now.

The Committee has studied this with Dr. Chapman. It has been proven to the majority of us and the will of the majority of the Committee should eventually carry.

The other factor is the economic one. It may well be true that we do not know what is going to happen to every drug company in Canada as a result of this Bill, but the majority of us are satisfied that the total effect of it is going to be a good one for the majority of Canadians. On that basis, I think we should move forward with the handling of this Bill.

The Chairman: Those in favour of the motion?

Mr. Rynard: I wish to add a comment to what Dr. Foster said.

I again reiterate the statement of the Minister that he had to have the support of the medical profession which would write the prescriptions that would lower the price of drugs, and that they had to be assured of safety.

This is the position the medical profession has taken in an editorial in the Canadian Medical Association Journal of February 8, which reads:

This is a fundamental point on which the present Bill must be faulted. Once the physician has been provided with clear and unequivocal evidence of therapeutic equivalency, he can then, and only then, make the secondary judgment based on price. When consumers are patients...

The Chairman: Dr. Rynard, I believe you are out of order.

Mr. Rynard: Perhaps I am, but I did want to present to you, Mr. Chairman, exactly what the medical profession thinks.

The Chairman: Thank you, Dr. Rynard.

Are you ready for the question?

Those in favour of the motion please rise.

[Interprétation]

sécurité, et il a convaincu la plupart d'entre nous que le facteur sécurité est assuré par le bill, et que le moyen d'analyser et d'évaluer les médicaments à leur entrée au Canada seront les mêmes que par le passé. Il faudra peut-être donner plus d'ampleur à la direction des aliments et drogues pour qu'elle puisse étudier le nombre accru de demandes qui vont être présentées. Quoi qu'il en soit, la sécurité ne présente aucun problème. Les agents et le personnel de la Direction vont continuer à examiner de près le facteur sécurité de tous les médicaments qui entreront au Canada. A mon sens, le problème n'est pas là.

Le Comité a étudié cette question avec le docteur Chapman. Je crois que la majorité des membres du Comité sont d'accord, et que c'est le désir de la majorité qui doit prévaloir. L'autre facteur est le facteur économique. Il se peut fort bien que nous ne sachions pas ce qui va arriver à chaque société de produits pharmaceutiques au Canada par suite du Bill, mais la plupart d'entre nous sommes convaincus que le résultat final du Bill sera excellent pour la majorité des Canadiens. C'est pour-quoi je pense que nous devrions aller de l'avant.

Le président: Qui est en faveur de la motion?

M. Rynard: J'aimerais ajouter un commentaire à ce qu'a dit le docteur Foster.

Je tiens à répéter la déclaration du Ministre, à savoir, qu'il lui fallait l'appui de la profession médicale, qui va rédiger les ordonnances qui permettront de réduire le prix des médicaments, et qu'il leur fallait être assurés de la sécurité.

C'est là la position prise par la profession médicale dans un éditorial du Journal de l'Association médicale canadienne du 8 février, où l'on dit qu'il s'agit d'un point fondamental où il faut s'opposer au Bill; que ce n'est qu'après qu'on lui a fourni des preuves claires et indubitables de l'équivalence thérapeutique que le médecin peut porter le second jugement, fondé sur le prix. Lorsque les consommateurs sont des patients...

Le président: Docteur Rynard, vous vous écarterez de la question.

M. Rynard: Peut-être, mais je tenais, monsieur le président, à préciser l'opinion exacte de la profession médicale.

Le président: Merci, docteur Rynard.

Peut-on mettre la motion aux voix?

Que ceux qui sont en faveur de la motion veuillent bien se lever.

[Text]

Those who are opposed?

Motion carried. Yeas: 11; Nays, 5.

• 1135

M. Émard: Monsieur le président, je ne suis pas membre du Comité, mais si j'avais eu le droit de vote, j'aurais voté contre la motion.

Le président: Merci, monsieur Émard.

Dr. Ferguson's letter reads as follows:

February 7, 1969

Dr. Gaston Isabelle
Chairman, Health Committee
House of Commons
Ottawa, Canada
Dear Dr. Isabelle:
Re: Bill C102

During the last year or more I have written letters to many members of the Government, and spoken to others expressing my concern about the proposals of Bill C102 and its predecessor.

Since your committee is considering the Bill, I feel that I should once more put my convictions on record.

As you know, the Bill proposes a partial confiscation of property rights inherent in the invention of new drugs in the hope of reducing the price of prescription drugs to the customer in the drug store. I am sure that all doctors realize that the proposed legislation will be ineffective for this purpose. It is pretty obvious too that the proposed legislation is unnecessary for the really effective measures which could achieve the purpose.

What effects are certain to follow if the Bill becomes law? One certain effect will be an immediate and substantial increase in the number of civil servants in the Food and Drug Directorate and probably in some other departments. What will the price be to the taxpayer?

The economic and political consequences of the proposed legislation are uncertain and hard to assess but they don't seem very favourable to a country which must live by international trade. Nevertheless, if it is necessary to do something about drug patents, I think that they should be revoked entirely. The economic consequences would become evident more

[Interpretation]

Ceux qui y sont opposés?

La motion est adoptée.

11 pour, 5 contre.

Mr. Émard: Mr. Chairman, I am not a member of the Committee but if I had been a member I would have voted against the motion.

The Chairman: Thank you, Mr. Émard.

Le texte de la lettre du docteur Ferguson:

Le 7 février 1969.

Monsieur le Docteur Gaston Isabelle
Président du Comité de la santé
Chambre des communes
Ottawa, Canada
Monsieur le Docteur,
Sujet: Bill C-102

Depuis un an ou plus, j'ai écrit à bien des membres du gouvernement, et parlé à d'autres, pour leur faire part de mon inquiétude relative aux propositions énoncées dans le Bill C-102 et dans celui qui l'avait précédé.

Puisque votre Comité examine actuellement le bill, j'estime de mon devoir d'exprimer une fois encore mes convictions à cet égard.

Comme vous le savez, on envisage dans ce Bill une confiscation partielle de la propriété industrielle inhérente à l'invention de nouveaux médicaments, dans l'espoir de réduire pour le consommateur le prix en pharmacie des médicaments sur ordonnance. Tous les médecins, j'en suis certain, se rendent compte que la loi proposée n'aura pas les résultats escomptés. De même, il est assez évident qu'une telle loi n'est pas nécessaire pour les mesures réellement efficaces qui permettraient de réaliser les objectifs voulus.

Quels seront inévitablement les effets de l'adoption de ce Bill? Une chose est certaine, c'est qu'il en résultera une augmentation immédiate et considérable du nombre des fonctionnaires employés par la Direction des aliments et drogues, ainsi sans doute que par d'autres ministères. Combien cela va-t-il coûter au contribuable?

Les répercussions économiques et politiques de la nouvelle loi envisagée sont incertaines et difficiles à évaluer, mais elles ne semblent pas très favorables pour un pays qui est tenu de vivre du commerce international. Si, toutefois, il est indispensable de prendre des mesures en ce qui concerne les brevets sur les médicaments, mieux vaudrait alors, il me

[Texte]

quickly, and the national policy would be clear and honest.

It might be necessary before too long to restore patent rights, but maybe not. At least our domestic manufacturers would have a chance to develop certain export markets. Bill C102 can only damage our Canadian owned manufacturers along with the foreign owned ones.

Yours very truly,

(signed) J. K. W. Ferguson, M.D.
Director

The Telegram reads as follows:

Dr. Gaston Isabelle
Chairman of the Standing Committee
Health Welfare and Social Affairs
Ottawa Ont

It is difficult to comment on the contents of your letter of February four because the nature of the evidence presented to your committee is not published. Differences of opinion on the economic aspects of this bill are to be expected but the safety and efficacy implications of the legislation must be carefully considered by the committee and assurances provided in the bill that drug products falling under this legislation receive full and careful scientific study before being permitted on the canadian market. We suggest that the bill be amended to include a section which would make it mandatory.

That a manufacturer be required to file a new product application which would be a modified new drug application describing the drug being marketed. Although this is implied in the current definition of new drug, we feel that it should be clearly stated in law. The objective of this type of application would be to make certain that new formulations by different manufacturers actually produce similar and safe therapeutic effects.

The new bill C-102 does not require this procedure. The exact nature of the application can be left to the discretion of

[Interprétation]

semble, annuler complètement ces brevets. Les répercussions économiques d'une telle mesure deviendraient plus rapidement évidentes, et la politique nationale serait du moins claire et honnête.

Il pourrait s'avérer sous peu nécessaire de rétablir les droits de brevet, mais ce n'est pas certain. Du moins, nos fabricants canadiens auraient une chance d'étendre certains marchés d'exportation. Le Bill C-102 ne peut que nuire à nos sociétés à appartenance canadienne en même temps qu'aux sociétés à appartenance étrangère.

Veuillez agréer, monsieur le Docteur, l'assurance de mes sentiments les plus distingués.

(signé) Le Directeur,
J.F.W. Ferguson,
docteur en médecine.

Le texte du télégramme:

Docteur Gaston Isabelle
Président du Comité permanent
de la santé, du bien-être social et des
affaires sociales
Ottawa, Ontario.

Il est difficile de commenter la teneur de votre lettre du quatre février parce que la nature des preuves présentées au Comité n'a pas été publiée. Il faut s'attendre à des divergences d'opinion sur les aspects économiques de ce projet de loi, mais le Comité devrait en étudier soigneusement les conséquences pour la sécurité et l'efficacité et s'assurer que la mesure garantisse une étude scientifique complète et soignée des produits pharmaceutiques en cause avant de les admettre sur le marché canadien. Nous proposons une modification du projet de loi afin d'y insérer une section en vertu de laquelle les fabricants seraient tenus de présenter une demande visant les nouveaux produits, c'est-à-dire une variante de la présente demande visant les nouveaux produits pharmaceutiques dans laquelle le produit pharmaceutique en cause serait décrit. Bien que cette procédure soit déjà implicite dans la définition actuelle du nouveau produit pharmaceutique, nous sommes d'avis qu'il faudrait l'indiquer en toute lettre dans la Loi. Le but de ce genre de demande serait de s'assurer que les nouveaux composés des divers fabricants produisent, en réalité, des effets thérapeutiques semblables et sûres.

Le nouveau Bill C-102 n'exige pas cette procédure. La nature exacte de la demande peut être laissée à la discrétion

[Text]

the food and drug Directorate who, we hope, would consult other scientists before defining regulations. The above would, in essence, divide new drugs into three categories—those being subjected to clinical investigation prior to actual marketing, those which are marketed for the first time, and those which are being marketed by a second manufacturer. The filing of an application of the latter type would not create problems for the manufacturer and would provide much greater assurances of safety and efficacy than that presently implied by the legislation. If you would like any further details with respect to our views on this subject, please contact us.

Doctors Ford, Pernarowski and Darrach
University of BC.

The Chairman: We will resume consideration of Clause 5 of Bill C-102, to amend the Food and Drugs Act. Shall Clause 5 carry?

Mr. Saltzman: We have a number of amendments.

The Chairman: Did you say a number of amendments?

Mr. Saltzman: Yes, a number of amendments, Mr. Chairman. I made them available to the Minister.

Does the Chair have them and has the Chair taken any position on them as yet? Should I introduce them one by one?

Mr. Rynard: One by one.

Mr. Saltzman: One by one.

Mr. Otto: Word by word!

Mr. Saltzman: Mr. Chairman, in Clause 5 I would like to add a new paragraph (c) reading as follows:

Mr. Rynard: On what page?

Mr. Saltzman: Clause 5, page 8. There are two subclauses there now, (a) and (b). I wish to add a new paragraph (c) reading as follows:

The establishment of a Crown Corporation on behalf of Her Majesty which shall be empowered to manufacture, sell, distribute and promote drugs offered for sale in Canada.

In other words, reading from (1a):

...the Governor in Council may make such regulations governing, regulating or prohibiting...

[Interpretation]

de la Direction des aliments et drogues qui consulterait, nous l'espérons, d'autres spécialistes avant d'établir les règlements. Nous aurions ainsi, essentiellement, trois catégories de nouveaux produits pharmaceutiques: ceux qui sont soumis à un examen en clinique avant leur mise sur le marché, ceux qui sont mis sur le marché pour la première fois, et ceux qui sont mis sur le marché par un autre fabricant. Une demande de ce genre ne présenterait pas de problèmes pour le fabricant et garantirait davantage la sécurité et l'efficacité des produits que couvre la présente Loi. Si vous désirez plus de détails sur notre position à cet égard, n'hésitez pas à nous contacter.

Docteurs Ford, Pernarowski et Darrach,
Université de Colombie-Britannique.

Le président: Nous allons reprendre l'étude de l'article 5 du bill C-102, qui vise à modifier la *Loi sur les aliments et drogues*. L'article 5 est-il adopté?

M. Saltzman: Nous avons un certain nombre de modifications à présenter.

Le président: Un certain nombre de modifications?

M. Saltzman: Oui, un certain nombre de modifications, monsieur le président. Je les ai mises à la disposition du ministre. Le président en a-t-il le texte, et a-t-il déjà pris une position à leur égard? Dois-je les présenter une à une?

M. Rynard: Une à une.

M. Saltzman: Une à une.

M. Otto: Mot à mot!

M. Saltzman: Monsieur le président, j'aimerais ajouter à l'article 5 un nouvel alinéa c), qui s'énoncerait ainsi.

M. Rynard: A quelle page?

M. Saltzman: L'article 5, à la page 8. Il y a actuellement deux dispositions, a) et b). J'aimerais ajouter un nouvel alinéa c), où l'ont mentionnerait la

Création d'une société de la Couronne qui aura le pouvoir de fabriquer des médicaments, de les annoncer, de les vendre et de les distribuer au Canada.

Par conséquent, cela commencerait, à (1 a), par:

... le gouverneur en conseil peut établir les règlements, régissant, réglementant ou interdisant...

[Texte]

and, continuing in (c),

...the establishment of a Crown Corporation on behalf of Her Majesty which shall be empowered to manufacture, sell, distribute and promote drugs offered for sale in Canada.

The Chairman: Do you wish to make your other motions?

Mr. Saltzman: Perhaps we should deal with them one at a time.

The Chairman: If we deal with them one at a time we will have to take a few minutes to consider the amendment and check with Dr. Ollivier. Order, please.

Mr. Robinson: Mr. Chairman, may we not hear all the various amendments now? Why can we not vote on them all at once? We are not going to agree with them anyway.

The Chairman: Order. Mr. Saltzman, I believe Mr. Ollivier is ready to comment on this one.

Dr. Ollivier: I am ready to pronounce on this one. I think it is easy enough. The amendment is certainly out of order in that, for one thing it involves an expenditure of money. I do not imagine you could create a Crown corporation without spending some money.

The Chairman: Thank you, Dr. Ollivier.

Mr. Saltzman: Mr. Chairman, in the interest of expediting the work of the Committee and in the light of some of the statements that have emanated from certain members of this Committee I shall reserve any argument on this particular clause for the House and we will move on to the next one.

Mrs. MacInnis (Vancouver-Kingsway): May I try the next one, Mr. Chairman.

The Chairman: You are going to move the next one, Mrs. MacInnis?

• 1140

Mrs. MacInnis (Vancouver-Kingsway): Yes, I am going to try the next one. This one, I may say, does not involve the expenditure of money—at least, I do not think so. It again is a new paragraph, paragraph (c), to be added to subsection (1), Clause 5, which would read as follows:

The permitting of hospital pharmacies, under the direction of a licensed pharmacist, to provide narcotics and control

[Interprétation]

et se continuerait par c):

création d'une société de la Couronne qui aurait pouvoir de fabriquer des médicaments, de les annoncer, de les vendre et de les distribuer au Canada.

Le président: Voulez-vous présenter vos autres motions?

M. Saltzman: Nous devrions peut-être les étudier une à une.

Le président: Dans ce cas, il nous faudra prendre le temps d'examiner la modification proposée et de demander à M. Ollivier ce qu'il en pense. A l'ordre, s'il vous plaît.

M. Robinson: Monsieur le président, ne pouvons-nous pas avoir toutes les modifications à la fois, et les mettre aux voix toutes à la fois, puisque nous allons les rejeter de toute façon?

Le président: A l'ordre, monsieur Saltzman, je crois que M. Ollivier est prêt à faire des observations sur cette motion.

M. Ollivier: Je suis prêt à me prononcer sur cette motion. Ce n'est pas difficile. Elle est assurément irrecevable, car, tout d'abord, elle suppose une dépense d'argent. Je ne pense pas que l'on puisse créer une société de la Couronne sans dépenser de l'argent.

Le président: Merci, monsieur Ollivier.

M. Saltzman: Monsieur le président, en vue d'accélérer le travail du Comité, et étant donné certaines déclarations qu'ont faites des membres du Comité, je réserverai le plaidoyer que j'allais présenter en faveur de cette disposition, et je le ferai à la Chambre. Passons à la modification suivante.

Mme MacInnis (Vancouver-Kingsway): Puis-je essayer de présenter la modification suivante, monsieur le président?

Le président: Vous allez la présenter vous-même, madame MacInnis?

Mme MacInnis (Vancouver-Kingsway): Oui, je vais essayer. Cette modification ne suppose pas de dépenses—du moins, je le pense. C'est un nouvel alinéa, l'alinéa c) qui sera ajouté au paragraphe (1) de l'article 5 et qui se lira ainsi qu'il suit:

Qu'il soit permis aux pharmacies des hôpitaux, sous la direction d'un pharmacien diplômé, de fournir sur ordonnance

[Text]

drugs on prescription under the Food and Drugs Act and The Narcotic Control Act.

My reason for wanting to introduce this amendment is that it was approved by the Hall Commission when it made a study of this matter. And the Hall Commission stated that the Government of Manitoba had brought to the attention of the Commission that the regulations as presently administered by the Narcotic Control Act and the Food and Drug Act are creating difficulties for hospitals in dispensing prescribed drugs. Now they quote:

the costs of Medicare prescriptions filled by hospital and retail pharmacies are substantially different. Although the hospital enjoys certain purchasing privileges by comparison with the retail pharmacies, it is considered that these do not adequately explain the difference between the average hospital prescription cost of \$1.58 and the average retail pharmacy prescription cost of \$2.82 and \$3.07. It is obvious that savings can be effected by the Government if recipients of Medicare are encouraged to have their prescriptions filled at the general hospital pharmacies. This practice is hampered, however, by regulations under the Narcotic Control Act and the Food and Drugs Act which prohibit hospital pharmacies from filling prescriptions containing a narcotic or a controlled drug. Not only are these prescriptions eliminated, but recipients of Medicare tend to turn to the retail pharmacies as they become aware of the limited service which the hospitals are permitted to provide.

It was the Hall Commission that thought that this change ought to be made, and in line with the fact that this bill is designed to bring down the cost of drugs to the consumer, it seems to me that this would be a very excellent thing, not to force the provincial hospitals to do this sort of thing, but at least to give them power under the Food and Drugs Act to do their own prescribing where this is indicated.

Consequently that is why we are moving, Mr. Chairman, the permitting of hospital pharmacies, not the directing but the permitting, under the direction of a licensed pharmacist, to provide narcotics and controlled

[Interpretation]

des narcotiques et des médicaments contrôlés, conformément à la Loi des aliments et drogues et à la Loi sur les stupéfiants.

Ma raison pour vouloir introduire cet amendement, c'est qu'il a été approuvé par la Commission Hall lorsqu'elle a fait une étude de la question. Et la Commission Hall a déclaré que le gouvernement du Manitoba avait signalé à la Commission que les règlements présentement appliqués en vertu de la Loi sur les stupéfiants et la Loi des aliments et drogues créaient des difficultés aux hôpitaux en ce qui concerne la préparation des ordonnances. Nous citons ce témoignage:

..Le coût des ordonnances ressortissant au régime d'assurance-médicale est très différent selon qu'elles sont exécutées par les pharmacies d'hôpitaux ou par les pharmacies de détail. Bien que l'hôpital jouisse de certains privilèges en matière d'achat en comparaison des pharmacies de détail, on estime que ces avantages ne suffisent pas à expliquer l'écart qui existe entre le coût moyen de l'ordonnance d'hôpital (\$1.58) et le coût moyen de l'ordonnance de la pharmacie de détail (\$2.82 et \$3.07). Il est évident que l'État peut épargner de l'argent s'il encourage les bénéficiaires de l'assurance-maladie à faire préparer leurs ordonnances à la pharmacie de l'hôpital général. Cette pratique se trouve gênée, cependant, par les règlements édictés en vertu de la Loi sur les stupéfiants et de la Loi sur les aliments et drogues qui interdisent aux pharmacies d'hôpitaux l'exécution d'ordonnances contenant une drogue narcotique ou réglementée. Non seulement élimine-t-on ces ordonnances, mais les bénéficiaires du régime de soins médicaux, à mesure qu'ils se rendent compte de la limitation des services que les hôpitaux sont autorisés à rendre, tendent à se tourner vers les pharmacies de détail.

C'était la Commission Hall qui estimait que ce changement devrait être apporté conformément au fait que le bill est censé réduire les prix des médicaments aux consommateurs. Je crois qu'on ne devrait pas forcer les pharmacies des hôpitaux à faire cela mais on devrait pouvoir leur permettre de rédiger leurs propres ordonnances lorsque cela est requis.

C'est pourquoi nous proposons qu'on permette aux pharmacies des hôpitaux sous la direction d'un pharmacien diplômé de fournir, sur ordonnance, des narcotiques et des médicaments contrôlés conformément à la Loi

[Texte]

drugs on prescriptions under the Food and Drugs Act and the Narcotic Control Act. Possibly before that is even dealt with by a law counsellor, Dr. Chapman might have some comments to make on it.

Mr. Otto: Mr. Chairman, on a point of order. Could we not have the legal adviser rule on this before Dr. Chapman might commit himself?

Mr. Yewchuk: On a point of order, Mr. Chairman. I believe the lady is trying to put her colleague, Mr. Orlikow, and his drug firm out of business by her amendment.

Mrs. MacInnis (Vancouver-Kingsway): I think he can stand up to it.

The Chairman: On a point of order, Mr. Émard?

● 1143

M Émard: Pourquoi n'adopterions-nous pas une résolution pour socialiser la médecine et la pharmacie? Cela empêcherait toutes les autres résolutions...

Le président: A l'ordre! A l'ordre s'il vous plaît. M. Ollivier, êtes-vous prêt à rendre le verdict?

Dr. P. M. Ollivier (Law Clerk and Parliamentary Counsel): Mrs. MacInnis spoke long enough that I had time to make up my mind and give an opinion on her amendment. Clause 5 according to the explanatory note in the bill, says:

● 1145

Clause 5: The purpose of this amendment is to authorize the making of regulations under the Food and Drugs Act for the protection of the public in relation to the safety and quality of drugs manufactured outside Canada.

Therefore, I think that this amendment is also outside the scope of the bill, as it deals with the marketing of drugs. It is outside the scope I mean of this clause, because Clause 5 does not deal with the marketing of drugs, whereas Mrs. MacInnis' amendment deals with the marketing of drugs.

The Chairman: So I must rule the amendment out of order. Are there any other amendments?

Mr. Saltsman: Mr. Chairman, I would just like to direct a question to the law officer as a matter of clarification. In subsection (1a) it says:

Without limiting or restricting the authority conferred by any other provisions

[Interprétation]

des aliments et drogues et à la Loi sur les stupéfiants. Avant que le conseiller juridique ne fasse ses commentaires, peut-être que le D^r Chapman aurait des commentaires à faire à ce sujet.

M. Otto: J'invoque le règlement, monsieur le président. Je ne pense pas que le D^r Chapman puisse faire des commentaires avant que le conseiller juridique se soit prononcé.

M. Yewchuk: J'invoque le règlement moi aussi, monsieur le président. Je crois que M^{me} MacInnis essaie par son amendement de mettre en faillite son collègue, M. Orlikow, et son entreprise pharmaceutique.

Mme MacInnis (Vancouver-Kingsway): Je crois qu'il peut le supporter.

Le président: J'invoque le règlement, monsieur Émard?

Mr. Émard: Could we not adopt a resolution to socialize medicine and pharmaceuticals? This would avoid all the other resolutions...

The Chairman: Order! Order, please. Mr. Ollivier, are you ready to return a verdict?

M. P. M. Ollivier (Légiste et conseiller parlementaire): M^{me} MacInnis a parlé assez longtemps pour me permettre de prendre une décision et de donner une opinion au sujet de son amendement. L'article 5, d'après la note explicative, dit que:

Article 5: Cette modification a pour but d'autoriser que soient établis ces règlements en vertu de la Loi des aliments et drogues pour la protection du public quant à l'innocuité et à la qualité des drogues fabriquées hors du Canada.

En conséquence, je crois que cet amendement dépasse le cadre du bill car il se rapporte à la mise en vente des médicaments. Cela dépasse donc le cadre de cet article, car l'article 5 ne se rapporte pas à la vente des médicaments, tandis que les remarques de M^{me} MacInnis se rapportent à la mise en vente.

Le président: Je dois donc déclarer l'amendement irrecevable.

M. Saltsman: Monsieur le président, je voudrais poser une question au conseiller juridique afin d'obtenir des éclaircissements. Au paragraphe (1c) il dit:

Sans limiter ni restreindre l'autorité, accordée par toute autre disposition de la

[Text]

of this Act or any Part therefor carrying into effect the purposes and provisions of this Act...

Does not this somewhat modify the harshness of your judgment?

Mrs. MacInnis (Vancouver-Kingsway): I might also say that under (b) it refers to:

the distribution or sale in Canada...

Distribution is mentioned.

Dr. Ollivier: Perhaps Mr. Henry would be in a better position, but at first glance it seems to me that you are limited by what is in the clause itself, and I take the clause to mean what the explanatory note says it means.

Mr. Basford: I might just point out, Mr. Saltzman, that under the Food and Drugs Act, the director has all the authority he requires. There is no amendment required. As a matter of policy, which if you want I will ask Dr. Chapman to discuss, there are limitations on narcotic and controlled drugs, but there is no legal restriction, I am advised, on a hospital pharmacy filling any prescription it wants. This is simply a matter of individual hospital policy as to how they treat prescriptions, and for whom they are prepared to prescribe. But there are some rules relating to narcotics and controlled drugs on which Dr. Chapman may want to say a word.

Mr. Otto: Mr. Chairman, on a point of order, before Dr. Chapman gets into this. The law officer has pointed out to you and to the Committee that it is out of order. Secondly, we are opening a subject which is completely strange to this bill, which will probably be examined and discussed as a subject matter in accord with the new proposed bill dealing with narcotics. I feel that if we get on to a tangent of narcotics, which is a completely new issue, it does not serve the purpose of this Committee or of this bill. And I suggest that you make a ruling now as to whether this motion is out of order or not.

Mrs. MacInnis (Vancouver-Kingsway): The law officer has made the point clear in his opinion, so there is no point in pursuing this further. If it is out of order I would like to withdraw it at this stage and not press it to a vote.

The Chairman: I am ruling it out of order now.

Mrs. MacInnis (Vancouver-Kingsway): We can do it both ways.

[Interpretation]

présente loi, d'établir des règlements pour l'exécution des objets et l'application effective des dispositions de la présente loi...

Est-ce que cela modifie la rigidité de votre jugement?

Mme MacInnis (Vancouver-Kingsway): Je pourrais aussi dire que dans b) il est dit:

la distribution ou vente au Canada...

La distribution est mentionnée.

M. Ollivier: Peut-être que le docteur Henry pourra mieux répondre que moi mais il me semble au départ que l'on est limité parce qu'il est prévu dans l'article lui-même. Je pense que l'article signifie ce qui est exposé dans la note explicative.

M. Basford: Monsieur Saltzman, je voudrais faire remarquer qu'en vertu de la Loi sur les aliments et drogues, le directeur a toute l'autorité nécessaire pour agir sans un amendement. Comme question de ligne de conduite que si vous le désirez je demanderai au Dr. Chapman de discuter, il y a des limites en ce qui concerne les narcotiques et les drogues contrôlées, mais il n'y a pas de restriction juridique qui empêche une infirmerie d'hôpital d'honorer une ordonnance. C'est une simple question de politique de chaque hôpital, à savoir pour qui on fait des ordonnances et à qui on les délivre. Mais il y a des règlements concernant les stupéfiants et les drogues contrôlées au sujet desquels Dr. Chapman veut peut-être vous parler.

M. Otto: J'invoque le règlement, monsieur le président, avant que Dr. Chapman commence. L'expert juridique a fait remarquer au Comité que cela dépasse le cadre de la question et que nous attaquons un sujet qui est complètement étranger au bill. Il sera probablement examiné et discuté conformément au nouveau bill se rapportant aux stupéfiants. Je pense que si nous prenons une tangente vers les stupéfiants, une question entièrement nouvelle, nous ne ferons rien de bon pour le Comité ou pour le bill. Je vous propose donc de prendre une décision au sujet de savoir si cette motion est recevable ou non.

Mme MacInnis (Vancouver-Kingsway): L'expert juridique nous a dit, qu'à son avis, il ne sert à rien d'aller plus loin puisque c'est contraire au règlement. Si la motion est contraire au règlement, je la retire pour le moment et je n'insiste pas pour un vote.

Le président: Je décide donc que la motion est contraire au règlement.

Mme MacInnis (Vancouver-Kingsway): Nous pouvons le faire de deux façons.

[Texte]

The Chairman: Anything else? Have you another amendment there?

Mr. Saltzman: You can hardly wait for these. I have an amendment again that a new paragraph (c) be added to subsection (1a):

the regulation of drug manufacturing, importing, and distribution

so that only drugs having a generic name be allowed to be sold in Canada.

Mrs. MacKinnis (Vancouver-Kingsway): I am sorry, this one was done already the other day. We got mixed up. That was when he was not here.

The Chairman: Mr. Saltzman.

Mr. Saltzman:

All prior submission of advertisements on prescription drugs addressed to doctors, pharmacists, hospitals and health institutions should be made to the Food and Drug Directorate including information relating to side effects, contra-indications, and effectiveness.

This was also a recommendation of the Restrictive Trade Practices Commission Report on Drugs, 1963.

The Chairman: Dr. Ollivier?

Dr. Ollivier: Mr. Chairman, again I would like Mr. Henry to speak to this one because I think this amendment overlap the Food and

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Drugs Act and regulations. Or perhaps the Minister wants to say something.

Mr. Basford: I would say, Mr. Chairman, that Dr. Chapman can go further if you wish, but again I say that in the Food and Drugs Act, this amendment overlaps existing regulations. Dr. Chapman is now in a position to control advertising when a drug comes on the market. I might let Dr. Chapman explain, rather than myself.

Dr. R. A. Chapman (Director General, Food and Drug Directorate, Department of National Health and Welfare): Mr. Chairman, we

[Interprétation]

Le président: Avez-vous quelque chose d'autre, un autre amendement?

M. Saltzman: Vous pouvez difficilement les attendre. J'ai un nouvel amendement ajoutant un nouvel alinéa c) au paragraphe (1a):

la réglementation de la fabrication, l'importation et la distribution des médicaments

de sorte que seuls les médicaments ayant un nom générique puissent être vendus au Canada.

Mme MacInnis (Vancouver-Kingsway): Je m'excuse, on a déjà fait cela l'autre jour. Nous nous sommes mélangés. Il n'était pas alors ici.

Le président: Monsieur Saltzman.

M. Saltzman:

Que la réclame expédiée aux médecins, aux pharmaciens, aux hôpitaux et aux institutions de santé au sujet de médicaments, soit d'abord soumise à la Direction des aliments et drogues et qu'on y ajoute les renseignements pertinents relatifs aux effets secondaires, aux contre-indications et à l'efficacité de ces mêmes médicaments.

Ceci a aussi été recommandé par la Commission sur les pratiques restrictives du commerce dans son rapport de 1963 sur les produits pharmaceutiques.

Le président: Monsieur Ollivier.

M. Ollivier: Monsieur le président, une fois de plus, je voudrais que M. Henry commente cela car cet amendement fait double emploi

avec les dispositions de la Loi des aliments et drogues. Ou peut-être que le ministre voudrait dire quelque chose.

M. Basford: Je dirais, monsieur le président, que M. Chapman peut aller plus loin si vous le souhaitez, mais cet amendement fait double emploi avec les règlements existants. Dr Chapman peut en ce moment contrôler la publicité quand une nouvelle drogue est lancée sur le marché. Je préfère laisser la parole au Dr Chapman. Lorsqu'une drogue est lancée sur le marché...

Dr R. A. Chapman (directeur général, Direction des aliments et drogues, ministère de la Santé nationale et du Bien-être social):

[Text]

now have the authority under Section 24(1) of the Food and Drugs Act to the effect that:

The Governor in Council may make regulations for carrying the purposes and provisions of this Act into effect

and under (b) (i):

(i) the labelling and packaging and the offering, exposing and advertising for sale of food, drugs, cosmetics and devices, ... to prevent the consumer or purchaser thereof from being deceived or misled as to its quantity, character, value, composition, merit or safety or to prevent injury to the health of the consumer or purchaser

And this does cover the advertising in the medical literature, and any other type of advertisement that goes to the professions.

Mr. Saltzman: If I understand you, Doctor, this enables you to do so. It does not necessarily mean that you examine all ads prior to their insertion in these journals and these various media.

Dr. Chapman: That is quite correct.

Mr. Saltzman: The purpose of this amendment is to ensure that they are all submitted in advance as a matter of form.

Dr. Chapman: I should point out, Mr. Chairman, however, that Section 24 (1) reads:

The Governor in Council may make regulations for carrying the purposes and provisions of this Act into effect...

Mr. Saltzman: The purpose of this amendment is to assist the Governor in Council to see that they are all submitted. I am just trying to be helpful to the Governor in Council.

Mr. Basford: No, but the point I am making is that the statute does not require any amendment and this is an amendment to the statute. The power is already in the statute to deal with this situation and your question is with the regulations, not with the statutes.

The policy of the Food and Drug Directorate is that when a new drug comes on the market a monograph is developed on all

[Interpretation]

Monsieur le président, nous avons maintenant autorité en application de l'article 24 (1) de la Loi sur les aliments et drogues qui dit:

Le gouverneur en conseil peut établir des règlements pour l'exécution des objets et l'application effective des dispositions de la présente loi

et en b) (i):

concernant

(i) l'étiquetage et l'emballage et la présentation, l'exposition et l'annonce en vente d'aliments, drogues, cosmétiques et instruments;...

afin d'empêcher que le consommateur ou l'acheteur d'un article ne soit déçu ou trompé sur sa quantité, sa nature, sa valeur, sa composition, ses avantages ou sa sûreté, ou de prévenir quelque dommage à la santé du consommateur ou acheteur.

Et ceci comporte la publicité dans les journaux de médecine, et tout autre genre de publicité à l'intention des professions.

M. Saltzman: Si je comprends bien, docteur, cela vous permet de le faire. Cela ne veut pas dire nécessairement que vous examinez toute la publicité avant qu'elle ne soit insérée dans les différentes publications.

M. Chapman: C'est exact.

M. Saltzman: L'objectif de cet amendement est de s'assurer que tout est soumis à l'avance.

M. Chapman: Monsieur le président, j'aimerais attirer votre attention sur le texte du paragraphe 1 de l'article 24:

Le gouverneur en conseil peut établir des règlements pour l'exécution des objets et l'application effective des dispositions de la présente loi...

M. Saltzman: Le but de l'amendement est d'aider au gouverneur en conseil en nous assurant que toute publicité est soumise. Je ne veux qu'aider le gouverneur en conseil.

M. Basford: C'est un amendement qui n'est pas nécessaire car ces possibilités existent déjà dans la loi qui est en vigueur. La Direction doit recevoir une monographie sur les nouveaux médicaments lancés sur le marché et toute la publicité ultérieure doit être basée sur cette monographie qui doit donner tous les renseignements nécessaires, y compris les effets secondaires et les contre-indications. Je

[Texte]

subsequent advertising and the advertiser must stick to that monograph, including the side effects and the contra-indications and so forth. But my point is that the Act does not require amendments for that purpose.

Mr. Saltzman: I think the Chairman is ready to say something on this.

The Chairman: Is there anything else to say on this amendment, Dr. Ollivier?

Dr. Ollivier: I have no objection from the legal point of view. It might be redundant. It might just say that the Governor in Council can do something that it can already do, but that does not make the amendment out of order.

Mr. Saltzman: No. I would like to put it to a vote if I might, Mr. Chairman. If the amendment is in order without further argument I would like to see it put to a vote of the Committee.

The Chairman: Moved by Mr. Saltzman that Section 24 of the Food and Drugs Act be amended by adding to Subsection (1) (a) paragraph (c).

Mr. Saltzman: A new paragraph (c).

The Chairman: A new paragraph (c) as follows:

All prior submission of advertisements on prescription drugs addressed to doctors, pharmacists, hospitals and health institutions should be made to the Food and Drug Directorate including information relating to side effects, contra-indications, and effectiveness.

Those who are in favour?

Mr. Otto: Mr. Chairman, just to straighten this out, if I understand Dr. Ollivier correctly there is no objection to putting an amend-

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ment almost identical to existing legislation in other statutes. Does this mean that any member here may introduce amendment after amendment duplicating legislation or clauses already in other bills? Is that your meaning?

Dr. Ollivier: I did not say that exactly, as I do not know that it duplicates it. It perhaps goes a little further. It forces the government to do something that it already has directed. That is the way I understand it.

[Interprétation]

dis donc qu'il n'est pas nécessaire de modifier la Loi pour atteindre ce but.

M. Saltzman: Je crois que le président a quelque chose à dire.

Le président: Désirez-vous ajouter quelque chose sur cet amendement, monsieur Ollivier?

M. Ollivier: Du point de vue juridique, je ne m'y oppose pas. Cela peut faire double emploi. L'amendement peut donner l'autorité au gouvernement de faire des choses qu'il peut déjà faire, mais il est quand même recevable.

M. Saltzman: Non. J'aimerais qu'il soit mis aux voix, monsieur le président. Si l'amendement est recevable, j'aimerais qu'il soit mis aux voix sans autre débat.

Le président: Il est proposé par monsieur Saltzman que l'article 24 de la *Loi des aliments et drogues* soit amendé en ajoutant à l'alinéa a) du paragraphe 1, l'alinéa c).

M. Saltzman: En ajoutant le nouvel alinéa c)

Le président: Un nouvel alinéa c) qui se lit ainsi:

La réclame adressée aux médecins, aux pharmaciens, aux hôpitaux et aux institutions de santé au sujet de médicaments doit d'abord être soumise à la Direction des aliments et drogues. On doit y ajouter tous les renseignements pertinents relatifs aux effets secondaires, aux contre-indications et à l'efficacité de ces mêmes médicaments.

Quels sont ceux qui sont en faveur?

M. Otto: Si j'ai bien compris, il n'est pas interdit de soumettre un amendement à peu près identique à un autre texte de loi. Est-ce

que cela veut dire que les députés peuvent proposer des amendements qui sont un dédoublement de ce qui existe déjà? Est-ce que c'est ce que vous voulez dire?

M. Ollivier: Je n'ai pas dit cela car j'ignore si c'est une reproduction exacte. Peut-être l'amendement va-t-il un peu plus loin. Il force le gouvernement à faire quelque chose qu'il peut déjà faire. Voilà comment je comprends l'amendement.

[Text]

Mr. Otto: Dr. Ollivier, unless I misread or have not heard Mr. Saltsman's amendment—he said that he is adding a subclause, but the original part of (1a):

“(1a) Without limiting or restricting the authority conferred by any other provisions of this Act or any Part thereof for carrying into effect the purposes and provisions of this Act or any Part thereof, the Governor in Council may make such regulations governing, regulating or prohibiting

That is the carrying part of it.

Mr. Saltsman: Mr. Chairman, if I might just say, on a point of clarification to Mr. Otto, I understand that the Governor in Council may make these regulations and under some circumstances does investigate the kind of thing that this amendment refers to.

The purpose of moving this amendment is to make it mandatory.

Mr. Otto: Then you are amending Clause (1) (a)?

Mr. Saltsman: Yes.

Mr. Otto: I thought you were just adding to it.

Mr. Saltsman: No, we are amending—we are adding a section on.

Mr. Otto: The question now before Dr. Ollivier is whether that is in order.

Dr. Ollivier: I want to make the distinction between “may” and “shall”. When we say that the Governor General may do something, it means that he shall do it. You never say that the Governor in Council shall do something. That is the distinction. If you impose a duty on a commission you say that the commission shall do it, but if you impose a duty on the Governor in Council you say the Governor in Council may do it. On that second point I am not quite in agreement. It forces the Governor in Council to do something.

Mr. Monteith: Mr. Chairman, if this passed, would it mean that every piece of advertising literature that went out under any conditions at all would have had to be checked previously by the Food and Drug Directorate?

Dr. Ollivier: I would think so. Even if you say “may” they would have to do it.

Mr. Otto: Mr. Chairman, back to my point of order. Then, Dr. Ollivier, Dr. Chapman has already said that under Section 24 of the Food and Drugs Act the Governor in Council

[Interpretation]

M. Otto: A moins que je n'aie pas bien compris l'amendement de M. Saltsman, il dit qu'il ajoute un alinéa alors que le texte original déclare:

(la) Sans limiter ni restreindre l'autorité accordée par toute autre disposition de la présente loi, d'établir des règlements pour l'exécution des objets et l'application effective des dispositions de la présente loi ou d'une partie de ladite loi, le gouverneur en conseil peut établir des règlements, régissant, réglementant ou interdisant

M. Saltsman: Si vous me permettez de clarifier le tout pour le bénéfice de Monsieur Otto, le gouverneur en conseil peut établir ces règlements et, en certains cas, il enquête sur ces points que mentionne l'amendement.

Le but de l'amendement est de rendre le tout obligatoire.

M. Otto: Vous modifiez l'alinéa a) du paragraphe 1?

M. Saltsman: Oui.

M. Otto: Je croyais que vous ajoutiez une nouvelle partie.

M. Saltsman: Nous l'amendons, nous ajoutons un nouvel alinéa.

M. Otto: Il appartient donc à monsieur Ollivier de nous dire si l'amendement est recevable.

M. Ollivier: Je dois établir la distinction entre «peut» et «doit». Lorsqu'on dit que le gouverneur en conseil peut faire telle chose, cela signifie qu'il doit le faire. Vous ne dites jamais au gouverneur en conseil qu'il doit faire telle chose. Si vous imposez un devoir à une commission, vous dites qu'elle doit le faire, mais si vous l'imposez au gouverneur en conseil, vous dites qu'il peut le faire. Pour ce qui est du deuxième point, je ne suis pas tout à fait d'accord parce qu'il force le gouverneur en conseil à poser un geste.

M. Monteith: Si cet amendement était adopté, cela voudrait-il dire que toute publicité, quelle que soit sa forme, devrait d'abord être vérifiée par la Direction des aliments et drogues?

M. Ollivier: Je le pense. Même si vous dites «peut», elle devra le faire.

M. Otto: Monsieur le président, j'invoque le Règlement. Monsieur Chapman a déclaré plus tôt que selon l'article 24 de la *Loi des aliments et drogues* le gouverneur en conseil a

[Texte]

already has that power, identical to what Mr. Saltzman has moved. What I am asking the Chair is that if this is in order, then is it also in order to move any other amendment which is duplicated in another bill? That is really my point of order.

Dr. Ollivier: I do not think it is in another bill. I think it is in the same bill. It is still in the Food and Drugs Act.

Mr. Otto: What does it matter whether it is in the same bill or another bill?

Dr. Ollivier: I know, but it overlaps. That was my first objection to it, but if the Committee wants to be redundant and accept something that is not necessary that is up to the Committee.

The Chairman: Are you ready for the question? Those who are in favour of the amendment as read? Those who are opposed?

Eleven opposed and two in favour.

I declare the amendment lost.

Shall Clause 5 carry? Mrs. MacInnis.

Mrs. MacInnis (Vancouver-Kingsway): We have one more amendment.

The Chairman: I am sorry.

Mrs. MacInnis (Vancouver-Kingsway): This one arises from the concern of the Restricted Trade Practices Commission report on drugs in 1963 over the way in which promotion and advertising adds unnecessarily to the cost of drugs. They urge that there should be control

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measures introduced and this is also a proposal to amend this section that we have been having such bad luck with. I wish the legal counsellor to keep in mind whether or not this thing is already covered—whether or not the power is there to do this:

The prohibition of distribution of drug samples by drug manufacturers for purposes of advertising and promotion, except when a physician or the pharmacist makes a separate specific written request for samples of the particular drug or drugs in which he may be interested.

This would have the effect of stopping a great deal of the flood of samples into doctors' offices, unasked, which add very greatly to the cost of drugs through promotion and advertising.

It may be that there is already power in the Food and Drug Directorate to do this or there may not be. It probably depends on that whether or not this amendment would be in order.

[Interprétation]

déjà ce pouvoir que Monsieur Saltzman veut lui donner. Voici ce que je désire savoir: si cet amendement est recevable, il serait donc possible de proposer tout amendement reproduisant une disposition existant dans un autre bill?

M. Ollivier: Je ne crois pas que ce soit dans un autre bill, c'est dans le même Bill. Dans la *Loi des aliments et drogues*.

M. Otto: Est-ce qu'il importe que ce soit dans le même bill ou dans un autre bill?

M. Ollivier: C'était mon objection. Si le Comité est prêt à inclure quelque chose qui n'est pas nécessaire, c'est à lui d'en juger.

Le président: Quels sont ceux qui sont en faveur de l'amendement tel qu'il a été lu? Ceux qui sont contre? Onze contre et deux en faveur. Je déclare l'amendement défait.

L'article 5 est-il adopté?

Madame MacInnis?

Mme MacInnis (Vancouver-Kingsway): Nous avons un autre amendement.

Le président: Je m'excuse.

Mme MacInnis (Vancouver-Kingsway): Il découle de l'inquiétude manifestée par la Commission sur les pratiques restrictives du commerce dans son rapport de 1963 sur les produits pharmaceutiques. Selon la Commission la publicité ajoute au coût des médicaments.

Elle suggère un certain contrôle. Il s'agit donc d'un amendement à cet article que nous avons voulu modifier, sans trop de succès, jusqu'à présent. Le conseiller juridique pourra faire des commentaires.

L'interdiction de distribution d'échantillons de médicaments par les fabricants, aux fins de publicité et de promotion, sauf lorsqu'un médecin ou un pharmacien demandant expressément par écrit des échantillons spécifique.

Cela aura pour effet d'arrêter le flot des échantillons envoyés aux cabinets médicaux, et qui grèvent lourdement le prix de vente des médicaments. Peut-être que la Direction des aliments et drogues peut le faire, ou peut-être ne le peut-elle pas. C'est ainsi que l'on jugera de la recevabilité de l'amendement.

[Text]

Mr. Basford: Mr. Chairman, my advice is that a written request is now required—and Dr. Chapman can supplement what I say—for example, in prescription drugs, where the dosage is higher than set out in Regulation C.01.048.

Mrs. MacInnis (Vancouver-Kingsway): But this amendment would apply to all sample prescription drugs.

The Chairman: Dr. Ollivier?

Dr. Ollivier: I think this amendment is out of order because it is outside the scope of the Bill; it is outside the scope of Clause 5 which does not attempt to deal with the regulation of marketing except to the extent that aspects of safety and quality are involved. Its purpose otherwise is to remove barriers to trade by use of patent and trade mark systems and so increase the price of competition in the market.

The Chairman: I must declare the amendment out of order.

Shall Clause 5 carry?

Mr. Howe: Mr. Chairman, I have one question for clarification.

The Chairman: To whom are you directing your question, Mr. Howe?

Mr. Howe: I am directing it to the Minister or to Dr. Chapman of the Food and Drug Directorate. It is in connection with the Harley Commission Report concerning Clause 18 on page 54.

This may be covered in some other act, but it has to do with the latter part of Clause 18 which states:

... your Committee recommends that the Rules under the Patent Act be amended to permit the Commissioner to seek and receive outside independent expert advice in the determination of this question.

This is in connection with safety and with inspecting premises where drugs are manufactured in other countries, I presume? As I say, my question is for clarification.

Is it the practice of the Food and Drug Directorate to bring in outside expert opinion to decide these questions? I did not see in anywhere in the Bill, or any indication in the Bill that this was covered.

Mr. Basford: Mr. Howe, I will ask Dr. Chapman to talk about the Food and Drug Directorate.

[Interpretation]

M. Basford: M. le président, une demande écrite est à mon avis nécessaire, et le Dr. Chapman peut appuyer ce que je dis, par exemple à propos des médicaments délivrés sur ordonnance dont le dosage est plus élevé que ce qui est prévu dans le Règlement C-01048...

Mme MacInnis (Vancouver-Kingsway): Mais cet amendement s'appliquerait à tous les échantillons médicaux.

Le président: Monsieur Ollivier?

M. Ollivier: Je crois que cet amendement n'est pas recevable, car il dépasse le cadre du bill. Il dépasse le cadre de l'Article 5, qui ne se rapporte pas à la vente ou à la mise en marché, sauf en ce qui concerne la qualité et la sécurité. Son objectif est par ailleurs de lever les barrières commerciales par l'emploi de systèmes de brevets et de marques déposées, haussant de la sorte le niveau de la concurrence.

Le président: Donc, je déclare cet amendement irrecevable. Est-ce que l'article 5 est adopté?

M. Howe: J'ai une question, monsieur le président. Je voudrais obtenir un éclaircissement.

Le président: A qui posez-vous la question?

M. Howe: Je pose la question au ministre ou à M. Chapman. Il s'agit du rapport de la Commission Harley, Article 18, page 54. Il en est peut-être question dans une autre loi, mais cela a un rapport avec la fin de l'article 18, qui déclare:

le Comité recommande que les règles édictées aux termes de la Loi sur les brevets soient modifiées pour permettre au Commissaire de rechercher et d'obtenir l'avis de spécialistes indépendants de l'extérieur en vue d'en arriver à une décision;

Il s'agit de la sécurité et de l'inspection des locaux où les médicaments sont fabriqués dans d'autres pays, je présume? C'est juste une mise au point de ma part. Est-ce que les Aliments et drogues peuvent engager des experts à l'extérieur pour régler les questions? Je n'ai pas vu cela dans le Bill où où que ce soit.

M. Basford: Monsieur Howe, je vais demander à M. Chapman de vous parler de la position de la Direction des aliments et dro-

[Texte]

The Commissioner of Patents already has that power. He has power under the Act, as it is now, to seek independent advice from whomever and from wherever he can get it.

Mr. Howe: It must have been there when the report was made so why was it in the report?

Mr. Basford: I do not know. I did not write the report. It is clear, however, under the Patent Act that the Commissioner—who is here and can speak to it if he wishes—can seek whatever independent advice he wants.

I will ask Dr. Chapman to supplement the balance of your question.

Dr. Chapman: Mr. Chairman, it seems to me that this recommendation relates to the granting of a compulsory licence to import drug products:

...and to this end, your Committee recommends that the Rules under the Patent Act be amended to permit the Commissioner to seek and receive outside independent expert advice in the determination of this question.

Mr. Howe: It seems from this that the rules in the Patent Act should be amended to ensure safety and that the premises being looked into, where these drugs are being made, are clean and tidy and adequate to manufacture the product.

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Mr. Basford: Possibly the difficulty arises, Mr. Howe, from a view that the Harley Committee had that we have not entirely accepted. I have suggested both in the House and in my opening statement to the Committee that the rules relating to patents and the granting of patents and of compulsory licences was one question, and a question controlled by the Commissioner. The second question, which is of paramount consideration, is safety and it is a matter for the Food and Drug Directorate, not for the Commissioner of Patents.

I will read Section 4 of the Patent Act, if you wish:

The Commissioner shall receive all applications, fees, papers, documents and models for patents, shall perform and do all acts and things requisite for the granting and issuing of patents... and shall have, for the purposes of this Act,

[Interprétation]

gues. Le Commissaire des brevets a déjà ce pouvoir en application de la Loi, sous sa forme actuelle. Il peut obtenir des conseils d'experts indépendants, de partout où c'est possible.

M. Howe: Si c'était déjà prévu, pourquoi est-ce que cela figure au rapport?

M. Basford: Je ne le sais pas. Je n'ai pas participé au rapport.

Il est clair cependant, d'après la Loi sur les brevets, que le Commissaire—qui est présent et peut vous en parler—peut obtenir tous les conseils extérieurs qu'il désire. Je vais demander au docteur Chapman de compléter ma réponse.

M. Chapman: Monsieur le président, il me semble que cette recommandation se rapporte à l'octroi des licences obligatoires aux fabricants étrangers:

«...et à cette fin, le Comité recommande que les règlements de la Loi sur les brevets soient amendés de façon à permettre au Commissaire de rechercher et recevoir les conseils d'experts du dehors en vue du règlement de cette question.»

M. Howe: Monsieur le président, il me semble que le règlement de la Loi, sur les brevets devrait être modifié aux fins de sécurité et pour s'assurer que les locaux sont examinés, qu'ils sont propres et soignés, et conviennent à la fabrication des produits.

M. Basford: Il est possible que la difficulté vienne d'une considération du Comité Harley que nous n'avons pas totalement acceptée.

J'ai suggéré, à la fois devant la Chambre et dans ma déclaration d'ouverture au Comité, que les règlements relatifs aux brevets et à leur délivrance ainsi qu'aux licences obligatoires représentaient une question bien particulière, sous la juridiction du Commissaire. La seconde question, d'une piètre importance, c'est celle de la sécurité, et elle concerne la Direction des aliments et drogues, et non le Commissaire des brevets.

Je vais vous lire si vous le permettez la Section 4 de la Loi sur les brevets:

«203-4. (2) Le commissaire doit recevoir les demandes, taxes pièces écrites, documents et modèles pour brevets, faire et exécuter tous les actes et choses nécessaires pour la concession et la délivrance des brevets d'invention...et, pour l'application de la présente Loi,...

[Text]

...which will, of course, be this Act as amended...

...all the powers that are or may be given by the *Inquiries Act* to a commissioner appointed under Part II thereof.

And I think you are familiar with the powers under the *Inquiries Act*. Therefore, in the fulfilling of his duties in granting compulsory licences the Commissioner has all the power he needs under the existing Act.

Mr. Howe: In other words, it was not necessary to write this into the report.

Mr. Basford: No.

Mr. Howe: They spent a great deal of time on it and had a lot of advice from a great many people before that report was prepared.

That was the trouble with Bill No. C-190. We did not feel that these things suggested by the Harley Commission were written in properly and I just want to be sure that it is completely covered by this new Bill.

Mr. Basford: In our view, the Commissioner has all the power he needs under the existing Patent Act.

We did make changes from C-190 relative to the powers of the Food and Drug Directorate, and we are amending the Food and Drug Act and the powers to make regulations so that, the Food and Drug Directorate will have all the powers required to ensure safety. This is why Bill C-102 is a little different from Bill C-190. This is where it is different, in that the powers of the Food and Drug Act are increased so that there can be no possible doubt in the legislation and in the regulations that the Food and Drug Directorate has all the powers it needs to deal with the question of safety.

The Chairman: Shall Clause 5 carry?

Mr. Watson: Mr. Chairman, you indicated that I would have a chance to ask the question which I tried to ask previously. I direct it to Dr. Henry.

The Chairman: Are you on Clause 5?

Mr. Watson: I understand that the Harley Committee had established the net profit of the Canadian drug industry to be in the vicinity of \$15 million. Did they do this, Dr. Henry? I have a further question based on that figure.

[Interpretation]

il s'agit, évidemment, de la loi telle qu'amendée,

«est investi de tous les pouvoirs que la Loi sur les enquêtes confère ou peut conférer à un commissaire nommé en vertu de la Partie II de ladite loi.»

Et je pense que vous connaissez bien les pouvoirs prévus par la Loi sur les Enquêtes. C'est pourquoi, dans l'accomplissement de ses fonctions pour ce qui est de l'octroi des licences obligatoires, le Commissaire est doté de tous les pouvoirs nécessaires en vertu de la Loi existante.

M. Howe: En d'autres termes, il n'était pas nécessaire de l'inclure dans le rapport.

M. Basford: Non.

M. Howe: On a passé beaucoup de temps là-dessus, en prenant de multiples conseils, ayant que ce rapport ne fût prêt. Voilà ce qui n'a pas marché avec le Bill C-190. Nous avions l'impression que toutes les suggestions de la Commission Harley n'y avaient pas été suffisamment explicitées, et je voudrais être sûr que le nouveau projet de loi traite de tous ces aspects-là.

M. Basford: A notre avis, le Commissaire a tous les pouvoirs dont il a besoin de par la Loi existante. Nous avons apporté certains changements au Bill C-190, notamment au sujet des pouvoirs de la Direction des aliments et drogues, et nous modifions sa capacité d'édicter des règlements pour nous assurer qu'elle a tous les pouvoirs nécessaires dans le domaine de la sécurité. C'est pourquoi le Bill C-102 est quelque peu différent du Bill C-190. Les pouvoirs de la Loi des aliments et drogues sont accrus; par conséquent, il n'y a plus aucun doute que la Direction des aliments et drogues possède tous les pouvoirs nécessaires dans ce domaine.

Le président: L'article 5 est-il adopté?

M. Watson: Monsieur le président, j'aimerais avoir l'occasion de poser la question que j'essayais de poser tout à l'heure au docteur Henry...

Le président: S'agit-il de l'article 5?

M. Watson: J'avais compris que la Commission Harley, avait évalué les bénéfices nets de l'industrie canadienne des produits pharmaceutiques à environ \$15 millions. Est-ce exact, Dr Henry? J'aurais éventuellement une autre question là-dessus.

[Texte]

Dr. Henry: Mr. Chairman, I am not sure that they actually came up with that figure, but they have a table on page 72 of the report which indicates the rate of return on sales. That rate is in the vicinity of 10 per cent. That is a rough figure—it is 11.13 per cent—but at 10 per cent and on the basis of total sales at the manufacturing level it would be about \$20 million.

Mr. Watson: Based on that, then, if we take the optimistic view, Mr. Chairman, that Bill C-102 will reduce drug prices to the consumer by 20 per cent—and neither the Minister nor the Department has stated any figure, or even gone as far as 10 per cent—optimistically, 20 per cent would result in a saving of \$4 million to the Canadian consumer.

I have pointed out a direct loss to Canada of some \$3 million which was directly attributable to this, and also an indirect loss of at least \$40 million. I am merely pointing out to the Committee that the economic consequences of this Bill are serious in comparison to the economic advantages, and that the Committee should have gone into this more fully.

• 1210

Mr. Basford: That is not quite the way we put it, Mr. Watson. We said that the purpose of this Bill is to increase competition within the manufacturing of drugs, and on your concern about the effect on the industry we would say, as I said at the opening, that within the large promotional allowances that exist in the drug industry and the somewhat higher profits than exist in most manufacturing industries there is sufficient cushion within the industry to absorb the increased competition that we hope will result from this Bill.

Mr. Ritchie: Mr. Chairman, through you I would like to ask Dr. Chapman what is the estimated cost for this year of the increased safety measures that his department will take as a result of the passing of this Bill?

Dr. Chapman: Mr. Chairman, it is impossible for me at the moment to give you a precise figure. However, I can indicate to you the additional resources that were assigned to us for the next fiscal year. These were assigned in October of 1968. Increased capability for drug submission review, \$62,000 and 3 man-years; increased drug surveillance, \$200,000 and 22 man-years; increased contract research \$68,000. This provides a total of \$330,000 and 28 man-years.

This is in addition to a significant increase that was provided in the basic budget for at

[Interprétation]

M. Henry: Monsieur le président, je ne suis pas sûr que ce soit bien le chiffre qu'on a présenté, mais à la page 72 du rapport, on trouve un tableau qui indique le taux des recettes. Cela correspond à 10 p. 100 ou 11.1 environ. A 10 pour cent, et en le basant sur l'ensemble des ventes au niveau de la production, cela représente quelque \$20 millions.

M. Watson: D'après ce chiffre, et si nous adoptons le point de vue optimiste selon lequel le Bill C-102 réduira les prix des produits pharmaceutiques au niveau du consommateur de 20 p. 100—bien que ni le ministre ni le ministère n'aient cité aucun chiffre, pas même 10 p. 100—on épargnerait donc au consommateur canadien \$4 millions. J'ai montré qu'il y aurait un manque à gagner au Canada de quelque \$3 millions, directement attribuable à ce qui précède, et perte indirecte d'au moins \$40 millions. Je signale simplement au Comité que les conséquences économiques du Bill sont sérieuses, comparativement aux avantages économiques, et je crois que le Comité devrait approfondir cette question plus avant...

M. Basford: Ce n'est pas tout, monsieur Watson. Nous avons dit que l'objet du bill est d'accroître la concurrence, et quant aux inquiétudes que vous avez au sujet des répercussions sur l'industrie, j'ai dit au début que les fortes dépenses à des fins de réclame dans l'industrie pharmaceutique et les bénéfices plus élevés que dans la plupart des autres industries, laissent une marge suffisante pour absorber la concurrence plus forte qui pourra résulter du projet de loi.

M. Ritchie: J'aimerais demander à M. Chapman quel serait pour cette année, le coût approximatif des mesures de sécurité accrues que son ministère adoptera après l'adoption du bill?

M. Chapman: Monsieur le président, il m'est impossible de vous citer un chiffre exact. Cependant, je pourrais vous signaler les ressources additionnelles qui nous ont été affectées pour la prochaine année financière, en octobre notamment, \$62,000 et 6 années-hommes pour la révision des produits pharmaceutiques; \$200,000; et 22 années-hommes, pour une meilleure surveillance des médicaments; recherches accrues pour les contrats: \$68,000; soit un total de plus de \$330,000 et 28 années-hommes.

Cela s'ajoute à une augmentation considérable du budget de base pour maintenir et peut-

[Text]

least maintaining, and we believe improving, the surveillance of drugs on the Canadian market.

Mr. Ritchie: Would you have any rough estimate of what portion of the money is expended in drug safety in your department?

Dr. Chapman: Mr. Chairman, the total proposed budget for the next fiscal year is \$11,982,500. Between 40 to 50 per cent of that total is devoted to all aspects of the safety and quality of drugs on the Canadian market.

Clause 5 agreed to.

Title agreed to.

The Chairman: Shall I report the Bill?

Some hon. Members: Agreed.

The Chairman: Ladies and gentlemen, I wish to thank the Minister, the officials of the various departments, Mr. Ollivier and all the members who participated. Even if you were very, very lenient towards your Chairman you have to agree that the Chair also has been very lenient with you.

Mr. Basford: Mr. Chairman, may I on my own behalf and that of the officials of both my department and the Department of National Health and Welfare, thank the Committee for its consideration of the Bill. Mr. Watson mentioned this morning some evidence of Mr. Henry's given on February 7, 1967. It is now two years and one week since that evidence was given and I do appreciate the Committee's dealing with the Bill but there is still a long way to go before this is the law of Canada and of the benefit to the consumers we hope that it will be, so I hope I will have your co-operation and support in the House and any other place.

The Chairman: The meeting is adjourned until 3.30 this afternoon in Room 371—on tobacco and cigarettes.

[Interpretation]

être améliorer la surveillance des médicaments sur le marché canadien.

M. Ritchie: Savez-vous à peu près quelles sommes sont dépensées pour assurer la sécurité des médicaments au sein de votre ministère?

M. Chapman: Le budget total proposé pour la prochaine année fiscale est de \$11,982,500. Entre 40 et 50 p. 100 de ce montant sont consacrés à tous les aspects de la sécurité et de la qualité des médicaments sur le marché canadien.

(L'article 5 est adopté).

(Le titre est adopté).

Le président: Dois-je faire rapport du Bill?

Des voix: Oui.

Le président: Mesdames et messieurs, je tiens à remercier le ministre et les fonctionnaires des divers ministères, de même que M. Ollivier et tous les députés qui ont participé à notre séance. Même si vous avez été très indulgents à l'égard du président, vous devez reconnaître que le président a fait preuve d'indulgence à votre égard.

M. Basford: Monsieur le président, je tiens, en mon nom et au nom de mes collègues de mon ministère et du ministère de la Santé nationale et du Bien-être social, à remercier le Comité d'avoir étudié le Bill. M. Watson a mentionné les témoignages de M. Henry du 1^{er} février 1967; il y a maintenant plus d'un an que ces témoignages ont été présentés. Nous avons fort apprécié votre travail, mais nous savons qu'il reste encore beaucoup à faire avant que le bill ne devienne loi et vienne en aide au consommateur. Nous espérons donc avoir votre appui à la Chambre et ailleurs.

Le président: La séance est levée jusqu'à 3 h. 30 cet après-midi, salle 371 alors que nous continuerons notre étude sur la publicité du tabac et de la cigarette.

HOUSE OF COMMONS

CHAMBRE DES COMMUNES

First Session

Première session de la

Twenty-eighth Parliament, 1968-69

vingt-huitième législature, 1968-1969

STANDING COMMITTEE

COMITÉ PERMANENT

ON

DE LA

HEALTH, WELFARE AND
SOCIAL AFFAIRSSANTÉ, DU BIEN-ÊTRE SOCIAL
ET DES AFFAIRES SOCIALES

Chairman

M. Gaston Isabelle

Président

MINUTES OF PROCEEDINGS
AND EVIDENCEPROCÈS-VERBAUX ET
TÉMOIGNAGES

TUESDAY, FEBRUARY 18, 1969

LE MARDI 18 FÉVRIER 1969

Respecting the subject-matter of

Concernant la question de fond des

Bill C-39, An Act to amend the Broadcast-
ing Act (cigarette advertising).Bill C-39, Loi modifiant la Loi sur la radio-
diffusion (Annonces de cigarettes).Bill C-45, An Act to restrain the use of
Tobacco.Bill C-45, Loi visant à restreindre l'usage
du tabac.Bill C-53, An Act to amend the Food and
Drugs Act.Bill C-53, Loi modifiant la Loi des aliments
et drogues.Bill C-134, An Act to amend the Tobacco
Restraint Act.Bill C-134, Loi modifiant la Loi sur la ré-
pression de l'usage du tabac chez les ado-
lescents.Bill C-137, An Act to amend the Broad-
casting Act (Prohibition of cigarette
advertising).Bill C-137, Loi modifiant la Loi sur la radio-
diffusion (Interdiction de réclames de ci-
garettes).Bill C-147, An Act to control the tar con-
tent and nicotine level of cigarettes.Bill C-147, Loi ayant pour objet de contrôler
la teneur en goudron et en nicotine des
cigarettes.INCLUDING FOURTH REPORT
ON BILL C-102Y COMPRIS LE QUATRIÈME RAP-
PORT SUR LE BILL C-102

WITNESSES—TÉMOINS

(See Minutes of Proceedings)

(Voir Procès-verbaux)

The Queen's Printer, Ottawa, 1969
L'Imprimeur de la Reine, Ottawa, 1969

STANDING COMMITTEE ON
HEALTH, WELFARE AND
SOCIAL AFFAIRS

COMITÉ PERMANENT DE
LA SANTÉ, DU BIEN-ÊTRE SOCIAL
ET DES AFFAIRES SOCIALES

Chairman
Vice-Chairman

M. Gaston Isabelle
Mr. Steve Otto

Président
Vice-président

and Messrs.
et Messieurs

Crossman,
Forget,
Fortin,
Foster,
Godin,
Guilbault,

Howe,
Mrs. MacInnis (M^{me}),
McBride,
Monteith,
Ritchie,
Robinson,

Rochon,
Rynard,
Saltsman,
Thomas (*Maisonneuve*),
Whicher,
Yewchuk,—20.

(Quorum 11)

La secrétaire du Comité:

Gabrielle Savard

Clerk of the Committee.

Note: Issue No. 16 deals with Bill C-102

Note: Le fascicule n° 16 concerne le bill
C-102.

REPORT TO THE HOUSE

FRIDAY, February 21, 1969

The Standing Committee on Health, Welfare and Social Affairs has the honour to present its

FOURTH REPORT

Pursuant to its Order of Reference of Tuesday, January 21, 1969, your Committee has considered Bill C-102, An Act to amend the Patent Act, the Trade Marks Act and the Food and Drugs Act, and has agreed to report it without amendment.

A copy of the Minutes of Proceedings and Evidence relating to this Bill (*Issues Nos. 11, 12, 13, 14 and 16*) is tabled.

Respectfully submitted.

RAPPORT À LA CHAMBRE

Le VENDREDI 21 février 1969

Le Comité permanent de la santé, du bien-être social et des affaires sociales a l'honneur de présenter son

QUATRIÈME RAPPORT

Conformément à l'ordre de renvoi du mardi 21 janvier 1969, le Comité a étudié le Bill C-102, Loi modifiant la Loi sur les brevets, la Loi sur les marques de commerce et la Loi des aliments et drogues, et est convenu d'en faire rapport sans modification.

Un exemplaire des procès-verbaux et témoignages relatifs à ce bill (*fascicules n° 11, 12, 13, 14 et 16*) est déposé.

Respectueusement soumis,

Le président,
GASTON ISABELLE,
Chairman.

(Text)

MINUTES OF PROCEEDINGS

TUESDAY, February 18, 1969
(20)

The Standing Committee on Health and Welfare and Social Affairs met this day at 3:40 o'clock p.m. The Chairman, Mr. Gaston Isabelle, presided.

Members present: Mrs. MacInnis, Messrs. Crossman, Forget, Foster, Guilbault, Howe, Isabelle, McBride, Monteith, Otto, Robinson, Rochon, Thomas (*Maisonneuve*), Yewchuk (14).

Other Member present: Mr. Mather.

Witnesses: From the Department of National Health and Welfare: Dr. G. H. Josie, Assistant Director General of the Health Services Branch; Dr. H. N. Colburn, Consultant on Smoking and Health, Health Services Branch.

The Chairman read into the record the letter received from the President of the Ontario Division of the Canadian Cancer Society.

Agreed,—That the Ideas on the smoking problem of Mr. Duane H. Forsyth, of Welling, Alberta, be printed as an appendix to this day's proceedings. (*See Appendix D*)

Also agreed,—That the letter received from the Minister of Trade and Commerce be printed as an appendix to this day's proceedings. (*See Appendix E*)

On motion of Mr. Otto,

Resolved,—That reasonable travelling, living expenses and a "per diem" allowance of \$50.00 be paid to Dr. G. W. O. Moss, M.D., D.P.H., Deputy Medical Officer of Health, Department of Public Health, Toronto, who will appear before the Committee on Thursday, February 20, 1969.

(Texte)

PROCÈS-VERBAL

Le MARDI 18 février 1969
(20)

Le Comité permanent de la Santé, du Bien-être social et des Affaires sociales se réunit aujourd'hui à 3 h. 40 de l'après-midi, sous la présidence de M. Gaston Isabelle.

Présents: M^{me} MacInnis, MM. Crossman, Forget, Foster, Guilbault, Howe, Isabelle, McBride, Monteith, Otto, Robinson, Rochon, Thomas (*Maisonneuve*), Yewchuk (14).

Autre député présent: M. Mather.

Témoins: Du ministère de la Santé nationale et du Bien-être social: D^r G. H. Josie, directeur général adjoint des services d'hygiène; et le D^r H. N. Colburn, Conseiller, Programme du tabac et de la santé.

Le Président lit la lettre du Président de la division ontarienne de la Société canadienne du Cancer.

Il est décidé,—Que les suggestions de M. Duane H. Forsyth, de Welling, Alberta, relatifs au problème de la cigarette et du tabac, soient imprimées en appendice au compte rendu d'aujourd'hui. (*Voir l'appendice D*)

Il est aussi décidé,—Que la lettre reçue du Ministre du Commerce soit imprimée en appendice au compte rendu d'aujourd'hui. (*Voir l'appendice E*)

Sur la proposition de M. Otto,

Il est résolu,—Que les frais raisonnables de subsistance et de déplacement ainsi qu'une indemnité quotidienne de \$50.00 soient versés au D^r G. W. O. Moss, M.D., D.P.H., directeur médical adjoint du Service de Santé de la ville de Toronto qui comparaitra devant le Comité le jeudi 20 février 1969.

On motion of Mrs. MacInnis,

Resolved,—That reasonable travelling, living expenses and a "per diem" allowance of \$50.00 be paid to Dr. D. W. Thompson, M.D., Department of Pathology, Toronto General Hospital, who will appear before the Committee on Tuesday, February 25, 1969.

The Chairman introduced the officials of the Department of National Health and Welfare.

Dr. Josie read a prepared statement.

Agreed,—That the illustrative material, copies of which were distributed to the Members, be printed as an appendix to this day's proceedings. (*See Appendix F*)

Dr. Josie and Dr. Colburn were questioned.

At 5:20 p.m., the Vice-Chairman took the Chair.

Dr. Josie and Dr. Colburn were further questioned.

At 5:40 p.m., the Committee adjourned to 3:30 p.m. Thursday, February 20.

Sur la proposition de M^{me} MacInnis,

Il est résolu,—Que les frais raisonnables de subsistance et de déplacement ainsi qu'une indemnité quotidienne de \$50.00 soient versés au D^r D. W. Thompson, département de la Pathologie de l'hôpital *Toronto General*, qui comparaitra devant le Comité le mardi 25 février 1969.

Le président présente les hauts fonctionnaires du Ministère de la Santé nationale et du Bien-être social.

Le D^r Josie lit un exposé.

Il est décidé,—Que les illustrations fournies par le Ministère de la Santé nationale et du Bien-être social et dont des exemplaires ont été distribués aux membres du Comité, soient imprimées en appendice au compte rendu d'aujourd'hui. (*Voir l'appendice F*)

Le D^r Josie et le D^r Colburn sont interrogés.

A 5 h. 20 de l'après-midi, le vice-président prend le fauteuil.

Le D^r Josie et le D^r Colburn sont de nouveau interrogés.

A 5 h. 40 de l'après-midi, le vice-président ajourne le Comité à 3 h. 30 de l'après-midi, le jeudi 20 février.

La secrétaire du Comité,
Gabrielle Savard,
Clerk of the Committee.

[Text]

EVIDENCE

(Recorded by Electronic Apparatus)

Tuesday, February 18, 1969

• 1539

The Chairman: Ladies and gentlemen, I now see a quorum. We are now resuming consideration of the subject matter of bills relating to cigarette smoking.

First, I would like to put on the record a letter received from the president of the Ontario Division of the Canadian Cancer Society, Mr. Frank F. McEachren.

I have also a letter from Mr. Duane H. Forsyth of Welling, Alberta setting out his ideas on the smoking problem; this letter has been read here before. If the Committee agrees, I would like to have them printed as an appendix to this day's proceedings. Is that agreed?

Some hon. Members: Agreed.

The Chairman: We have also received a reply from the Minister of Trade and Commerce. Is it agreed that this letter be also printed as an appendix to today's proceedings.

Some hon. Members: Agreed.

The Chairman: I would like a motion for the payment of expenses and a per diem allowance to Dr. Moss of Toronto, who is appearing on behalf of the Smoking Withdrawal Study Centre, and Dr. D. W. Thompson, Pathologist at the Toronto General Hospital, who will appear on the 20th and the 25th of this month.

Mr. Otto: I move that Dr. G. W. O. Moss, M.D., D.P.H., Deputy Medical Officer of Health, Department of Public Health, Toronto, be paid a per diem allowance of \$50.00 in accordance with the scale thereof approved by Mr. Speaker, and that reasonable living and actual travelling expenses be paid to Dr. Moss.

Motion agreed to.

Mr. Mather: I move that Dr. D. W. Thompson, M.D., Department of Pathology, Toronto General Hospital, be paid a per diem allowance of \$50.00 in accordance with the scale thereof approved by Mr. Speaker, and that reasonable living and actual travelling expenses be paid to Dr. Thompson.

Motion agreed to.

[Interpretation]

TÉMOIGNAGES

(Enregistrement électronique)

Le mardi 18 février 1969.

Le président: Mesdames et messieurs, nous sommes maintenant en nombre. Nous allons étudier maintenant la question se rapportant à l'usage du tabac.

Tout d'abord, je voudrais inclure au compte rendu la lettre que nous avons reçue du président de la division ontarienne, de la Société du cancer canadienne, M. Frank F. McEachren.

J'ai également une lettre de M. Duane H. Forsyth de Welling (Alberta), cette lettre a déjà été lue, si le comité est d'accord, je voudrais que ces lettres figurent en appendice à l'ordre du jour.

Des voix: D'accord.

Le président: Nous avons également reçu une réponse du ministère de l'Industrie et du Commerce. Êtes-vous d'accord pour que cette lettre soit imprimée en appendice de nos comptes rendus?

Des voix: D'accord.

Le président: Je voudrais une motion pour le remboursement des frais du docteur Moss de Toronto qui représente le «Smoking Withdrawal Study Centre» et du docteur D. W. Thompson pathologiste à l'Hôpital général de Toronto, qui viendra les 20 et 25 de ce mois.

M. Otto: Je propose que le docteur G. W. O. Moss, M.D., D.P.H., du ministère de la Santé publique de Toronto reçoive une allocation de \$50 par jour conformément à l'échelle approuvée par monsieur l'Orateur, et que l'on lui rembourse ses frais de voyage et de subsistance.

Motion acceptée.

M. Mather: Je propose que le docteur D. W. Thompson, M.D., service de pathologie à l'hôpital général de Toronto, reçoive une allocation de \$50 par jour conformément à l'échelle approuvée par l'Orateur et que l'on lui rembourse ses frais de voyage et de subsistance.

Motion acceptée.

[Text]

The Chairman: We have with us today the officials of the Department of National Health and Welfare, Dr. G. H. Josie, to my right, Assistant Director General of the Health Services Branch, and also Dr. H. N. Colburn, consultant on Smoking and Health, Health Services Branch, who will give us some statistics asked for by members of the Committee.

Dr. G. H. Josie (Assistant Director General of the Health Services Branch, Department of National Health and Welfare): Mr. Chairman, Mrs. MacInnis, gentlemen. In preparing for

• 1545

this meeting we had in mind the reference in your Proceedings to "a session on the statistics of smoking" and to the "doubting Thomases". However, you may recall that on June 17, 1963 the then Minister of National Health and Welfare, in a statement to the House of Commons said "I have been impressed with the evidence which has been presented to me in numerous reports concerning the increasing lung cancer death rate in Canada and the serious health problem that is posed by this disease", and further, that "Health agencies have a duty to inform the public about the risk to health connected with cigarette smoking".

It seems appropriate therefore to review with you the kinds of scientific evidence on which are based our convictions and our programs. I would propose if this is agreeable, Mr. Chairman, to indicate briefly the epidemiological and statistical methods used to obtain, analyze and interpret the relevant data and to show their contribution with other scientific evidence to our present appreciation of the health hazard from the cigarette smoking habit. We will use illustrations or examples from information you have already received from the Department. I think they have been distributed to you. Dr. Colburn and I will, of course, try to deal with any questions that arise either now or subsequently.

The increasing lung cancer death rate in Canada, referred to by Miss LaMarsh, was pointed out specifically by Dr. A. J. Phillips of the National Cancer Institute in a paper in the Canadian Medical Association Journal in September, 1954. He noted then that during the period 1931 to 1952 the lung cancer death rates had increased for both males and females and the proportion of all cancer deaths

[Interpretation]

Le président: Nous avons aujourd'hui avec nous, les représentants du ministère de la Santé nationale et du Bien-être social, le docteur G. H. Josie à ma droite, Directeur général adjoint aux services de santé ainsi que le docteur H. N. Colburn, conseiller sur le tabac et la santé, aux Services de santé, qui nous donneront quelques statistiques qui ont été demandées par des membres du Comité.

Dr G. H. Josie (Directeur général adjoint aux Services de santé, Ministère de la Santé nationale et du Bien-être social): Monsieur le président, madame MacInnis, messieurs:

En nous préparant pour la présente réunion, nous avons tenu compte de la mention dans vos Procès-verbaux d'une «séance sur la statistique de l'usage du tabac» et des «Saint-Thomas». Cependant, vous vous souvenez peut-être que, le 17 juin 1963, le ministre de la Santé nationale et du Bien-être social de l'époque a déclaré en Chambre: «J'ai été impressionné par les preuves qui m'ont été fournies dans un grand nombre de rapports sur l'augmentation du taux de mortalité causée par le cancer du poumon au Canada, et par le grave problème que présente cette maladie»; il a poursuivi: «les organismes de santé... ont le devoir d'informer le public au sujet des risques que représente l'usage de la cigarette».

Il semble donc préférable d'étudier avec vous les diverses preuves scientifiques sur lesquelles sont fondés nos opinions et nos programmes. Si cela convient à M. le président, je propose de mentionner brièvement les méthodes épidémiologiques et statistiques employées pour obtenir, analyser et interpréter les données pertinentes, et de démontrer la façon dont elles ont contribué, avec certaines autres preuves, à notre évaluation actuelle du danger que présente pour la santé l'usage de la cigarette. Nous allons utiliser des illustrations et des exemples tirés de renseignements qui vous ont déjà été fournis par le ministère. Je pense qu'ils vous ont déjà été distribués. (Il est évident que le Dr Colburn, conseiller médical chargé du programme «Le tabac et la santé», et moi-même tâcherons de répondre à toutes les questions, au fur et à mesure qu'elles seront posées ou plus tard).

L'accroissement du taux de mortalité causée par le cancer du poumon au Canada, mentionné par M^{lle} LaMarsh, a été souligné en particulier par le Dr A. J. Phillips de l'Institut national du cancer, dans un article publié dans le numéro de septembre 1954 du *Canadian Medical Association Journal*. Le Dr Phillips faisait remarquer qu'entre 1931 et 1952 le taux de mortalité due au cancer du

[Texte]

attributable to lung cancer had also increased substantially.

These trends have continued. The number of lung cancer deaths more than tripled for both males and females in the 18 year period 1950 to 1967. The rates per 100,000 population have more than doubled—showing that population increase is not the major factor. Nor is population aging responsible since an age adjusted death rate also shows a more than two-fold increase.

Given that lung cancer as a cause of death is a public health problem of increasing importance, the question for health agencies is what can be done to prevent the occurrence of lung cancer. The concurrent increase in cigarette consumption and lung cancer was suggestive but studies over a period of thirty years have indicated more directly an association of lung cancer with smoking. In the comprehensive Report of the U.S. Advisory Committee to the Surgeon General, 1964 (pp. 150-161) some 29 "retrospective" studies were reviewed.

In studies of this kind a group of patients with lung cancer is compared with another group without the disease considered as controls, to determine the relative frequency of a particular attribute such as a smoking history among the cases and the controls. A variety of techniques was used in these 29 studies. In most of them the lung cancer cases were hospital or clinic patients, in others autopsy records were used; the controls generally consisted of normal or healthy men or patients with, or death from, other diseases including other types of cancer. Various attributes other than tobacco use were considered.

These 29 comprehensive retrospective studies were carried out in nine countries: Germany, United States, Netherlands, Britain, France, Finland, Australia, Japan, Switzerland, and were reported over the years 1939-

[Interprétation]

poumon avait augmenté à la fois chez les hommes et chez les femmes, et que la proportion de tous les décès dus au cancer et imputables au cancer du poumon avait également augmenté considérablement.

Ces tendances se sont maintenues. Le nombre de décès par cancer du poumon chez les hommes et les femmes a plus que triplé durant une période de 18 années, soit de 1950 à 1967. Les taux par 100,000 habitants ont plus que doublé, démontrant que l'accroissement démographique n'est pas le principal facteur. Le vieillissement de la population n'est également pas en cause, car un taux de mortalité tenant compte de l'âge démontre une augmentation de plus du double.

Étant donné que le cancer du poumon comme cause de mortalité constitue un problème de santé publique de plus en plus grave, les organismes de santé se doivent de s'interroger sur la prévention du cancer du poumon. L'augmentation simultanée de la consommation de cigarettes et du cancer du poumon était suggestive, mais des études effectuées pendant trente années ont indiqué plus nettement une relation entre le cancer du poumon et l'usage du tabac. Dans le rapport complet du U.S. Advisory Committee to the Surgeon General, 1964 (pages 150 à 161) quelques 29 études rétrospectives sont examinées.

Dans les études rétrospectives, un groupe de patients atteints du cancer du poumon est comparé à un autre groupe témoin dont les membres ne sont pas atteints de cette maladie, afin de déterminer la fréquence relative d'un attribut particulier, soit par exemple l'usage du tabac, parmi les malades et les témoins. Plusieurs techniques ont été employées au cours de ces 29 études. Dans la plupart des études, les cas de cancer du poumon étaient des patients d'hôpitaux ou de cliniques; dans d'autres cas, des dossiers d'autopsies ont été utilisés. Les témoins étaient généralement représentés par des personnes normales ou en bonne santé, ou par des patients atteints ou morts d'autres maladies, y compris certains autres genres de cancer. Plusieurs attributs autres que l'usage du tabac ont été pris en ligne de compte.

Ces 29 études ont été menées dans neuf pays, soit l'Allemagne, les États-Unis, les Pays-Bas, la Grande-Bretagne, la France, la Finlande, l'Australie, le Japon et la Suisse, et ont couvert la période 1939-1963. Toutes ces

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1963. All of these studies showed that there were proportionately more smokers and more heavy smokers among lung cancer patients than among members of control groups. The consistency of this evidence is impressive.

études ont démontré qu'on trouve un plus grand nombre de fumeurs et de grands fumeurs au nombre des patients atteints du cancer du poumon que parmi les membres de groupes témoins. L'uniformité de cette preuve

[Text]

These have been tabulated, Mr. Chairman; we can go into detail if you wish, but I think it is probably unnecessary at this stage.

Another epidemiological method is the *prospective* study. In this type of study an identified group is followed over time to determine the subsequent death rate in group members with and without a particular attribute of characteristic. The prospective or forward study has been described as "a primary sampling of exposed and not exposed"—to cigarette smoking; in contrast to the retrospective study of "affected and not affected"—by lung cancer. Prospective studies permit estimates of the risk to be made. Bias in data collection is generally less likely to occur than in retrospective studies. On the other hand, they are long-term and expensive. The Canadian Study was of this prospective type.

The Canadian Study will be discussed here for illustrative purposes. More definitive results are available from the array of many studies, including our own. The Canadian Study has been described in various reports (1961, 1964, 1968). Briefly, it involved sending over 200,000 questionnaires to Canadian veteran pension recipients during the period September 1955 through June 1956. Returns from 78,000 men and 14,000 women, mostly widows, were analysed. For each respondent dying between July 1, 1956 and June 30, 1962 the cause of death was related to questionnaire information about age and smoking habits and some other characteristics. Among the respondents during the six years of follow-up, there were 11,285 deaths. The over-all response among persons actually receiving the questionnaire was 57 per cent.

A valuable feature of the prospective study is that analysis is not confined to a single cause. All causes occurring may be considered in total or separately. We can, therefore, look first at the Canadian study with respect to total of all causes of mortality of males. The basic fact to be observed is the difference in death rate between smokers and non-smokers. This is evident in the graph which I reproduced for convenience from the reference book that was given to the Committee earlier, Mr. Chairman.

The Chairman: Is it agreed that the graph presented to us be printed as an appendix to our Proceedings?

Some hon. Members: Agreed.

[Interpretation]

est impressionnante. Je peux vous donner des chiffres, si vous le voulez, monsieur le président, mais je ne sais pas si c'est vraiment indispensable maintenant.

L'étude de perspective est une autre méthode épidémiologique. Pour ce genre d'étude, un groupe est suivi durant une période de temps afin d'établir le taux de mortalité ultérieur des membres du groupe avec et sans caractéristique ou attribut particulier. L'étude de perspective a été décrite comme un « premier échantillonnage d'exposés et de non exposés » à l'usage de la cigarette, par contraste avec l'étude rétrospective des « touchés et des non touchés » par le cancer du poumon. L'étude de perspective permet d'évaluer le risque. Les données recueillies ont généralement moins de chances d'être influencées que dans le cas des études rétrospectives. Par contre, elles sont menées à longue échéance et sont coûteuses. L'étude canadienne était une étude de perspective.

Aux fins d'illustration, la discussion portera sur l'étude canadienne. Un plus grand nombre de résultats définitifs peuvent être obtenus d'une vaste gamme d'études, y compris les nôtres. L'étude canadienne a été décrite dans divers rapports (1961, 1964, 1968). En résumé, elle comportait l'envoi de 200,000 questionnaires à des anciens combattants canadiens pensionnés, entre septembre 1955 et juin 1956. Les réponses de 78,000 hommes et de 14,000 femmes, veuves pour la plupart, ont été analysées. Dans le cas de chaque répondant mort entre le 1^{er} juillet 1956 et le 30 juin 1962, la cause du décès a été rattachée aux renseignements fournis dans le questionnaire en ce qui a trait à l'âge et à l'habitude de la cigarette. Au cours des six années d'étude, on a compté 11,285 décès parmi les répondants. Le pourcentage global des réponses aux questionnaires envoyés s'est élevé à 57 p. 100.

Une caractéristique intéressante de l'étude prospective est que cette analyse n'a pas été limitée à une seule cause, toutes les causes sont envisagées dans leur ensemble ou séparément. Nous pouvons donc examiner d'abord l'étude canadienne en ce qui concerne le total relatif à toutes les causes de mortalité chez les hommes. La première constatation qui est apparue est la différence des taux de mortalité entre les fumeurs et les non-fumeurs.

C'est l'évidence même dans le graphique dont on a présenté un tiré à part au Comité un peu plus tôt.

Le président: Êtes-vous d'accord pour que le graphique soit imprimé et qu'il figure en annexe au procès-verbal.

Des voix: D'accord.

[Texte]

Dr. Josie: This difference in death rate between smokers of different kinds of habits and non-smokers is evident in the graph and in the table giving the rates on which the graph is based. As you will see, the death rates all increase with age but they are consistently higher for cigarette smokers after about age 50.

In addition to the age specific death rates, which are used to compare the mortality experience of smokers and non-smokers, there are several other measures which effectively summarize the relationship. These, as used in Table 1 of the Final Report, are the excess deaths and the mortality ratio and I would like to describe briefly these two procedures which are, of course, related.

The excess deaths: the number of deaths observed among smokers in excess of the number expected if they had all been non-smokers, and in the table from the report you will see that for cigarette smokers only the excess deaths in our study were 1,452. The expected deaths are computed by applying the age specific death rates of non-smokers to the smoker population.

The mortality ratio, is the ratio of observed to expected deaths and it is also the ratio of death rates, and in this table you have in front of you the ratio is 1.54 for cigarettes only smokers. If the death rates are the same for smokers and non-smokers, the ratio will be 1.0; if the smoker rates are double those of non-smokers the ratio will be 2.0, representing 100 per cent increase.

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Now, there are other procedures or indices that have been used based on differences in mortality rates.

The principal results from this comparison of mortality experience are:

(a) overall or total mortality of male cigarette smokers was substantially higher than for non-smokers; 54 per cent higher death rate for those smoking cigarettes only;

(b) men smoking combinations of cigarettes and cigars and/or pipe also had elevated death rates but not to the same extent as men smoking only cigarettes; the corresponding increases are 22 per cent, 26 per cent and 13 per cent, compared to 54 per cent.

(c) the death rates of men smoking only pipes or cigars were not appreciably different from those of non-smokers; the percentages being 6 per cent, 5 per cent and a negative difference of 2 per cent in favour, I think, of the cigars plus pipes.

[Interprétation]

M. Josie: Cette différence de taux de mortalité entre les fumeurs et les non-fumeurs est évidente dans le graphique et dans les données sur lesquelles est basé le graphique. Comme vous pouvez le constater les taux de mortalité augmentent avec l'âge, mais ils sont toujours plus élevés pour les fumeurs après l'âge de 50 ans.

Outre les taux spécifiques de décès par âge, utilisés pour comparer la mortalité chez les fumeurs et les non-fumeurs, il existe plusieurs autres mesures qui résument réellement le rapport. Ces mesures, utilisées dans le tableau 1 du Rapport final, sont les suivantes:

a) *Les décès excédentaires*—nombre de décès observés chez les fumeurs, dépassant le nombre prévu si tous avaient été des non-fumeurs. (Rien que dans le cas des fumeurs de cigarettes, les décès excédentaires se sont élevés à 1,452). Les décès prévus sont calculés en appliquant les taux de décès précis d'après les âges des non-fumeurs à l'ensemble des fumeurs.

b) *Quotient de la mortalité*—il s'agit du rapport décès constatés-décès prévus ou le rapport des taux de décès, soit par exemple 1.54 pour ceux qui ne fument que la cigarette. Si les taux de décès sont identiques, le rapport est 1.0; si les taux de fumeurs sont les doubles de ceux des non-fumeurs, le rapport est 2.0—soit une augmentation de 100 p. 100.

En outre, le rapport est également exprimé en variantes de la différence des taux de mortalité.

Les principaux résultats de cette comparaison de la mortalité sont les suivants:

a) La mortalité totale chez les fumeurs de cigarette de sexe masculin est considérablement plus élevée que dans le cas des non-fumeurs; taux de décès de 54 p. 100 plus élevé chez ceux qui ne fument que la cigarette;

b) chez les hommes qui fument à la fois la cigarette et le cigare (ou la pipe), on remarque également un taux de décès élevé bien qu'il n'atteigne pas celui des fumeurs de cigarette; augmentations de 22 p. 100, 26 p. 100 et 13 p. 100 comparé à 54 p. 100.

c) les taux de décès chez les hommes qui ne fument que la pipe ou le cigare ne sont pas particulièrement différents de ceux des non-fumeurs; 6 p. 100, 5 p. 100—2 p. 100 de différence.

[Text]

The additional findings from the Canadian study with respect to over-all mortality for men who smoke cigarettes only, are:

(a) death rates increased with the quantities of cigarettes smoked in terms of numbers per day. Those smoking less than 10 showed an increase of about 42 per cent; those with 10 to 20 per day, 55 per cent, and over 20, 63 per cent. That is not actually in the table. It is shown in the summary report that was given to you later but I thought I would not reproduce all of that now. We have it available if you wish.

(b) overall mortality ratios were elevated after five years of smoking, and as indicated more clearly elsewhere, tended to increase with years of smoking, about a 30 per cent increase for 10 years or more, 50 per cent for 30 years or more;

(c) male current cigarette smokers who inhaled had a higher death rate for over-all mortality; about 52 per cent higher than those who did not inhale;

(d) ex-cigarette smokers, men who had stopped smoking cigarettes, had lower death rates than current cigarette smokers but they were still 36 per cent above the non-smoker rate.

These results are all consistent with those of studies elsewhere. The combination of data from extensive studies—and there have been large-scale prospective studies—have permitted more extensive analysis. For instance, it was found that men who began smoking before the age of 20 have a higher death rate than those who began after age 25, and the death rate was higher for those who continued smoking until age 55 than for those who stopped at an earlier age.

But it is when we look at the mortality ratios for particular diseases causing the deaths than the dominant position of lung cancer is clear. Data are given in Table 2 of the Summary Report. The cigarette smokers in the Canadian study had a lung cancer death rate about 14 times higher than the non-smokers. For bronchitis and emphysema the smoker rate is 8 times higher, while the other major diagnostic category, coronary heart disease, had a 60 per cent increase in death rate.

[Interpretation]

En ce qui a trait à la mortalité totale chez les hommes qui ne fument que la cigarette, les données complémentaires obtenues de l'étude canadienne et indiquées dans le Résumé sont les suivantes:

a) les taux de décès augmentent en fonction de la quantité de cigarettes fumées—en nombres par jour; moins de 10—42 p. 100; de 10 à 20—55 p. 100; au-dessus de 20—63 p. 100. Cela ne figure pas dans le tableau, cela apparaît dans le rapport sommaire qui vous a été donné plus tard, mais je ne voulais pas tout reproduire maintenant. Mais le tout est à votre disposition, si vous le désirez.

b) l'ensemble des quotients de mortalité sont élevés après cinq années d'usage du tabac, et, tel qu'indiqué plus clairement ailleurs, ont tendance à augmenter avec les années d'usage du tabac, soit par exemple 30 p. 100 d'augmentation pour 10 années ou davantage, 50 p. 100 pour 30 années ou davantage;

c) les fumeurs actuels de cigarettes de sexe masculin qui avalent la fumée ont un taux de décès plus élevé pour la mortalité d'ensemble; 52 p. 100 plus élevé que ceux qui n'avalent pas la fumée;

d) les anciens fumeurs, les personnes de sexe masculin qui ont cessé de fumer des cigarettes, ont un taux de décès moins élevé que ceux qui fument actuellement la cigarette, mais il se maintient tout de même à 36 p. 100 au-dessus de celui des non-fumeurs.

Ces résultats concordent tous avec ceux qui ont été recueillis dans d'autres études. La fusion des données provenant de sept études en perspective ont permis de procéder à une analyse plus sérieuse. On a remarqué, par exemple, que les hommes qui ont commencé à fumer avant l'âge de 20 ans ont un taux de décès plus élevé que ceux qui ont débuté à l'âge de 25 ans; on a constaté également que le taux de décès est plus élevé chez ceux qui s'arrêtent de fumer après l'âge de 55 ans que chez ceux qui ont cessé à un âge moins avancé.

Ce n'est cependant que lorsqu'on examine les quotients de mortalité due à des maladies particulières que la position importante du cancer du poulmon se précise. (Les données sont fournies sur le tableau 2 du Résumé). Les fumeurs de cigarettes de l'étude canadienne ont un taux de décès dû au cancer du poulmon environ 14 fois plus élevé que celui des non-fumeurs. En ce qui a trait aux bronchites et aux emphysemes, le taux est 8 fois plus élevé chez les fumeurs, tandis que la

[Texte]

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As an example of the confirmation and strengthening of these results from our study from a combination of the seven major prospective studies, we have given one table also reproduced from the Reference Book but from the original source, the Surgeon General's report, and in that you will find that the mortality ratios there are 10.8, 6.1, and 1.7 for lung cancer, bronchitis and emphysema, and coronary heart disease respectively. These seven studies involved over a million men and women in the United States, Britain, and Canada. Those surveyed included British physicians, Canadian and United States veterans, certain occupational groups and general population groups in the United States.

From the standpoint of the contribution of different diseases to the total excess deaths, lung cancer, with 21 per cent of the excess was in second place to coronary heart disease which contributed the largest proportion, 36 per cent. Bronchitis and emphysema is third with about 7 per cent, and you can see other causes in the final table.

These facts and relationships from retrospective and prospective epidemiological and statistical research are representative of the kinds of scientific evidence on which the Department's position and program have been based. They have been used not simply for academic assessment of the smoking-disease relationship, but as the basis for decisions on the recognition of an important health problem and the action required.

The epidemiological evidence based on the kinds of statistics we have discussed was supported, of course, by other scientific evidence from animal experiments and clinical and autopsy studies. Some of these have provided an insight into the mechanisms of the effects of smoking in terms of functional and pathological changes, especially in the trachea, bronchus, and lung. It seems inappropriate and unnecessary to discuss these aspects here. We must point out, however, that such scientific research also involves *statistics as data* and the use of statistical *methods* in the planning, analysis, and interpretation of research results.

We should mention further the continuing production of new and supporting evidence based on epidemiological, experimental, clinical, pathological, and behavioural research.

[Interprétation]

principale catégorie suivante, les maladies coronariennes, reflète une augmentation du taux de décès de 60 p. 100.

A titre d'exemple visant à confirmer et à étayer ces résultats provenant des sept importantes études de perspective, on vous prie de consulter le dernier tableau, qui indique des quotients de mortalité de 10.8, 6.1 et 1.7 pour le cancer du poumon, la bronchite et l'emphyseme, et la maladie coronarienne respectivement. Ces sept études ont englobé plus d'un million de personnes des deux sexes aux États-Unis, en Grande-Bretagne et au Canada. Les personnes impliquées étaient des médecins de Grande-Bretagne, des anciens combattants du Canada et des États-Unis, et des groupes de population des États-Unis.

Du point de vue des diverses maladies qui ont contribué au nombre total des décès excédentaires, les maladies coronariennes prennent la première place avec 36 p. 100, suivies du cancer du poumon avec 21 p. 100. La bronchite et l'emphyseme occupent la troisième place avec environ 7 p. 100.

Ces faits et ces rapports provenant de recherches rétrospectives et de perspective, à la fois épidémiologiques et statistiques, reflètent le genre de preuves scientifiques sur lesquelles sont fondés la position et le programme du ministère. Ils n'ont pas été utilisés pour une simple évaluation au niveau des connaissances du rapport «usage du tabac-maladie», mais comme point de départ de mesures en vue de reconnaître l'importance du problème de santé et les initiatives qui s'imposent.

Les preuves épidémiologiques fondées sur les données statistiques dont nous avons parlé étaient évidemment supportées par d'autres preuves scientifiques tirées d'expériences sur les animaux, d'études cliniques et d'autopsies. Certaines d'entre elles ont amené une meilleure compréhension des effets de l'usage du tabac en termes de modifications fonctionnelles et pathologiques, plus particulièrement dans la trachée, les bronches et les poumons. Il ne semble ni approprié ni nécessaire d'aborder présentement ces sujets. Nous devons toutefois faire remarquer que ces recherches scientifiques impliquent également l'emploi de la *statistique* sous forme de *données*, ainsi que l'usage de *méthodes* statistiques au cours de la planification, de l'analyse et de l'interprétation des résultats des recherches.

Nous devons mentionner, en outre, le flot permanent de nouvelles preuves à l'appui, fondées sur les recherches épidémiologiques, expérimentales, cliniques, pathologiques et

[Text]

This evidence has been outlined especially in two publications previously given to the Committee:

(a) *The Health Consequences of Smoking* (1968)—U.S. Public Health Service.

(b) *A Summary of the Proceedings—World Conference on Smoking and Health* (New York, September 1967).

My colleague, Dr. Colburn, is better able to comment on these recent research and program developments, but may I just indicate some important aspects of the additional scientific evidence.

(1) *Women Smokers*—We now have, especially from recent results of large population surveys, convincing information about women smokers. Women cigarette smokers have significantly elevated death rates but the effect is generally less than for men due in part at least to lower exposure in terms of numbers of cigarettes, duration of smoking, and extent of inhalation. (H.C. 1968, p.6).

(2) *Cessation of Smoking*—Previous studies have demonstrated the significance of stopping smoking. More direct evidence is now available from the Study of British Physicians in which there is reported a decrease in physicians who are smoking and a decrease in lung cancer rates among all physicians in contrast to the continued increase in the rates for the general population. (H.C. 1968, pp. 6 and 7. H.C. 1967, pp. 15-17).

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(3) *Disability and Morbidity*—The evidence referred to so far has concerned mortality—death and death rates—but there is obviously a good deal of sickness and disability involved. We now know from the U.S. National Health Survey that smokers have higher sickness and disability rates than non-smokers in terms of such indices as:

(i) days lost from work

(ii) days ill in bed

(iii) days of restricted activity. The United States Survey results have indicated, for instance, that for men 45 to 64 years of age 28 per cent of their disability days are estimated to represent an excess associated with cigarette smoking (H.C. 1968, p. 7).

[Interpretation]

sur le comportement. Ces preuves ont fait l'objet de deux publications soumises antérieurement au Comité:

(a) *The Health Consequences of Smoking* (1968)—U.S. Public Health Service;

(b) *A Summary of the Proceedings—Conférence mondiale sur l'usage du tabac et la santé* (New York, septembre 1967).

Mon collègue, le docteur Colburn, est mieux en mesure de commenter les réalisations découlant de ces récents programmes et travaux de recherches, mais permettez-moi simplement de mentionner certains aspects importants des nouvelles preuves scientifiques.

1) *Fumeurs de sexe féminin*—Plus particulièrement à la suite de grandes enquêtes menées récemment auprès de la population, nous possédons maintenant certaines preuves convaincantes au sujet des fumeurs de sexe féminin. Les femmes qui fument la cigarette ont un taux de décès élevé, mais les effets sont généralement moins marqués que chez les hommes en raison, tout au moins en partie, d'une exposition restreinte en ce qui a trait au nombre de cigarettes fumées, à la durée de l'habitude, et au volume de fumée avalée (H.C. 1968, p. 6).

2) *Arrêt de l'usage du tabac*—Des études antérieures ont démontré l'importance de l'abandon de l'usage du tabac. Des preuves plus directes découlent maintenant de l'Étude des médecins britanniques, qui signale une diminution du nombre de fumeurs et du taux de cancer du poulmon chez les médecins, contrastant avec l'augmentation soutenue de ces taux au sein de la population en général (H.C. 1968, pages 6 et 7. H.C. 1967, pages 15 à 17).

3) *Incapacité et morbidité*—Les preuves mentionnées jusqu'ici relèvent du domaine de la mortalité, mais elles comportent évidemment une bonne part de maladies et d'incapacité. Grâce à une enquête nationale sur la santé effectuée aux États-Unis, nous savons maintenant que les taux de maladie et d'incapacité sont plus élevés chez les fumeurs que chez les non-fumeurs, en se fondant sur les indications suivantes:

i) journées de travail perdues;

ii) journées de maladie passées au lit;

iii) journées d'activité restreinte.

Les résultats de cette étude américaine ont démontré, par exemple, que chez les hommes de 45 à 64 ans, 28 p. 100 des journées d'incapacité représentent un excès associé à l'usage du tabac (H.C. 1968, p. 7).

[Texte]

Finally Mr. Chairman, Dr. Colburn and I hope that this brief review of evidence of the cigarette smoking-disease relationship and the methods by which such evidence has been obtained, analyzed, and interpreted will help the Committee to understand the basis for our concern about this serious health problem and will assist in your own appreciation of it.

The Chairman: Thank you, Dr. Josie. The meeting is now open for questioning. Mr. Mather.

Mr. Mather: Mr. Chairman, I want to first compliment the witness on his fine presentation of the situation. His report gives us details and yet at the same time massive further support for the linking of cigarettes with excess death and disease in our country.

Dr. Josie, would you agree with me when I suggest that on the basis of what you have stated and what other health agencies and other countries have found that cigarette smoking is a public health hazard of national proportions?

Dr. Josie: Mr. Chairman, I would certainly agree with that.

Mr. Mather: Are you aware of the decision of the U.S. Federal Communications Commission earlier this month which voted, following similar reports there, to propose rules which would prohibit the advertising of cigarettes on radio and television?

Dr. Josie: Mr. Chairman, we are aware of this.

Mr. Mather: And would you agree with the statement of the Chairman of the FCC, the U.S. Federal Communications Commission, following the same kind of tests which you have just given us, when he stated:

In the face of this kind of information we believe action is called for. It would appear wholly at odds with the public interest for broadcasters to present advertising promoting the consumption of a product posing this unique danger, a danger measured in terms of an epidemic of death and disability.

Dr. Josie: Mr. Chairman, I think it is inappropriate for me, in relation to my purpose in being here, to express an opinion on that, although I would like to do so. However, as I understand it, one of the purposes of this Committee is to consider just such kinds of action and make recommendations that I can

[Interprétation]

En terminant, le docteur Colburn et moi-même espérons que ce bref aperçu des preuves recueillies sur le rapport existant entre l'usage du tabac et la maladie et des méthodes employées pour obtenir, analyser et interpréter ces données permettront au Comité de mieux comprendre les raisons de notre inquiétude au sujet de ce sérieux problème de santé, et de mieux juger la situation.

Le président: Merci, monsieur Josie. La période de questions est ouverte. Monsieur Mather.

M. Mather: Monsieur le président, je tiens à féliciter le témoin pour son excellent exposé. Il nous a donné des détails en nous montrant que l'usage de la cigarette est proportionnel à l'excès de mortalité et de morbidité au Canada. M'est-il permis de croire, d'après ce que vous avez dit et par suite des découvertes qui ont été faites dans nos organismes d'hygiène et à l'étranger, que l'usage du tabac est un danger public national?

M. Josie: Je suis certainement d'accord, monsieur le président.

M. Mather: Êtes-vous au courant de la décision prise au début du mois par la Commission fédérale américaine des communications? Cette commission, après avoir pris connaissance de rapports identiques, a décidé de proposer des règlements interdisant la publicité des cigarettes à la radio et à la télévision.

M. Josie: Monsieur le président, nous sommes effectivement au courant de ces recommandations.

M. Mather: Vous seriez donc d'accord avec le président de la Commission fédérale des communications qui a déclaré, en se fondant sur les études que vous avez rapportées: «De telles données nous forcent à agir. Il serait tout à fait contraire à l'intérêt public que les radiodiffuseurs annoncent un produit très dangereux causant la mort et l'infirmité.»

M. Josie: Monsieur le président, je n'ai pas, en tant que témoin, à donner mon avis personnel sur le sujet. Il me semble cependant que la tâche du comité est d'étudier ces mesures et de formuler les recommandations que nous attendons tous. Monsieur le président, je crois qu'il serait opportun, que le docteur Colburn,

[Text]

say we eagerly await. However, Mr. Chairman, perhaps it would be appropriate for Dr. Colburn, who is the program director, to deal with that further.

Dr. H. N. Colburn (Medical Consultant, Smoking and Health Unit, Health Services Branch, Department of National Health and Welfare): I have no further comment, Mr. Chairman, other than what was covered in the brief presented by our Minister before Christmas.

Mr. Mather: If I could put one final question, Mr. Chairman, along this same line of thought. The witness stated that last year as 6 years the health minister of that day urged the public health agencies of the country, particularly the health and welfare people, to do more with regard to informing the public of the health hazards involved in cigarette smoking. This they have done very well, but that was 6 years ago. Would you not agree that the time has come for some further action aside from education to meet this national health problem—such as legislation?

The Chairman: Are you asking for a comment?

Mr. Mather: I was asking for an answer to the question.

Dr. Josie: Mr. Chairman, first of all the Minister spoke in the House in 1963. At that time she said that health agencies had a duty to inform the public of the risk to health. We have been doing that, but the question of whether more can be done is something that has received real consideration in the department. The question of additional approaches has been considered in the department, and I believe that in the statement presented here by our Minister there are some suggestions that we believe you may be considering concerning additional action and alternative courses.

I think it would be inappropriate for me to comment further, Mr. Mather.

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Mr. Mather: Would you agree that the fact that we as a Committee are meeting on this very important health problem is a good thing, and that we are doing a worth-while job?

Dr. Josie: Yes, Mr. Chairman, we would agree, and we are hopeful of the outcome.

Mr. Mather: Thank you.

The Chairman: Dr. Yewchuk.

[Interpretation]

qui est directeur des programmes, fasse quelques commentaires à ce sujet.

M. Colburn (Conseiller médical; programme du tabac et de la santé; direction des services d'hygiène du ministère de la Santé nationale et du Bien-être social): Je n'ai rien à ajouter à ce qui a été dit dans le mémoire présenté par le ministre de la Santé avant Noël.

M. Mather: Monsieur le président, une dernière question à ce sujet. Vous avez dit qu'il y a six ans, le ministre de la Santé du temps a demandé aux organismes de santé du pays, et notamment aux fonctionnaires du ministère de la Santé et du Bien-être, d'informer davantage le public des dangers que représente l'usage du tabac. Ils ont bien fait leur tâche, mais il y a six ans de cela. Ne croyez-vous pas qu'il est temps de faire plus que d'informer le public pour régler ce problème national en l'occurrence avoir recours à une loi?

Le président: Desirez-vous avoir un commentaire?

M. Mather: Je demande une réponse.

M. Josie: Monsieur le président, le ministre a fait un discours à la Chambre en 1963. Elle a déclaré que les organismes de santé ont le devoir d'informer le public. C'est ce que nous avons fait; quand à savoir si l'on peut faire davantage, c'est une question que le ministère envisage. Le ministère a pensé à de nouveaux moyens, et je crois que dans la déclaration qu'il a faite ici même, notre ministre a énoncé certaines propositions que vous pouvez étudier et qui préconisent d'autres méthodes.

Je crois qu'il serait inopportun d'en dire davantage, monsieur Mather.

M. Mather: Ne pensez-vous pas qu'il est bon que notre comité soit saisi de ce problème très important qu'est la santé et que nous faisons un travail utile?

M. Josie: Certainement, monsieur le président; et nous envisageons les résultats avec optimisme.

M. Mather: Merci.

Le président: Monsieur Yewchuk.

[Texte]

Mr. Yewchuk: Thank you, Mr. Chairman.

Dr. Josie, would you explain the last item in Table I—cigars plus pipes is a minus quantity. Does this mean that people who smoke cigars and pipes live longer than those who do not smoke at all?

Dr. Josie: Mr. Chairman, that is the interpretation one could place on it and it is quite encouraging to some people. However, we are not inclined to put any such weight on a difference of this kind.

Mr. Yewchuk: I wonder if you would comment further on sex ratios with regard to lung cancer in smokers. Assuming that women smoke the same number of cigarettes for the same period of time, is there still less of this disease amongst women?

Dr. Josie: Mr. Chairman, I do not think that is known precisely. As I mentioned, the fact is that there are differences in the smoking habits so far of the women. The tendency is however for the rates to get more nearly equal, although, fortunately, there is still a very, very great difference between them. I am not in a position to say, but Dr. Colburn might comment on the possibility of a biological difference in response which has something to do with the difference in the lung cancer rate, even as between men and women smokers.

Dr. Colburn: So far as I am aware there is no evidence of a biological difference determining this difference in death rates. The expectation is that with similar exposures, which would include duration of smoking, number of cigarettes smoked, type of cigarette smoked and manner of smoking, and so forth, that the death rates for men and for women would tend to come closer together.

Mr. Yewchuk: You mentioned some relationship to the time of exposure. Is there any information as to how long one could smoke until certain changes take place or when the process is reversible, or anything? For example, if one were to smoke for a certain number of years and then be encouraged to quit, he might be told it is still reversible at that point. Is there any such point established?

Dr. Josie: Mr. Chairman, not precisely. I would not like to say that, but I could say, I think with reasonable assurance, that it is worthwhile for a man or woman to stop at almost any age after almost any duration of smoking. There is nothing to indicate that there is not a gain from that in terms of lung cancer mortality. However, the precise dura-

[Interprétation]

Mr. Yewchuk: Merci, monsieur le président. Monsieur Josie, pourriez-vous expliquer la dernière rubrique du tableau n° 1: cigare et pipe, où les chiffres sont inférieurs. Serait-ce que les fumeurs de cigares et de pipe vivent plus longtemps que ceux qui ne fument pas du tout?

M. Josie: C'est une interprétation plausible, tout à fait encourageante pour certains. Cependant, nous n'accordons pas beaucoup d'importance à une différence de cet ordre.

Mr. Yewchuk: Avez-vous des commentaires à faire quant à la fréquence du cancer des poumons chez les fumeurs de l'un et l'autre sexe? A supposer que les femmes fument le même nombre de cigarettes pendant la même période, y a-t-il moins de chances qu'elles soient atteintes de cette maladie?

M. Josie: Monsieur le président, je ne crois pas que nous ayons des connaissances précises à ce sujet. Il y a sûrement des différences dans les habitudes des fumeurs. La tendance est au rapprochement, bien qu'il y ait encore, heureusement, une très grande différence. Je ne saurais préciser davantage, mais le Dr Colburn pourra vous dire s'il peut y avoir des différences d'ordre biologique qui expliqueraient pourquoi les taux de fréquence du cancer des poumons chez les hommes et chez les femmes qui font l'usage du tabac sont différents.

M. Colburn: Il n'a jamais été prouvé qu'il existe des différences biologiques déterminant les écarts entre les taux de décès. Notre hypothèse est que dans des conditions identiques—la période durant laquelle on fait usage du tabac, le nombre de cigarettes fumées, genre de cigarettes, etc., le taux de mortalité, chez les hommes et les femmes, aurait tendance à se rapprocher.

Mr. Yewchuk: Vous avez mentionné qu'il y avait un certain rapport avec la durée de l'habitude. Est-ce qu'on sait jusqu'à quand quelqu'un peut fumer sans qu'il en prenne l'habitude, est-ce que la tendance peut être renversée, même après un certain nombre d'années?

M. Josie: Pas précisément, monsieur le président. Je puis dire, je crois, avec une certaine assurance, qu'un homme ou une femme peut arrêter de fumer quelle que soit la durée de l'habitude. Rien n'indique qu'il n'y aurait pas gain au point de vue taux de mortalité et cancer du poumon. Mais, le point critique, l'âge auquel on peut arrêter de fumer avec

[Text]

tion, that is, the critical point, the precise age at which one could terminate successfully, as far as I know, is not known. There are these evidences, though, about starting at an earlier age means having a harder time getting rid of the risk of lung cancer or increased mortality generally. Similarly, if you continue smoking to a late age, the differentials persist over stopping at an earlier age.

Mr. Yewchuk: Because of the fact that there is a difference between cigarette, cigar and pipe smokers, is there any specific chemical or specific type of tar which is present in cigarettes which has not been found in cigars or pipes, or is the relationship strictly because of the physical difference in the way people smoke these objects?

Dr. Josie: Mr. Chairman, I am afraid that specific question is outside my immediate knowledge. There are differences in the tobacco and there are certainly differences in the mode of smoking. Dr. Colburn might be able to provide more specific information.

Dr. Colburn: Most of the difference between the risks of cigarette smokers and cigar and pipe smokers is attributed to the differences in inhalation practices, and there is good supporting evidence for this in other ways too, as well as from the viewpoint of lung cancer.

Mr. Yewchuk: The reason I was asking the question is because there have been suggestions of producing cigarettes from, say, tobacco similar to cigar tobacco or some non-tobacco

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co product. What is the status of this possibility at the present time? What I am trying to say is: is there any other material that might be used for cigarettes known at the present time that would not contain the same injurious chemicals?

An hon. Member: Hashish.

Dr. Colburn: The carcinogenicity, the cancer-producing properties, of cigarettes is related to the type of curing, the cutting and various processing factors; this has been shown experimentally in animals. There is a definite level of cancer-producing substances in cigars and pipes but it would appear at the moment that the real difference in possible dangers to smokers is related to inhalation and not inhaling.

Mr. Yewchuk: You think there is some relationship to the curing method used?

Dr. Colburn: Yes, there has been, in animal studies, evidence of different cancer-producing

[Interpretation]

succès, pour autant que je sache, n'est pas connu.

Évidemment, si vous avez commencé plus tôt à fumer vous aurez plus de difficultés à vous débarrasser des risques de cancer de poumon ou des risques de mortalité en général. De même, si vous continuez à fumer jusqu'à un âge avancé, les différences vont rester quand même.

M. Yewchuk: Comme il y a une différence entre la cigarette, le cigare et la pipe, y a-t-il des produits chimiques qu'on trouve dans la cigarette et que l'on ne trouve pas dans le cigare et dans la pipe? Ou s'agit-il plutôt de la façon de fumer, la façon d'inhaler?

M. Josie: Cette question dépasse le cadre de ma compétence. Il y a différentes sortes de tabac et il y a sûrement différentes façons de fumer. Peut-être que le D^r Colburn pourrait vous donner plus de renseignements là-dessus.

M. Colburn: La principale différence entre les risques que courent les fumeurs de cigarettes, de cigares et de pipe est attribuée aux différentes façons d'inhaler, surtout au point de vue du cancer du poumon.

M. Yewchuk: La raison pour laquelle j'ai posé cette question, c'est qu'on a songé à fabriquer des cigarettes avec le même genre de tabac que le tabac à cigare, ou avec des produits étrangers au tabac. Autrement dit, y a-t-il d'autres ingrédients qui pourraient être utilisés pour la cigarette et qui ne présenteraient pas autant de danger, pas les mêmes produits chimiques, admettons?

Une voix: Le haschisch.

M. Colburn: Les facteurs cancérigènes qu'on trouve dans le tabac dépendent de la coupe, des différents processus de préparation du tabac. Et, il y a sûrement un certain niveau de substances cancérigènes dans le tabac utilisé pour le cigare et la pipe, mais, il semble, pour le moment, que les différences intéressent surtout l'inhalation de la fumée.

M. Yewchuk: Vous croyez qu'il y a un rapport avec les méthodes de séchage utilisées?

M. Colburn: Oui, il y a sûrement des propriétés différentes, selon que le tabac a séché

[Texte]

ng properties of the tobacco produced by curing in the air versus curing in flues or in the sun. There are also some relationships established on the way that the tobacco is cut and processed.

Mr. Yewchuk: Thank you, Mr. Chairman.

Mr. Otto: Mr. Chairman, I do not want to be interpreted or understood to be one in complete support or any support of the cigarette habit. Smoking of any kind, whether it is cigarettes or tobacco is a filthy habit. However, there are several questions to which we should get answers. For instance, Dr. Josie, you said that the study was based between 1950 and 1967 where the lung cancer incidence was tripled; is that correct? Was the consumption of cigarettes tripled within that time?

Dr. Josie: I should know that, Mr. Chairman, but I do not know it offhand. Do you have any consumption figures here, Dr. Colburn?

Dr. Colburn: I have some in my briefcase if you may be permitted to get them out?

Mr. Otto: I think it is important, please.

Dr. Colburn: In 1950 the per capita cigarette consumption in Canada was approximately 1250; in 1967 it was approximately 300.

Mr. Otto: In other words, almost double. But the incidence was tripled; how do you explain this?

Dr. Josie: Mr. Chairman, I think what I did was that the number of deaths tripled, and the rate doubled. I must say that I am somewhat surprised at this coincidence.

Mr. Otto: You say the number of deaths tripled?

Dr. Josie: Yes.

Mr. Otto: But the increase in the consumption of cigarettes only doubled. This is what I am trying to get at! How do you explain this?

Dr. Josie: I am not denying what you said, but what I said was that the number of deaths tripled over the 18-year period.

Mr. Otto: Right.

Dr. Josie: The death rate somewhat more than doubled, and you are suggesting, and the figures indicate, something like a doubling of the per capita consumption figures, which seems to be surprisingly consistent.

Dr. Colburn: May I comment, sir?

[Interprétation]

au soleil ou à l'air chaud. Et, il y a aussi la façon dont le tabac est coupé et traité.

M. Yewchuk: Merci, monsieur le président.

M. Otto: Monsieur le président, je ne veux pas qu'on pense que je souscris à l'usage de la cigarette. Qu'on fume la cigarette ou qu'on fume n'importe quel tabac, c'est une mauvaise habitude. Cependant, il y a plusieurs questions qui méritent des réponses. Par exemple, le Dr Josie a dit que l'étude portait sur les années 1950 à 1967, alors que l'incidence du cancer du poumon a triplé. Est-ce exact? Est-ce que la consommation de cigarettes a triplé pendant cette période?

M. Josie: Je devrais le savoir, monsieur le président, mais je ne peux répondre à brûle-pourpoint. Avez-vous des données statistiques sur la consommation, docteur Colburn?

M. Colburn: Oui, j'ai des données statistiques dans ma serviette. Si l'on me permet de les retrouver.

M. Otto: Je crois que c'est une question importante.

M. Colburn: En 1950, la consommation de cigarettes par tête, au Canada, était d'environ 1250. En 1967, elle était d'environ 2300.

M. Otto: Autrement dit, elle a presque doublé. Mais l'incidence du cancer du poumon a triplé; comment expliquez-vous cela?

M. Josie: Monsieur le président, ce que j'ai dit, je crois, c'est que le nombre de décès avait triplé et que l'incidence avait doublé. Je suis quelque peu surpris de cette coincidence.

M. Otto: Vous dites que le nombre de décès a triplé?

M. Josie: Oui.

M. Otto: Mais la consommation de la cigarette n'a fait que doubler. Comment expliquez-vous cet écart?

M. Josie: Monsieur le président, j'ai dit que le nombre de décès avait triplé pendant cette période de 18 ans.

M. Otto: En effet.

M. Josie: Le taux de mortalité a un peu plus que doublé et nos chiffres indiquent que la consommation, par tête, a doublé. Cela se rapproche de beaucoup.

M. Colburn: Puis-je ajouter quelque chose, Monsieur?

[Text]

Mr. Otto: Yes, Dr. Colburn.

Dr. Colburn: In regard to this particular point, the long incubation period, as it were, for the development of lung cancer usually means that you look for a parallel in the lung cancer rates with the cigarette increases 20 to

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30 years before. If we were to take an example, and go back from 1950 to 1930, the per capita cigarette consumption at that time was approximately 500, and it increased during the next 20 years up to a level of approximately 1200; it was more than doubled. If you follow that through for 30 years up to 1960, it had gone up to 1900, an increase of almost four times in cigarette consumption in that period.

Mr. Otto: Dr. Colburn, to go a step further, cigarettes were in fairly common use from about 1901, I take it? 1901 was when Bulldog came out. I do not remember that far back but...

Dr. Josie: What would you mean by "fairly common"?

Mr. Otto: Well, I am speaking of the introduction of cigarettes.

Dr. Josie: The big increases in consumption came much later.

Mr. Otto: When was the big increase in consumption of cigarettes?

Dr. Colburn: Well this chart before me, sir, indicates that back in 1920 approximately 250 cigarettes were consumed per capita in Canada, and this progressively increased, allowing for dips during the depression and a slight postwar dip, up until we reach the peak so far of up to about 2200, almost 2300 in 1967.

Mr. Otto: The per capita is what I am questioning. Per capita means the number of cigarettes divided by the population, so to speak. You are not saying that in the 1920s, for instance, the smoker smoked only 250 cigarettes a year and in 1950 he smoked 1250. You are not suggesting that?

Dr. Colburn: No, we are not suggesting that, sir. This is the population ratio.

Mr. Otto: Could it be presumed, then, that the habit of smoking was pretty well consistent—that some people were chain smokers, that others smoked, say, 20 or 30 cigarettes a day? The reason for this question is that we did not hear too much about lung cancer or of the incidence of lung cancer before, and I am questioning whether there has been any change in the manufacture of cigarettes which could somehow identify this vast prob-

[Interpretation]

M. Otto: Allez-y, docteur Colburn.

M. Colburn: En ce qui a trait à ce point particulier, la longue période d'incubation pour le développement du cancer du poumon signifie que vous voulez établir un parallèle entre l'incidence du cancer du poumon et l'augmentation de la consommation de cigarettes, il y a 20 ou 30 ans. Lorsqu'on revient, par conséquent, à ces changements et si vous remontez de 1950 à 1930, la consommation par tête était alors d'environ 500 cigarettes. Au cours des vingt années suivantes le chiffre atteignait environ 1200. C'était donc plus que le double. Si vous vous rendez ensuite en 1960, vous verrez que le chiffre est passé à 1900, soit environ une augmentation quadruple.

M. Otto: Docteur Colburn, je crois que c'est à partir de 1901 que l'usage de la cigarette s'est répandu. Évidemment, je ne me souviens pas exactement de cette époque.

M. Josie: Que voulez-vous dire par «usage répandu»?

M. Otto: Je parle de l'apparition de la cigarette.

M. Josie: Je crois que c'est beaucoup plus tard que l'usage massif s'est répandu.

M. Otto: Et à quelle époque l'usage s'est-il tellement répandu?

M. Colburn: En 1920, on consommait environ 250 cigarettes par tête, au Canada. Et cela a augmenté graduellement, mais il y a eu des baisses et des hausses pendant la dépression, pendant l'après-guerre aussi, jusqu'à ce que nous ayons atteint le maximum d'environ 2,200, de presque 2,300 en 1967.

M. Otto: Le taux par tête est celui qui m'intéresse. Par tête, veut dire le nombre de cigarettes divisé par le nombre d'habitants pour ainsi dire. Vous ne dites pas qu'en 1920, par exemple, les fumeurs ne fumaient que 250 par an et qu'en 1950 ils en fumaient 1250. Vous ne voulez-pas dire cela?

M. Colburn: Non, nous ne voulons pas dire cela. C'est le rapport de la population.

M. Otto: Peut-on donc supposer que l'habitude est assez constante, que certains en fument 5 à 10, d'autres 20 à 30 par jour? La raison pour laquelle je vous pose cette question est la suivante: on ne nous a pas auparavant parlé beaucoup du cancer du poumon ou de l'incidence du cancer du poumon. Je me demandais s'il n'y avait pas eu des changements dans la fabrication des cigarettes qui permettraient de mettre le doigt sur ce vaste

[Texte]

lem before 1930 and after 1930. Are you aware of any change in the manufacture—for instance whether glycerine was used before 1930 in the treatment of cigarettes, of tobacco?

Dr. Colburn: I think perhaps this might better be answered by other people, sir. I am not in a position to answer that one.

Mr. Otto: Going on to the study that Dr. Josie was talking about, this was a Canadian study. Two hundred thousand questionnaires were sent out. Were they all to DVA—either pensioners or . . .

Dr. Josie: Dependents of pensioners or those receiving a pension cheque of some kind.

Mr. Otto: I see, so that you would have some widows in this.

Dr. Josie: Yes, most of the women were war widows.

Mr. Otto: I take it, then, that whatever the sampling was, it was pretty well restricted to a certain group of people who had gone through some experience other than the average population had gone through; for instance, membership in the Armed Forces and overseas service, so that you could not really say that was a perfect sampling, could you?

Dr. Josie: No, Mr. Chairman, there was no suggestion at any time that this was a random sample of the population. This was a very large group distributed over the whole country. Information was obtained about the smoking habits of these people without respect, at that stage, to their having lung cancer or not having it. Subsequently, we followed their experience to determine their death rate in this group.

However, I would mention, when you talk about the representativeness of the study, that this is why we like to refer also to the experience elsewhere. I have mentioned that in the retrospective studies that were done in nine countries and the prospective studies that were done in Britain, the United States and Canada there was a great range of populations including some general population samples. The largest studies of all were the Hammond and Dorn studies done under the auspices of the American Cancer Society on general population groups. Some of the other studies were of veterans in the States, others of occupational groups and others of physicians; so, that in that sense we have a very comprehensive experience.

[Interprétation]

problème, avant 1930 et après 1930. Êtes-vous informé de changements dans la fabrication, par exemple, avant 1930, l'utilisation de glycérine dans le traitement des cigarettes et du tabac?

M. Colburn: Je ne peux pas vous répondre. Vous pourriez peut-être poser la question à d'autres.

M. Otto: L'étude dont parlait le docteur Josie est une étude canadienne: 200,000 questionnaires ont été envoyés. Est-ce qu'ils ont été envoyés à des pensionnés du ministère des Anciens combattants?

M. Josie: Des pensionnés et leurs dépendants ou des personnes qui reçoivent un chèque de pension de quelque sorte.

M. Otto: Je vois. Il y aurait donc des veuves?

M. Josie: Oui, la plupart des femmes étaient des veuves de guerre.

M. Otto: Donc j'en déduis que tel qu'était l'échantillonnage, il a été essentiellement limité à un certain groupe de gens qui ont eu une existence assez différente de l'existence moyenne du Canadien; ce sont des membres des forces armées qui avaient servi outremer. On ne peut pas dire que c'est un échantillonnage parfait, n'est-ce pas?

M. Josie: Non, monsieur le président, nous n'avons en aucun moment dit que c'était un échantillonnage parfait de la population. C'est un groupe très vaste réparti dans tout le pays. Nous avons eu des données au sujet des habitudes en matière d'utilisation de tabac de ces gens sans tenir compte du fait qu'ils souffraient de cancer des poumons ou non. Et nous avons essayé de déterminer à partir de cela leur taux de mortalité dans ce groupe.

Lorsque l'on parle de la représentativité de l'étude, je vous dirai que c'est pour cela que nous avons parlé également de ce qui s'est passé ailleurs. Et j'ai parlé des études rétrospectives qui ont été faites dans 9 pays et des prospectives qui ont été faites en Grande-Bretagne, au Canada, aux États-Unis. Il y avait une vaste gamme de population. Les plus grandes études ont été les études Hammond et Dorn qui ont été faites sous les auspices de la société américaine du cancer où il y avait des groupes de la population en général. En ce qui concerne d'autres études, il s'agissait d'anciens combattants aux États-Unis, et ensuite des groupes professionnels, et d'autres étaient des médecins; c'est en ce sens que nous avons des données très complètes.

[Text]

Mr. Otto: On this Canadian study, did the Department try to verify the answers by personal interviews of certain samplings?

Dr. Josie: No, Mr. Chairman. There was no follow-up of that kind. It was a questionnaire survey.

Mr. Otto: I realize that most research is done by questionnaire. But it is always an accepted practice that since you cannot be sure of how people are going to answer certain questions, studies are made of a very small sampling by personal interview to see if they conflict or if they verify the answers given. No such verification study was made.

Dr. Josie: That is right.

Mr. Otto: Now we get down to the problem that was approached by Dr. Yewchuk, and I do not think you explained it clearly. On the graph, figure 1, it shows that for cigar and pipe smokers only, from the age of 35, and I take it before that age, to about the age of 55 or 56, there is quite a difference in the death rate on that graph. Surely you cannot say that smoking a pipe or smoking cigars is beneficial. How can you explain this?

There is a considerable difference. It is not something we passed over saying, well, it is not very much, because there is more of a variation between those years than any other variation further on between cigar smokers and non-smokers.

Dr. Josie: Mr. Chairman, I think the main comment there is with respect to the numbers of deaths on which the rates are based. Perhaps more cautious people would not have computed rates on such small numbers as was done here. For instance, the cigar and pipe smoker deaths were zero in the age group under 30; zero, 30 to 34; only 1 in the 35 to 39 age group; only 2 in the 40 to 44 group; 4 in the next group and 3 in the next; and it is not until you get to about 50 or so that you get any substantial number. Between 55 and 59 you get 38, and then you get some solidity in the figure on your right.

I think that is a good point you make though, sir, concerning the presentation of it in that way. We might have presented it better perhaps in a bar chart and we might have excluded the younger age group.

Mr. Otto: One can say that possibly smokers in that age group are psychologically more adjusted if they smoke a pipe or cigar, which the adds the whole concept of psychology to this questionnaire which obviously

[Interpretation]

M. Otto: En ce qui concerne cette étude canadienne, est-ce que le ministère a essayé de vérifier les réponses en ayant des entrevues avec certains des répondants?

M. Josie: Non, nous n'avons pas fait cela, monsieur le président. Nous n'avons pas vérifié de cette façon. Il s'agissait seulement de questionnaires.

M. Otto: Je me rends compte que la plupart des recherches sont faites avec des questionnaires. Mais, comme on ne sait pas très bien comment les gens vont répondre aux questions, d'habitude, on fait des études avec un tout petit échantillonnage, avec entrevues personnelles pour simplement confirmer ou infirmer les réponses. Donc on n'a pas fait de vérification de ce genre.

M. Josie: Non.

M. Otto: Ensuite, nous attaquerons le problème dont le docteur Yewchuk nous a parlé et je ne crois pas que vous ayez expliqué cela clairement. Dans le graphique, figure 1, on voit les fumeurs de pipe et de cigare seulement depuis l'âge de 35 ans jusqu'à l'âge d'environ 55 ou 56 ans. Il y a une assez grande différence entre les taux de mortalité de ces gens sur ce graphique. Il est certain qu'on ne peut pas dire que fumer des cigares et des pipes est une bonne chose. Comment pouvez-vous expliquer cela?

Il y a une variation très importante entre ces années, plus que toutes les autres différences entre les fumeurs de cigares et les non-fumeurs.

Dr. Josie: Monsieur le président, le commentaire principal à faire ici en ce qui concerne le taux de mortalité. Peut-être que des gens plus prudents n'auraient pas calculé les taux lorsqu'ils approchent de zéro. Par exemple, les fumeurs de pipe et de cigare de moins de trente ans étaient à zéro; zéro de 30 à 34; seulement 1 dans le groupe de 35 à 39; seulement 2 dans le groupe de 40 à 44; 4 dans le prochain groupe et 3 dans le suivant; ce n'est que lorsqu'on arrive à l'âge de 50 ans environ qu'il y a une augmentation sensible. Il y en a 38 entre 55 et 59 ans.

Vous avez très bien fait de soulever cette question, monsieur, au sujet de la présentation. Il aurait peut-être été préférable d'avoir un graphique dans lequel on n'aurait pas prévu les groupes d'âge plus jeunes.

M. Otto: On peut dire que les fumeurs de ce groupe d'âge sont peut-être mieux adaptés psychologiquement s'ils fument la pipe ou le tabac, ce qui introduit alors une notion psychologique qui manifestement n'était pas pré-

[Texte]

was not included in the tests made, but something about which we will hear from Dr. Hans Selye. This is a fairly substantial thing and I just wondered whether it had interested the Department enough for it to try to find out the reason for this difference. Did it not interest the Department to try to find out this question mark?

Dr. Josie: Mr. Chairman, I think for the reason that I have stated we did not consider it so much a question mark as it is an interesting point. We did not explore it in the manner that was suggested.

Mr. Otto: Regarding the question that Dr. Yewchuk raised about the women, you say that women did not suffer the same consequences. Was the lung cancer incidence directly proportionate to the number of cigarettes consumed, different between women and men? Or was there still a variation there that cannot be explained?

Dr. Josie: I am not sure, Mr. Chairman, that I understand the point exactly. Women smokers do have elevated death rates that are not as high as those of men. They do show, in the latest studies but not in ours, a response in relation to the amount of smoking, but I do not think that for the same amount of daily smoking the rates are as high for women as for men. That, I presume, is because of a difference in the nature of the effects or more probably in the nature of the smoking habits as between men and women.

I think we will know more about that as the years go by.

Mr. Otto: You are making another study of this question, are you?

Mr. Robinson: I take it that this refers back to your previous comment that women smoke fewer cigarettes, they inhale less of the cigarette when they are smoking and they do not smoke as much of each cigarette as men do.

Dr. Josie: That is right, Mr. Chairman, there have been some studies done on the difference in smoking habits between men and women and they do confirm these general observations that there are differences and they are in the direction which would support the findings about the effects of cigarette smoking on health.

Mr. Robinson: So that by and large, although women may in some cases "smoke", that is they purchase and use as many cigarettes, they do not get as much nicotine and tar content from them.

[Interprétation]

vue lorsqu'on a entrepris l'étude, mais dont le Dr. Hans Selye. Cela est assez important. Je me demande si cela avait suffisamment intéressé le ministère pour qu'il essaie d'expliquer cette différence. Est-ce que le ministère ne s'est pas intéressé à la réponse à cette question?

M. Josie: Monsieur le président, j'ai déjà dit que nous n'avons pas considéré, nous n'avons pas poussé la question bien que ce soit un point très intéressant.

M. Otto: La question qu'a soulevée M. Yewchuk au sujet des femmes, vous dites que les femmes n'ont pas souffert des mêmes conséquences. Est-ce que l'incidence du cancer du poulmon avait un rapport direct avec le nombre de cigarettes fumées ou est-ce qu'il y avait une différence entre les hommes et les femmes qui ne pouvait pas s'expliquer?

M. Josie: Monsieur le président, je ne suis pas sûr d'avoir très bien compris la question. Les fumeuses ont des taux de mortalité élevés qui ne sont pas aussi élevés que ceux des hommes. La différence n'est pas aussi élevée que chez les hommes mais il y a une différence qui a un rapport avec le nombre de cigarettes fumées. Je ne crois pas que pour le même nombre de cigarettes par jour, le taux est aussi élevé pour les femmes que pour les hommes. Cela est dû à une différence peut-être de l'effet ou à une différence des habitudes des hommes et des femmes.

Je crois que nous en saurons plus avec les années.

M. Otto: Vous étudiez la question?

M. Robinson: Donc, dois-je en déduire—cela renvoie à votre commentaire—du fait que les femmes fument moins de cigarettes, elles avalent moins la fumée lorsqu'elles fument et elles ne fument pas une aussi grande partie de la cigarette que les hommes?

M. Josie: Oui, c'est vrai, monsieur le président. Nous avons fait une étude des différences entre les habitudes des hommes et des femmes lorsqu'ils fument ou elles fument. Ces études confirment qu'il y a des différences et confirment les découvertes qui ont déjà été faites au sujet des effets de la cigarette sur la santé.

M. Robinson: Donc, dans l'ensemble, bien que les femmes «utilisent» autant de cigarettes, elles n'en tirent pas autant de nicotine ou de goudron.

[Text]

Dr. Josie: Mr. Chairman, this seems likely. I have not seen any figures about the relative consumption in terms of purchase between men and women so I am not in a position to verify that, but that is a possibility too.

Mr. Robinson: Then, putting it another way, would you be prepared to say that there is something about the anatomy of women that is not affected by the tars and nicotines the same as men are?

Dr. Josie: Mr. Chairman, I think it is better that Dr. Colburn comment on the anatomy of women, but I think we have already indicated that we have no evidence yet of a real biological difference in response. The evidence so far is that there may be, as another factor in addition to the difference in the smoking habit.

Dr. Colburn: Women who smoke cigarettes, like men, have an increased risk according to the amount smoked but it is not at the same level as for men, and it is generally conceded that this is due to the difference in the way that women smoke; in other words, the eventual total dose of cigarette constituents that they take into their lungs.

Mr. Robinson: Then, would you suggest that men should encourage the habits of smoking that women have?

Mr. Otto: Mr. Chairman, let me finish my questioning before we get into the supplementaries. The only other thing that I wanted to clarify now that you have explained it, Dr. Josie, is this. It would seem from what Dr. Colburn has said that if you took 1,000 women who smoked 40 cigarettes a day for the last 15 or 20 years and compared them to 1,000 men who smoked 40 cigarettes a day for the same number of years, the incidence would be identical. Is that correct?

Dr. Josie: Mr. Chairman, if the smoking habit was the same—the same inhalation, the same pattern, if they discarded the same length of butts and so on—then I would expect the same rate. Is that what you are saying?

Mr. Otto: Yes, the inhalation and everything being the same.

Dr. Josie: That is why, Mr. Chairman, we are not surprised to see the rates going up as they are for women and why we fear the future.

Mr. Otto: Yes. Is there a study being conducted at the present time to compare these two? That is, a study on the same number of men and women who are almost identical smokers?

[Interpretation]

M. Josie: Monsieur le président, je ne suis pas certain. J'ignore quelle proportion il existe entre le nombre de cigarettes achetées et fumées chez les hommes et les femmes, mais ce n'est pas impossible.

M. Robinson: Bon, je vais poser ma question d'une autre façon. Seriez-vous prêt à dire qu'il y a quelque chose dans l'anatomie des femmes qui n'est pas touché, comme chez les hommes, par la nicotine et le goudron?

M. Josie: Je préférerais que le docteur Colburn traite de l'anatomie des femmes, mais nous ne pensons pas qu'il y ait une différence biologique dans les réactions.

Dr. Colburn: Les femmes qui fument la cigarette, comme les hommes, courent de plus grands risques selon le nombre de cigarettes fumées, mais le niveau n'est pas le même. Cela est sans doute dû à la façon dont les femmes fument, autrement dit, à la dose totale d'éléments de la cigarette qui sont absorbés par les poumons.

M. Robinson: Donc, pensez-vous que les hommes devraient emprunter leurs méthodes aux femmes?

M. Otto: Monsieur le président, je voudrais finir mon interrogatoire. Il y a d'autres questions que je voudrais éclaircir maintenant que vous nous avez expliqué cela. Il semble d'après ce qu'a dit le docteur Colburn, que si on compare 1,000 femmes qui fument 40 cigarettes par jour depuis 15 ou 20 ans, à 1,000 hommes fumant 40 cigarettes par jour pendant le même nombre d'années, que les résultats seraient identiques. Est-ce exact?

M. Josie: Monsieur le président, si les habitudes étaient les mêmes, on aurait la même tendance. C'est ce que vous dites, n'est-ce pas?

M. Otto: Oui, si toutes les conditions sont identiques.

M. Josie: C'est pourquoi nous nous inquiétons lorsque nous voyons que les femmes fument de plus en plus et nous nous inquiétons pour l'avenir.

M. Otto: Est-ce qu'une étude est faite à l'heure actuelle permettant de comparer les habitudes d'un nombre égal d'hommes et de femmes qui fument de la même façon?

[Texte]

Dr. Josie: Not specifically; that is a good idea, though.

Dr. Colburn: I am not aware of a study.

Mr. Otto: I realize that what the Minister has said and what Dr. Josie has repeated and Mr. Mather agrees with is that whenever there is a product that is injurious to national health, it is the duty of the Department to bring it out to the public and to recommend legislation.

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Dr. Josie: Mr. Chairman, I did not say that.

Mr. Otto: No, I said the Minister.

Dr. Josie: No, I do not think the Minister said that either, sir. I do not think the Minister went quite that far.

Mr. Otto: Well, what exactly did the Minister say? Let us get this straight.

Dr. Josie: The Minister said in the House of Commons:

... I have been impressed with the evidence which has been presented to me in numerous reports concerning the increasing lung cancer death rate in Canada and the serious health problem that is posed by this disease.

And she went on...

Health agencies... have a duty to inform the public about the risk to health connected with cigarette smoking.

She did not, on that occasion anyway, extend her remarks to other causes or hazards, nor did she suggest any prohibition or legislation.

Mr. Otto: I see. In other words, it was strictly with cigarettes...

Dr. Josie: On that occasion.

Mr. Otto: I take it you are aware of Dr. William B. Cammel's study which has just been completed in Framingham, Massachusetts, in which the preliminary report on cholesterol and heart attacks has indicated that there are 20 times as many deaths—that is proportionately—in the United States due to heart conditions due to high cholesterol. The blame is put directly on butter, cream and fat products and your Department will in time be considering the very great health hazard of farm products.

Dr. Josie: Mr. Chairman, our Department is considering as far as possible all health hazards and appropriate action.

[Interprétation]

M. Josie: Non, mais c'est une excellente idée.

Dr. Colburn: Je ne suis au courant d'aucune étude.

M. Otto: Ce qu'a dit le ministre, ce qu'a répété M. Josie, c'est que chaque fois qu'un produit dommageable pour la santé est découvert, qu'il est du devoir du ministère de mettre le public en garde et de recommander des mesures législatives pertinentes.

M. Josie: Je n'ai pas dit cela, monsieur le président.

M. Otto: Je ne parle pas de vous, mais du ministre.

M. Josie: Je ne crois pas que le ministre l'ait dit non plus. Je ne crois pas qu'il soit allé si loin.

M. Otto: Qu'a dit le ministre exactement?

M. Josie: Elle a dit, à la Chambre des communes:

J'ai été impressionné par les preuves qu'on m'a présentées dans divers rapports au sujet de l'augmentation du nombre de pertes de vie dues au cancer, au Canada, et du grave problème pour la santé que pose cette maladie.

Et elle a ajouté:

Les organismes de santé... ont le devoir d'avertir le public du danger que représente pour la santé l'usage de la cigarette.

Elle n'a pas parlé, à ce moment-là, des autres dangers et n'a pas suggéré non plus que la cigarette soit interdite ou que soient adoptées des mesures législatives.

M. Otto: Je vois. Elle n'a parlé que de cigarettes.

M. Josie: A ce moment-là, oui.

M. Otto: Vous êtes sans doute au courant de l'étude que le docteur William B. Cammel vient de compléter à Framingham, dans le Massachusetts. Le rapport préliminaire sur le cholestérol et les crises cardiaques indique qu'il y a 20 fois plus de décès aux États-Unis imputables à des maladies cardiaques causées par une haute teneur en cholestérol. Le beurre, la crème et les matières grasses seraient responsables de cet état de choses. Je suppose que votre ministère étudiera en temps opportun les dangers que représentent les produits laitiers.

M. Josie: Monsieur le président, notre ministère examine dans toute la mesure du possible tous les dangers à la santé et prend toutes les mesures nécessaires.

[Text]

Mr. Otto: I see. Thank you very much.

Mr. Mather: Mr. Chairman, may I have one supplementary to Mr. Otto's question?

The Vice-Chairman: Yes.

Mr. Mather: It is very brief. I just want it for my records. Am I right in saying that we have been told here that the cigarette consumption rate and the lung cancer death rate approximately doubled in each case between 1950 and 1967 or 1968? Was that the statistic that we had?

Dr. Josie: Mr. Chairman, I think I missed the beginning of Mr. Mather's question.

Mr. Mather: I wanted to be clear on this point, Mr. Chairman, because I think it is very significant. If I heard rightly, there was an approximate doubling of cigarette consumption and, I think, lung cancer terminal cases in the period 1950 to 1967. Is that approximately right?

Dr. Josie: Mr. Chairman, in my presentation I referred to the tripling of the number of lung cancer deaths and the doubling of the death rate from lung cancer. I think Dr. Colburn, in response to the question from one of the members of your Committee, did find in his chart that the consumption figures about doubled in the same period. Perhaps we should confirm that now.

Dr. Colburn: Yes. This was not quite doubled. The point also was raised that to find the usual parallel between cigarette consumption increases and lung cancer you have to take the cigarette consumption 20 to 30 years before and the changes over that period because of this factor of the long incubation or the general duration of smoking before lung cancer begins to increase in a population.

Mr. Mather: I understand, thank you.

The Vice-Chairman: Mr. Robinson?

Mr. Robinson: Thank you, Mr. Chairman. I have considerable concern about the quantity of cigarettes smoked and I am wondering if there is what you might call a safe quantum of cigarettes that you could smoke and not have this health hazard?

Dr. Josie: Mr. Chairman, the objective of our Department is to encourage people to stop smoking altogether and not to start smoking. It is a fact, however, as I think I mentioned, that the total death rates from lung cancer particularly increased with the amount smoked and that they are low in the under-10-a-day consumption figure. I would not like to imply from that that there is no harm, nor

[Interpretation]

M. Otto: Merci beaucoup.

M. Mather: J'aimerais poser une question supplémentaire, monsieur le président.

Le vice-président: Très bien.

M. Mather: Est-il exact qu'on nous a dit ici que la consommation des cigarettes et le taux de décès dus au cancer du poumon ont doublé entre les années 1950 et 1967-1968? Est-ce exact, monsieur le président?

M. Josie: J'ai manqué le début de la question.

M. Mather: J'aimerais avoir les faits précis, à ce sujet, parce que je crois que c'est important. Si j'ai bien compris, la consommation de cigarettes a doublé tout comme le nombre de décès dus au cancer entre 1950 et 1967. Est-ce à peu près exact?

M. Josie: Dans mon exposé, j'ai parlé du fait que le nombre de décès attribuables au cancer des poumons a triplé et que le pourcentage a doublé. Je crois que le docteur Colburn, en réponse à une question qui a été posée par un des membres du comité, a trouvé dans un tableau que la consommation de la cigarette a à peu près doublé pendant la même période. Nous pouvons peut-être confirmer ces chiffres, maintenant.

M. Colburn: Oui, c'est exact, bien que cela n'a pas exactement doublé. Pour établir un parallèle entre la consommation de la cigarette et le cancer du poumon il faut tenir compte de la consommation pendant les 20 ou 30 ans qui ont précédé et des changements survenus durant cette période avant que le cancer du poumon n'augmente dans la population.

M. Mather: Merci monsieur le président.

Le vice-président: Monsieur Robinson?

M. Robinson: J'éprouve des inquiétudes graves en ce qui concerne le nombre de cigarettes fumées. Je me demande s'il y a un certain nombre de cigarettes qu'on pourrait fumer sans courir de danger?

M. Josie: Monsieur le président, le but du ministère c'est d'encourager la population à cesser de fumer ou à ne pas commencer à fumer. Il est sûrement exact, et je crois l'avoir dit, que le taux de décès attribuables au cancer du poumon augmente selon le nombre de cigarettes fumées et qu'il est faible chez les personnes qui fument moins de 10 cigarettes par jour. Cela ne veut pas dire que

[Texte]

that there is a critical level that would be a safe level; we have no evidence to that effect.

Mr. Robinson: Putting it in a slightly different way, I think you indicated previously that the earlier you start to smoke the higher the mortality rate. If that is so, is there what you

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might call the age best to start smoking and the age best to stop smoking?

Dr. Josie: Mr. Chairman, if you made that age so late that you had died of something else then... In point of fact we are not aware of such factors and therefore we do not recommend any such critical levels.

Mr. Robinson: In relation to the chart I notice that from the age of about 45 to 49 the statistics would appear to be somewhat meagre and virtually meaningless as far as the non-smokers, as against the cigarette smokers only, are concerned. So to make the table worthwhile, from your other remarks it seems that one would have to start at age 55 to 59; and I note that the progression rate seems to be virtually the same from 55 to 59 up to 75 to 79. There does not seem to be any change at all.

Can I assume that over that period of 20 years the risk is no greater at the earlier age I mentioned than at the later age?

Dr. Josie: Mr. Chairman, I am not sure that I am best qualified to deal with this. Dr. Colburn may speak to it.

However, I think that one of the reasons for the discrepancy in the lower part of the graph—that is, the lack of a clear association—is related to the small number of deaths involved; and this is related in part, of course, to the numbers smoking and the numbers not.

The other thing is that there is this duration effect that Dr. Colburn referred to; that is, that it is a disease of a relatively long period of development, I believe, and for that reason shows up somewhat later.

It is true, as I mentioned in my comments, that all of the death rates are going up, but the fact is that the differential persists between the smokers and non-smokers and it is that differential that concerns us.

Mr. Robinson: Sir, what concerns me, as well, is the fact that the differential does not seem to be increasing. It has remained virtually the same.

An hon. Member: It is high above the other.

[Interprétation]

ça ne cause aucun dommage. Cela ne veut pas dire qu'il y a un niveau qui est un niveau sûr. Nous n'avons rien qui prouve cela.

M. Robinson: Je vais poser ma question sous une autre forme. Vous avez dit plus tôt, je crois, que plus on commence à fumer jeune, plus le taux de mortalité est élevé. Si tel est le cas, est-ce qu'il y a un âge où il est bon de commencer à fumer et un âge où il est bon de s'arrêter de fumer?

M. Josie: Si vous commencez à fumer suffisamment tard pour être déjà mort d'autre chose... Nous ignorons quels pourraient être ces facteurs, c'est pourquoi nous n'avancions aucun chiffre.

M. Robinson: D'après le tableau, je réalise que pour les personnes de 45 à 49 ans, les statistiques semblent n'avoir à peu près aucune signification en ce qui concerne les non-fumeurs, en comparaison des fumeurs. Par conséquent, d'après les autres observations que vous avez faites, il faudrait commencer à fumer à l'âge de 55 ou de 59 ans; je constate que le taux de progression soit à peu près le même de 55 à 59 jusqu'à 75 à 79.

Dois-je en supposer que le risque n'est pas plus grand pendant cette période de vingt ans?

M. Josie: Monsieur le président, je ne pense pas que je suis compétent pour donner une réponse à cette question. Peut-être le docteur Colburn pourra-t-il le faire. Je crois qu'une des raisons sans doute pour laquelle il y a un écart plus prononcé au bas du graphique, c'est-à-dire le manque d'une association claire, se rapporte au bas nombre des mortalités; et ceci se rapporte bien entendu, en partie aux nombres de ceux qui fument et de ceux qui ne fument pas. Il y a aussi la question de la durée des effets que le Dr Colburn a mentionnés; la plupart de ces maladies ont une période d'incubation assez longue et pour cette raison, les symptômes paraissent plus tard.

Comme je l'ai mentionné dans mon commentaire, c'est bien vrai que les taux de mortalité augmentent dans tous les cas, mais le fait que l'écart persiste entre les fumeurs et les non-fumeurs, et c'est cet écart précisément qui nous préoccupe.

M. Robinson: Ce qui me préoccupe aussi, en plus de l'écart, c'est que cet écart ne semble pas augmenter, qu'il est resté à peu près le même.

Une voix: Oui, mais il est plus élevé.

[Text]

Mr. Robinson: I realize it is high above the other, but it stays virtually the same from age 55 to about age 80. I am wondering just how meaningful this really is. Are we really coming to grips with the cause and effect of tars and nicotine? In terms of this graph, I have grave doubts about it, but I will leave that and go on to something else.

Do we have any statistics or information relative to your previous comment that the earlier one starts the worse it is? This graph starts at the age of 30. Do we have any statistics for children smoking at ages 12, 13, 14 or 15?

Dr. Josie: Mr. Chairman, I believe there is some recent evidence on the effect at the earlier ages. Some of the difficulty, of course, has been that you have to build up a good deal of experience before you can make statements with any certainty. It is relatively recently that from some of the larger studies in the United States we have built up enough experience among the younger ages to make any statements.

Perhaps it would be better for Dr. Colburn, if he would, to comment on that.

Mr. Colburn: There is very clear evidence that the younger children start to smoke the more likely they are to die of some smoking-related disease in later life.

When you are looking at the under 30, and so forth, this of course is deaths, not ages of starting to smoke.

Mr. Robinson: I appreciate that, but I think our concern here, Mr. Chairman, is to aim our remedies, if any, at the younger people who do not smoke at all and who, we hope, will never start. If that be so, it seems to me we should get all the statistics we can on the cause and effect of smoking; that is, the acquiring of the habit and the problems resulting from smoking at this early age. If we are going to carry out any kind of educational program we need to have this kind of information.

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Dr. Josie: Mr. Chairman, there is a real limitation, as I mentioned, in getting the information because of the duration of the effects and because of the smaller number smoking, and so on. There is, however, some information and I think this document entitled *The Health Consequences of Smoking* is one that you have received. From some of the recent larger studies they do go down to at

[Interpretation]

M. Robinson: Je me rends compte que le taux est plus élevé que pour l'autre, mais il demeure pratiquement le même de l'âge 55 jusqu'à l'âge d'environ 80. Je me demande si cela est vraiment significatif. Est-ce que nous attaquons vraiment les causes de maladie que représente la nicotine? Aux termes du graphique, j'en doute, mais je vais passer à un autre sujet.

Avons-nous des données statistiques ou des renseignements au sujet de votre commentaire précédent que plus vous commencez tôt, plus c'est pire. Ici, je vois que le graphique ne commence qu'à l'âge de 30 ans. Avons-nous des données statistiques au sujet des enfants ou des adolescents, par exemple, qui contractent l'habitude de fumer à l'âge de 12, 13, 14 ou 15 ans?

M. Josie: Monsieur le président, je crois que nous avons des preuves récentes sur les effets en bas âge. Encore une fois, c'est qu'il faut faire beaucoup de constatations avant de pouvoir obtenir des résultats positifs. Ce n'est que très récemment aux États-Unis qu'on a accumulé suffisamment d'expérience et d'échantillons parmi les jeunes pour en venir à des données statistiques. Je vais demander au docteur Colburn des commentaires.

M. Colburn: Il y a des preuves montrant clairement que plus tôt les enfants commencent à fumer, plus ils risquent de mourir de certaines maladies provoquées par cette habitude plus tard.

Lorsque vous considérez les moins de 30 ans, et ainsi de suite, il s'agit de mortalités et non de l'âge où on a commencé à fumer.

M. Robinson: Je reconnais cela, mais ce qui nous préoccupe, monsieur le président, c'est d'essayer surtout de viser les jeunes qui ne fument pas pour qu'ils ne contractent pas l'habitude. S'il en est ainsi, il me semble que nous devrions obtenir toutes les statistiques possibles sur les causes et les effets de l'habitude de la cigarette et aussi sur les problèmes résultant de l'habitude de la cigarette dans la jeunesse. Pour qu'un programme d'éducation soit efficace, il faut que nous ayons ce genre de renseignements.

M. Josie: Monsieur le président, nous nous butons évidemment à des restrictions en raison de la durée des effets et en raison du plus petit nombre de gens qui fument durant leur jeunesse. Je crois que vous avez reçu un document intitulé «La cigarette et ses effets nocifs».

D'après certaines des études plus considérables qui ont été faites, on remonte au moins

[Texte]

least 25 years, and Hammond has an estimate, for instance, of the effects on life expectancy of smokers at age 25 and shows that there is a differential of from about seven or eight years to three or four years, depending on the amount smoked as at age 25.

If we do build up experience from surveys extending down into the years—if the smoking habit persists down into the years—we will have this kind of information. Meanwhile, we operate believing that our program should be directed, as you suggested, sir, especially at young people. They were our priority group. We have made special efforts to dissuade young people from starting to smoke.

The Vice-Chairman: Mr. Robinson, was your question whether the Department had any information on whether it is more serious if a person starts to smoke when very young? Is that what you wanted to know?

Mr. Robinson: Yes; that was part of it. I thought he was answering as well as he could.

Dr. Josie: Mr. Chairman, I think the answer to that is yes, although our information is recent and fairly meagre.

The other part of the question was whether there was a hazard among the quite young. I think that was it. Because you are asking this specific question I think it would be well for us to see if we cannot provide you with some specific data on the effects among the youngest people on whom we can get valid data.

Dr. Colburn: There are studies that indicate that even children, and certainly young adults, who smoke, show an increased incidence of respiratory illness, absenteeism from school, changes in pulmonary function and of cough and phlegm production. These have been studies carried out in England. One or two have been carried out in Canada and in the United States, as well.

Mr. Robinson: Mr. Chairman, can either of these gentlemen tell me if there are any statistics on the increased amount of advertising of cigarettes over the years in relation to the number of cigarettes consumed?

The Vice-Chairman: Who would like to answer that?

Dr. Colburn: I do not have any helpful information on that, sir.

Mr. Robinson: We have no information on whether there is any correlation between the number of cigarettes smoked and the amount of advertising of cigarettes.

[Interprétation]

jusqu'à l'âge de 25 ans. Il y a ici une évaluation des effets sur l'espérance de la vie pour le fumeur à l'âge de 25 ans. On montre qu'il y a une différence de 7 à 8 ans à 3 à 4 ans, selon le nombre de cigarettes fumées à compter de l'âge de 25 ans.

Par conséquent, si nous accumulons des expériences à partir des relevés, si l'habitude de la cigarette persiste, nous aurons ce genre de renseignements. Entre-temps, nous croyons que notre programme devrait, comme vous l'avez signalé, viser surtout les jeunes. C'est le groupe vraiment prioritaire. Nous avons fait des efforts pour essayer de dissuader les jeunes de commencer à fumer.

Le vice-président: Avez-vous demandé si le ministère a des renseignements, à savoir si une personne commence à fumer plus jeune, qu'elle courra plus de risques?

M. Robinson: C'est une partie de la question, oui. J'ai cru qu'il répondait aussi bien qu'il le pouvait.

M. Josie: Monsieur le président, je crois que la réponse à cette question, c'est oui, bien entendu. Cependant, nos renseignements sont encore récents et minces. Il y a d'autres parties de la question, savoir qu'il y a des risques sûrement chez les plus jeunes. Le fait que vous posez cette question précise devrait nous inciter à voir si nous pouvons fournir des données précises aussi sur les répercussions sur les très jeunes fumeurs, à condition de pouvoir en obtenir.

M. Colburn: Il y a certains relevés indiquant que les enfants et les jeunes adultes fumeurs ont une incidence accrue de maladies respiratoires, d'absences de l'école, changements de fonction pulmonaire, incidences aussi de toux. Ce sont des études qui ont été faites en Angleterre, ainsi qu'au Canada et aux États-Unis.

M. Robinson: Je me demande, monsieur le président, si l'un de ces deux témoins pourrait nous dire s'il y a des statistiques sur l'augmentation de la publicité consacrée à la cigarette dans le passé comparativement à l'augmentation de la consommation?

Le vice-président: Qui aimerait répondre à cette question?

M. Colburn: Je n'ai pas de renseignements utiles là-dessus.

M. Robinson: Nous ignorons s'il y a une corrélation entre le nombre de cigarettes fumées et le degré de réclame consacrée à la cigarette.

[Text]

Dr. Josie: There may be such information. We are not in a position to produce it for you.

Mr. Mather: Mr. Chairman, I have some figures on that which, very briefly, are to the effect, sir, that this year the American—

The Vice-Chairman: Just a moment, Mr. Mather. You have some figures. What are the figures from? Can you quote the publication?

Mr. Mather: I am quoting from a report made to this Committee at the last meeting by the witness representing the CBC, in which he said he was surprised to find that the American cigarette industry was placing a ban on advertising because their advertising totalled something like \$400 million. I have that figure. For 1920 I estimate it might be 10 per cent of that figure—

The Vice-Chairman: That is your own information. I think Mr. Robinson wanted to know if we had any study. Is what you have just quoted already in the reports?

Mr. Mather: We had a report on this at the last meeting.

The Vice-Chairman: But there is no such study, so far as you are aware, Dr. Josie? Is that correct?

Dr. Josie: I am saying, Mr. Chairman, that we are unable to produce the data now. It is quite likely that there are some figures and, if you like, we could produce them; but it is possible that others are better equipped.

Mr. Robinson: Mr. Chairman, I would be interested in having any of this kind of information that may be available, because once again I think part of the remedy that we are seeking is to curtail advertising in this field.

The Vice-Chairman: The Chair will discuss the matter with the Department, and if there is such a study it will be made available to the members.

Mr. Robinson: I have no further questions at this time, Mr. Chairman.

Mr. Yewchuk: I have a question supplementary to Mr. Robinson's.

The Vice-Chairman: It is a supplementary, is it?

Mr. Yewchuk: Yes; and I wish to address it to Dr. Colburn who mentioned production of phlegm as related to smoking.

Is there any significance to the fact that certain patients produce more sputum than others as a result of smoking? Does this mean

[Interpretation]

M. Josie: Ces renseignements existent peut-être mais nous ne sommes pas en mesure de vous les présenter.

M. Mather: Monsieur le président, j'ai certains chiffres à ce sujet qui, en bref, disent, monsieur, que cette année l'industrie américaine...

Le vice-président: Un moment, monsieur Mather. Vous avez certains chiffres. D'où viennent-ils? Pouvez-vous citer la source?

M. Mather: Je cite un rapport présenté au comité à la dernière réunion par le témoin représentant de Radio-Canada, dans lequel il a dit qu'il était surpris de constater que l'industrie de la cigarette des États-Unis imposait une interdiction à la réclame, car leur réclame représente 400 millions de dollars. C'est le chiffre que j'ai devant moi. Pour 1920, ce serait peut-être 10 p. 100 de ce chiffre...

Le vice-président: Ce sont vos propres renseignements. Je crois que M. Robinson voulait savoir si nous avions une étude. Est-ce que ce que vous venez de citer est déjà dans les rapports?

M. Mather: C'est un rapport qu'on a présenté à la dernière réunion.

Le vice-président: Pour autant que que vous le sachiez, il n'y a pas de relevé de ce genre. Est-ce exact, monsieur Josie?

M. Josie: Ce que je déclare, monsieur le président, c'est que nous ne sommes pas en mesure de produire ces données maintenant. Nous pouvons néanmoins aller aux renseignements. Nous pourrions peut-être le faire après avoir été aux recherches.

M. Robinson: Tout genre de renseignements de cet ordre nous seraient très utiles car dans une certaine mesure je crois que le remède que nous cherchons c'est de réduire la publicité.

Le vice-président: Le président va discuter de la question avec le ministère, et si un relevé de ce genre existe il sera mis à votre disposition.

M. Robinson: Je n'ai pas d'autres questions pour le moment, monsieur le président.

M. Yewchuk: Une question supplémentaire.

Le vice-président: Une question supplémentaire?

M. Yewchuk: Oui; et je veux l'adresser au Dr. Colburn qui a mentionné que la production de phlegme se rattache à la consommation du tabac.

Y a-t-il une connection entre le fait que certains malades produisent plus de crachat

[Texte]

anything? In other words, are those who produce a lot of it more likely to get cancer than those who do not produce any?

Dr. Colburn: There have been some studies of this, but there has been no final evidence on whether those who have more cough and sputum have a higher risk of getting lung cancer. Our Research and Statistics division and our Epidemiology Division are studying this at the moment and hope to contribute something to this.

The Vice-Chairman: I now recognize Mr. Howe.

Mr. Howe: Mr. Chairman, these are very interesting statistics. We have been talking about youthful people who are smoking. I am rather interested in this 80-plus group. After all the warnings we have had about smoking and about the heart conditions and lung cancer that are created it is always amazing to me to see an old man of 80-plus pull out his package of cigarettes and smoke them. It is almost a phenomenon that he has been able to wend his way through life and still be living. Is there any reason for this? Is it the fact that he is stronger and healthier to start with than most people, or why would he be able to live and still smoke at the age of 80?

Dr. Josie: Mr. Chairman, there are a lot who do not live to enjoy both cigarette smoking and age 80.

Mr. Howe: No, I know that, but there are some.

Dr. Josie: There are some. There are differences, of course, among people in their response and there are certainly differences in the nature of their habit. I think I can go no further than that. Dr. Colburn may have something to add.

Mr. Howe: Does the body build up some type of resistance?

Dr. Josie: I think it is more likely to be associated with one's inherent longevity.

Dr. Colburn: I really have very little to add to that except that I would agree with Dr. Josie that there would be some differences in the way people smoke, and certainly there are differences between individuals as to how they would react to the cigarettes and smoke.

Mr. Howe: My other question, Mr. Chairman, is in connection with smoking and health. All of these studies are made from surveys. Is there any medical proof the Department has that these deaths from lung cancer and heart conditions can be linked

[Interprétation]

que d'autres et le fait qu'ils fument ou ne fument pas? Cela veut-il dire quelque chose? En d'autres termes, est-ce que ceux qui en produisent plus sont plus susceptibles au cancer que ceux qui n'en produisent pas?

M. Colburn: Il y a eu certains relevés qui ont été effectués, mais les résultats ne sont pas définitifs, à savoir si ceux qui ont le plus de toux et de crachats risquent de contracter davantage le cancer du poumon. Notre Division de la recherche et de la statistique et notre Division de l'épidémiologie étudient la question en ce moment et espèrent y contribuer.

Le vice-président: J'ai maintenant sur ma liste M. Howe.

M. Howe: Monsieur le président, ces statistiques sont intéressantes. Nous avons parlé des jeunes qui fument. Je suis plutôt intéressé au groupe des plus de 80. Après tous les avertissements que nous avons eu au sujet des méfaits du tabac en ce qui concerne le cœur et le cancer du poumon, la question me surprend toujours. C'est presque un phénomène qu'il ait pu atteindre cet âge et qu'il soit encore en vie. Quelle en est la raison? Est-ce parce qu'au départ, il est plus fort et en meilleure santé que la plupart des gens? Comment peut-il être encore en vie et fumer à 80 ans?

M. Josie: Monsieur le président, nombreuses sont les personnes qui ne peuvent jouir de la vie et de la cigarette jusqu'à 80 ans.

M. Howe: Je le sais, mais il y en a.

M. Josie: Il y en a. Il y a des différences dans les réactions, dans les habitudes. Je ne pense pas que je puisse aller plus loin que cela. Le docteur Colburn a peut-être quelque chose à ajouter.

M. Howe: Est-ce que le corps ne pourrait pas acquérir une espèce de résistance?

M. Josie: Je crois que cela pourrait plutôt dépendre de la longévité de chaque individu.

M. Colburn: J'aurais très peu de choses à ajouter. Je suis d'accord avec le docteur Josie lorsqu'il dit qu'il y a peut-être certaines différences dans la façon dont les gens fument et il y a sûrement des différences dans les réactions individuelles.

M. Howe: Eh bien, monsieur le président, en ce qui a trait à l'usage de la cigarette et de la santé, tous ces résultats découlent de relevés qui ont été faits. Le ministère a-t-il des preuves médicales directes pour établir que ces décès attribuables au cancer du poumon

[Text]

directly with cigarette smoking, or is it just statistics and surveys and things like that?

Dr. Josie: Mr. Chairman, Dr. Colburn is better able to cope with that, but I think I would say that the kind of evidence we have talked about is the kind of evidence we rely on. On the other hand, I am not sure what kind of link you would expect to have demonstrated. We do have a good deal of information from experimental and pathological work about the mechanisms of the action of the cigarette smoke and its constituents in the body and on its mechanism and on its function. I think it is that probably you are alluding to and there is a good deal of evidence documented on that so that the story, at least for lung cancer, is really quite complete and convincing.

Dr. Colburn: I think there is as much evidence in regard to the relationship between lung cancer and cigarette smoking and this clinical cause and effect as in any other and the only thing that would be missing—and it is quite impossible—would be to take a group of people and actually experiment on them or decide when they were children that some should smoke and some should not and perhaps follow them through, and even then you might have some problems. I feel that short of that we have all the other evidence. There is a great deal of clinical evidence, as Dr. Josie has indicated, in animal experimentation showing the effects of cigarette smoke on tissues.

• 1655

Mr. Howe: That is still going on, is it not?

Dr. Colburn: Oh yes, this is being carried on and I think in some areas, certainly in relation to smoking and heart disease, it is being expanded fairly rapidly to try to get at some of the biological mechanisms by which cigarette smoking specifically increases the risk of heart attack.

Mr. Howe: You would probably have to segregate those people and you would not let them eat any animal fats in the meantime, or you might find it attributable to cholesterol, the animal fat.

With regard to types of cigarettes—the homemade ones, the filters and the non-filters—the statement by the Minister and the statement in this book by the Department of National Health and Welfare say the same thing, that it would not be feasible absolutely to ban the use of cigarettes, because they would be brought in from other countries. I

[Interpretation]

et à des déficiences cardiaques sont directement causés par la cigarette ou s'agit-il uniquement de statistiques, d'enquêtes, etc.?

M. Josie: Monsieur le président, le docteur Colburn pourra peut-être donner une meilleure réponse que je ne saurais le faire moi-même. Je crois que je puis dire, pour ma part, que le genre de preuves dont nous parlons est ce genre de preuves sur lesquelles nous nous basons. J'ignore quel lien vous voudriez que nous établissions. Nous avons évidemment beaucoup de résultats du travail pathologique et expérimental au sujet de l'influence de la cigarette sur le mécanisme biologique et sur les fonctions biologiques du corps humain. C'est sans doute ce à quoi vous songez. Il y a évidemment beaucoup de documentation là-dessus, dans le cas du cancer de poumon, et je crois que le dossier est assez complet et convaincant.

M. Colburn: Je crois qu'il y a autant de preuves là-dessus, notamment dans le cas du cancer des poumons, que pour toute autre maladie. Il faudrait prendre un groupe de personnes et faire des expériences sur elles ou décider alors qu'elles sont lesquelles peuvent fumer ou non, et les garder ensuite sous observation, mais encore là peuvent surgir des problèmes. Sauf pour ces expériences, nous avons toutes les autres preuves. Comme l'a indiqué le docteur Josie, il y a les résultats de ces expériences tentées sur les animaux et qui indiquent les effets de la fumée de cigarette sur les tissus.

M. Howe: Et ces expériences se poursuivent?

M. Colburn: Oui, sûrement, ce travail se poursuit. Dans le domaine du tabac et des maladies du cœur, je crois que les travaux s'intensifient pour essayer de déterminer exactement les réactions biologiques de l'utilisation du tabac.

M. Howe: Il faudra peut-être séparer ces gens. Il ne faudrait peut-être pas que ces gens consomment de graisse animale, entre-temps car cela pourrait faire augmenter le niveau de cholestérol.

Quant aux diverses sortes de cigarettes, (les cigarettes roulées, les cigarettes avec filtre, les cigarettes sans filtre) le ministre et le rapport que nous avons du ministère de la Santé nationale et du Bien-être social affirment tous deux qu'il serait impossible d'interdire l'usage de la cigarette. Il faut des enquêtes et des études et des émissions de télévision pour

[Texte]

feel not only do we have to have surveys and studies and television shows telling people about the dangers, but we must find, if possible, the safest cigarette. Has the Department any information on this other than that recent survey that was done at the University of Waterloo?

Dr. Colburn: So far as the safety of various types of cigarettes is concerned, there is a considerable amount of experimental evidence of the degree of cancer production of various types of tobacco and cigarettes, and there was a recent study reported at the Roswell Park Hospital in Buffalo—the cancer hospital—on the decreased lung cancer among patients who smoked filter cigarettes.

Mr. Howe: They had an advantage over the non-filters?

Dr. Colburn: That is right; that was just the general category of filter versus non-filter.

Mr. Howe: Then, of course, we get into the question of the ladies and the men. Apparently the ladies do not smoke their cigarettes down as far as the men do. However, there were a couple of more questions I wanted to ask. In the research, tar and nicotine are the bad boys in the cigarette smoke, are they not? Has that been proven? Which one is worse than the other?

Dr. Colburn: Generally, so far as cancer production is concerned, it is the tar fraction exclusive of nicotine which is generally considered to be important. There is some recent indication from a study in Switzerland that the gas phase may have some significance in cancer production. We have not received a copy of this particular study to examine but we are trying to get that now.

Mr. Howe: Did you say "gas phase?"

Dr. Colburn: Yes. I do not know whether you have heard of this study of Dr. Leuchtenberger in Switzerland.

Mr. Howe: Where would the gas come from, the paper or the cigarette?

Dr. Colburn: The gas phase of the tobacco smoke. There is a considerable gas component of the cigarette smoke which includes carbon monoxide and various types of gases.

Mr. Howe: Would some of this dangerous, noxious substance come from the paper?

Dr. Colburn: A small proportion of it would, because paper is organic like the tobacco but proportionately it is not considered to be very significant. It is the tobacco that would be the major factor in producing

[Interprétation]

avertir le public des dangers inhérents à la cigarette, mais il faut également, si possible, trouver la cigarette la plus inoffensive. Le ministère possède-t-il des renseignements autres que ceux fournis par l'enquête menée récemment à l'université de Waterloo?

M. Colburn: En ce qui concerne le facteur sécurité des divers genres de cigarettes, il existe un grand nombre de données expérimentales sur les effets des diverses sortes de tabacs et de cigarettes. Un rapport, publié récemment à l'Hôpital Roswell Park de Buffalo, démontre que l'incidence du cancer est moins grande chez les personnes qui fument des cigarettes à bout-filtre.

M. Howe: Par opposition aux cigarettes sans filtre?

M. Colburn: Oui. Il ne s'agit que d'une comparaison générale entre les cigarettes sans filtre et les cigarettes à bout-filtre.

M. Howe: Il y a également la comparaison entre hommes et femmes. Il semble que les femmes ne fument pas les cigarettes jusqu'au bout, comme les hommes. Il y a quelques autres questions que j'aimerais poser. D'après ces recherches, le goudron et la nicotine sont ce qu'il y a de plus nocif dans la fumée de cigarette, n'est-ce pas? Cela a-t-il été prouvé? Lequel est le plus nocif?

M. Colburn: En ce qui concerne la cause du cancer, c'est la fraction goudron sans la nicotine. Certaines indices, d'après des études qui ont été faites en Suisse, montrent que la phase dite du gaz peut également avoir de l'importance en ce domaine. Nous tentons présentement d'obtenir une copie de ce rapport.

M. Howe: Avez-vous dit la phase du gaz?

M. Colburn: Oui. J'ignore si vous avez entendu parler de cette étude du docteur Leuchtenberger, en Suisse.

M. Howe: D'où vient ce gaz? Du papier ou de la cigarette elle-même?

M. Colburn: C'est le gaz provenant de la fumée du tabac. On le trouve en grande quantité dans la fumée de cigarette qui renferme du monoxyde de carbone et différents genres de gaz.

M. Howe: Est-ce que certaines de ces substances nocives pourraient venir du papier?

M. Colburn: Une petite proportion peut-être, car le papier est un élément organique, mais proportionnellement ce n'est pas tellement considérable. C'est le tabac lui-même, surtout, qui produit ces gaz et le goudron.

[Text]

the gases and any of the tar that is in the smoke.

Mr. Howe: I see. In this paper that we got from the Department, Report on Cigarette Smoking and Health, December 19, 1968, on page 4 there is a paragraph headed Cigarette Dependence that divides cigarette smokers into two categories with regard to their dependence on smoking. In one category it is the psycho-social factors that appear to predominate. Have you seen this? Did you help to prepare it? Could you elaborate on it?

• 1700

Dr. Colburn: This particular category of smokers appears to be the person who smokes because perhaps he wants something to do with his hands. He may want to enjoy the company of other people. He may enjoy the association of smoking with meals or with other activities or a drink. He does not seem to have the intense personal need for smoking that another person of the other category might have.

Mr. Howe: Is a very large percentage of smokers these psycho-social people?

Dr. Colburn: Yes.

Mr. Howe: They may start off that way, but do very many of them stop?

Dr. Colburn: Yes, I think this is a fair question and certainly if you take younger people and teenagers psycho-social factors would be dominant until they had established some stronger dependency on the smoking, but even so there are some that maintain the psycho-social component is the major one and they seem to have less difficulty in giving up smoking.

Mr. Howe: I presume they never inhale.

Dr. Colburn: This may or may not be so, sir.

Mr. Howe: Of course the second one answers the question I have been asking. It says:

...In the other category, the dependence is harder to break and symptoms may be severe. In the latter group the dependence may have a pharmacological element.

It also says:

...Nicotine is generally accepted as the major factor in this type of dependence.

In other words, nicotine acts just like a drug: they feel a need for it and return to it.

[Interpretation]

M. Howe: Dans ce document que le ministre nous a remis, *Rapport sur la cigarette et la santé* [19 décembre 1968] le paragraphe intitulé «Cigarette et dépendance», à la page 4, divise les fumeurs en deux catégories selon leur dépendance vis-à-vis de la cigarette. Dans l'une des catégories, ce sont des facteurs psycho-sociaux qui semblent prédominer. Avez-vous vu ce rapport? Avez-vous travaillé à sa préparation? Pouvez-vous élaborer?

M. Colburn: Il semble que cette catégorie de fumeur représente surtout celui qui fume parce qu'il veut faire quelque chose avec ses mains; il aime peut-être la compagnie d'autres personnes; il aime peut-être fumer après son repas ou en mangeant ou en buvant; il ne semble pas avoir un besoin intense de la cigarette comme les gens d'autres catégories.

M. Howe: Est-ce que cette catégorie renferme une proportion élevée de fumeurs?

M. Colburn: Oui.

M. Howe: Bon nombre de gens commencent de cette façon, mais sont-ils nombreux ceux qui arrêtent?

M. Colburn: Je crois que c'est là une question assez juste. Je crois que les facteurs psycho-sociaux sont les plus importants pour les adolescents jusqu'à ce que leur dépendance de la cigarette provienne d'ailleurs. Mais ceux chez qui ces facteurs psycho-sociaux continuent de prédominer ont moins de difficulté à abandonner l'usage de la cigarette.

M. Howe: Je suppose que ces gens n'aspirent pas la fumée?

M. Colburn: Peut-être que oui, peut-être que non.

M. Howe: Je crois que la deuxième partie répond à la question que j'ai posée. Elle dit:

Dans l'autre catégorie, il est plus difficile de se défaire de l'habitude et les symptômes peuvent être graves. Dans ce dernier groupe, la dépendance peut comporter un élément pharmacologique.

Et, on ajoute:

La nicotine est généralement considérée comme le facteur principal de cette carte de dépendance.

Autrement dit, la nicotine est un peu comme une drogue; on y revient parce qu'on en sent le besoin.

[Texte]

Dr. Colburn: This is generally accepted. More research is needed and is being carried out on this, but it has been shown that people who smoke and enjoy smoking get similar satisfaction from nicotine. There has also been some evidence that the various physiological effects of smoking on the heart, on increases in steroids coming from the adrenal gland and so forth, can be simulated by inhalations of nicotine as well as by smoking.

Mr. Howe: Then the answer to this problem is do not start, and those that do, smoke the safest cigarette they can obtain.

Dr. Colburn: Particularly the first, sir.

Mr. Howe: Those are all the questions I have.

The Vice-Chairman: Thank you, Mr. Howe. Mrs. MacInnis, you are next.

Mrs. MacInnis (Vancouver-Kingsway): I would like to go back to this survey that was made in a number of countries and from which your figures are drawn. Some of these countries presumably were more industrialized than others and they may have drawn their material from different parts of the country. Has there been any evidence in the survey to indicate whether cigarette smoking has a worse effect under industrial conditions than in rural areas?

Dr. Josie: Not in those precise terms. However, I believe, there have been studies which showed that cigarette smoking is, if you like, an additive factor to the industrial factor in an industrial environment or in an urban versus a rural environment. However, as far as urban-rural comparisons are concerned, the smoking factor definitely predominates over the straight environmental pollution factor. But there are some occupations with relatively high rates. Perhaps Dr. Colburn might add to this, because I believe here is some suggestion of a strengthening effect of this cigarette smoking habit.

Mrs. MacInnis (Vancouver-Kingsway): What I am trying to get at is whether or not the dangers of cigarette smoking are compounded by such factors as air pollution, fumes of cars, industrial gases and so on. In other words, has the hazard of cigarette smoking grown worse as other industrial factors have been introduced?

Dr. Josie: I think the answer to that is yes, but I would not be able to substantiate it at the moment. I think Dr. Colburn could add to his aspect of it.

[Interprétation]

M. Colburn: C'est un fait généralement reconnu. Les recherches sont toujours en cours, mais il a été prouvé que ceux qui fument et qui en jouissent, tirent une satisfaction semblable de la nicotine. Certaines preuves montrent que certains effets physiologiques du tabac sur le cœur, de la sécrétion accrue des glandes surrénales, sont produits par l'inhalation de nicotine aussi bien que par l'usage du tabac.

M. Howe: La réponse à ces difficultés est de ne pas commencer à fumer, et que ceux qui commencent à fumer, fument les cigarettes les plus sûres possibles.

M. Colburn: La première solution est sans doute la meilleure.

M. Howe: Ce sont toutes les questions que j'avais à poser.

Le vice-président: Merci, monsieur Howe. M^{me} MacInnis?

Mme MacInnis (Vancouver-Kingsway): Je voudrais en revenir à l'enquête qui a été faite dans certains pays dont vos chiffres sont tirés. Certains de ces pays étaient sans doute plus industrialisés que d'autres et ont tiré leurs données de différentes régions du pays. L'enquête apporte-t-elle des preuves selon lesquelles l'usage du tabac a des conséquences plus graves dans des régions industrialisées que dans des régions rurales?

M. Josie: Pas en termes si précis. Des études ont montré, je crois, que l'usage du tabac s'ajoute au facteur industriel dans un milieu urbain. En ce qui concerne la différence entre la campagne et la ville, le facteur du tabac est plus sérieux que le facteur de pollution en général. Certaines professions présentent des taux relativement élevés. Le docteur Colburn pourrait ajouter, je crois, que l'habitude du tabac tend à s'enraciner.

Mme MacInnis (Vancouver-Kingsway): Je voudrais savoir si les dangers du tabac sont multipliés par des facteurs comme les gaz industriels, les gaz d'échappement des automobiles et la pollution atmosphérique; autrement dit, est-ce que les gens fument de plus en plus lorsqu'ils sont soumis à ces facteurs industriels.

M. Josie: J'aimerais pouvoir répondre mais pour l'instant, je ne dispose pas des données nécessaires. Le docteur Colburn pourrait peut-être y répondre.

[Text]

Dr. Colburn: There is good evidence that people who smoke have an increased risk of getting more lung cancer or chronic respiratory disease—bronchitis and emphysema—from occupational air pollution, and primarily this is where the studies are being carried out, and that the two things together tend to compound. There will be an increase in the case of non-smokers exposed to uranium or asbestos, smokers who are not exposed to these things will have an increase in their lung cancer rate, but if you take the smoking and the asbestos together there will be a very marked increase in the incidence of lung cancer. Similarly, in respect of bronchitis and emphysema, non-smokers exposed to dust and so forth seem to be effected by this in the same way as those who smoke. And if you compare cities or communities in England and in the United States, there is very little difference in the non-smokers' rates between the two countries. When you start looking at the smokers though, you will find that those living in London have a lot more chronic bronchitis and emphysema than smokers who live in the United States. I think this is shown very nicely in this book.

The Vice-Chairman: What is the name of the book?

Dr. Colburn: The World Conference on Smoking & Health report which we handed out before.

Mrs. MacInnis (Vancouver-Kingsway): Was any record kept at the time of the disastrous London fog, when a great many deaths occurred because of congestion and so on?

Dr. Colburn: I am not aware of any, but I know that when they recently had a lot of smog in Los Angeles doctors advised people to cut down markedly on their smoking so that it would not complicate their hazard through smoking. I think this advice was issued by the California Medical Association or California's Department of Health.

Mr. Mather: I have one supplementary, on this point Mr. Chairman, if Mrs. MacInnis would permit it.

Mrs. MacInnis (Vancouver-Kingsway): Go ahead.

Mr. Mather: Is not a classic example of what you are talking about here, Doctor the Channel Islands, where people smoke heavily. I understand there is very little air pollution in the Channel Islands and yet the death rate from these types of diseases is high.

[Interpretation]

M. Colburn: Il y a des preuves selon lesquelles les personnes qui fument sont plus aptes à contracter le cancer du poumon et des maladies respiratoires comme la bronchite lorsqu'ils sont par profession soumis à la pollution atmosphérique et les études cherchent à trouver si ces deux éléments ont tendance à se multiplier. Le taux sera plus élevé pour les gens qui sont exposés à l'uranium ou à l'amiante, et également chez ceux qui sans y être exposés, fument, mais si les gens sont exposés à la fois au tabac et à l'amiante, il y aura une augmentation marquée du taux de cancer du poumon et de même pour la bronchite et l'emphysème, ceux qui ne fument pas mais sont exposés aux poussières sont affectés d'une façon semblable à ceux qui fument. Si l'on compare les villes des non-fumeurs d'Angleterre, il y a très peu de différence dans le taux. Pour les fumeurs cependant, on verra que les fumeurs de Londres souffrent beaucoup plus de bronchite et d'emphysème que ceux des États-Unis. Je crois que ce livre le démontre très bien.

Le vice-président: Quel est le titre de ce livre?

M. Colburn: Le rapport de la Conférence Mondiale sur le tabac et la santé que nous avons distribué.

Mme MacInnis (Vancouver-Kingsway): Lors du «smog» désastreux de Londres, il y a eu de nombreux décès en raison de congestion, et ainsi de suite, est-ce qu'on a noté les chiffres à ce moment-là?

M. Colburn: Je ne le sais pas, mais cela s'est produit récemment à Los Angeles lorsqu'il y avait beaucoup de brumes industrielles. Les médecins ont demandé aux gens de fumer moins de façon à ne pas aggraver les risques. Je crois que c'est le ministère de la santé de la Californie ou l'Association médicale de la Californie qui a fait cette recommandation.

M. Mather: Une question supplémentaire sur ce point, si Mme MacInnis me le permet.

Mme MacInnis (Vancouver-Kingsway): Je vous en prie.

M. Mather: Est-ce que les Îles de la Manche ne constituent pas un exemple classique de ce dont nous parlons avec ses gros fumeurs? Je crois comprendre qu'il n'y a pas de pollution atmosphérique, et que, malgré tout, le taux de mortalité de ces maladies est élevé.

[Texte]

Dr. Colburn: That is correct. Iceland is another example of a country where smoking has increased, particularly in the last 20 or 30 years, and there is no recognized air pollution.

Mrs. MacInnis (Vancouver-Kingsway): I have been very interested in the smoking effects as between men and women. Of course I do not know whether this is going to prove too mysterious when the work habits of men and women, are considered because most women are still busy going about their house work and that sort of thing most of the day and are not sitting around a table waiting for things to happen. I think that a great deal of this will be discovered to reside in the living habits of the majority of men and women.

However, I want to find out, if I can, what the effects on human tissue are. In other words, can the fact that a woman smokes hard from the time she is a young girl, have any effect on her unborn children?

Dr. Colburn: It is well recognized now that women who smoke during pregnancy tend to have smaller babies than those who do not smoke. The actual significance of this is just being elucidated now though because it does not necessarily mean because the baby is smaller that it has a higher risk of mortality—in fact it may be favored. But there is some evidence now that maybe these babies do have a sort of a strike against them as they go along. There is a man in Canada now studying this particular thing. He is also concerned whether or not these babies, because they are smaller, have smaller cells or fewer cells, the implication being that if they had fewer cells they may well have some mental retardation and other things. This is being studied now.

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Mrs. MacInnis (Vancouver-Kingsway): There is no evidence on that yet?

Dr. Colburn: No, not from human studies that I am aware of.

Mrs. MacInnis (Vancouver-Kingsway): There is just one more area I want to cover. I have seen figures from the other side of the border on the incidence of smoking, using groups of young teenagers A) who have two parents who smoke, B) who have one parent who smokes and C) whose parents do not smoke at all. Now the American figures show that there are more teenage smokers where one parent smokes than where neither parent smokes, and still more where both parents smoke. Have we similar Canadian figures?

[Interprétation]

M. Colburn: C'est exact. L'Islande est un autre exemple de pays où l'on fume de plus en plus, en particulier depuis 20 au 30 ans, et où il n'y a pas de pollution atmosphérique.

Mme MacInnis (Vancouver-Kingsway): J'ai été très intéressée par l'étude des effets sur les hommes et les femmes. Cela ne sera peut-être pas aussi mystérieux lorsqu'on tient compte du fait que les habitudes de travail des hommes et des femmes sont différentes. Les femmes travaillent presque toute la journée à la maison et ne sont pas assises devant une table toute la journée à attendre les événements. Tout cela se ramène finalement à la façon de vivre des hommes et des femmes.

Je voudrais cependant savoir ce que vous pensez des effets sur les tissus humains. Autrement dit, est-ce que le fait qu'une femme fume beaucoup depuis son adolescence peut avoir un effet sur les enfants qu'elle aura?

M. Colburn: Il est reconnu que les bébés des femmes qui fument durant la grossesse sont plus petits que ceux des femmes qui ne fument pas. On en étudie présentement la signification réelle de cela et ce n'est pas parce que le bébé est petit que le risque de mortalité est plus élevé. Mais, on constate maintenant que ces bébés sont peut-être désavantagés à mesure qu'ils grandissent. Un canadien étudie la question en ce moment. Il essaie également de savoir si, parce que ces bébés sont plus petits, ils ont moins de cellules ou des cellules plus petites, car s'ils ont moins de cellules, cela reviendrait à dire qu'ils sont peut-être retardés ou autre chose. C'est à l'étude.

Mme MacInnis (Vancouver-Kingsway): Mais il n'y a pas encore de preuves à cet effet?

M. Colburn: Non, pas en ce qui concerne des études menées sur les hommes.

Mme MacInnis (Vancouver-Kingsway): Il y a un autre domaine sur lequel je voudrais m'arrêter. J'ai vu les chiffres des États-Unis sur l'incidence du tabac, au moyen de groupes d'adolescents a) dont le père et la mère fument, b) dont le père ou la mère fume, et c) ceux dont les parents ne fument pas du tout. Les chiffres indiquent qu'il y a plus d'adolescents qui fument lorsque le père ou la mère fument et encore plus lorsque des parents fument tous les deux. Y a-t-il des chiffres canadiens semblables?

[Text]

Dr. Josie: Mr. Chairman, the little reference book that we gave out awhile ago included a couple of studies that had been made of students' smoking habits. I have not refreshed my memory on this for sometime, but in Barrett's paper—that was the Calgary one—he shows in Table 6 on page 165 of this book the influence of smoking habits of parents on smoking habits of students. That is, I think, what you are asking about, Mrs. MacInnis. If both parents smoke, it shows 15.6 per cent smokers, and if neither parents smoke, 8.8 per cent of the children. So it is double if both parents smoke.

Mrs. MacInnis (Vancouver-Kingsway): What age are the children in those figures.

Dr. Josie: These are highschool children.

Mrs. MacInnis (Vancouver-Kingsway): In connection with that, as smoking has increased, what has happened to the incidence of smoking among these teenagers? Has it increased as much as the adult smoking?

Dr. Josie: Mr. Chairman, I am not up to date on that. I think the answer is that it has increased, but not as much. We are awaiting the results of a follow-up study in one of the Canadian cities.

Dr. Colburn: We have some preliminary information on this study but we are waiting for the final report to come in. The indications are that the boys have levelled off and that there is an increase among girls. This fits in with our DBS surveys which are carried out in a different way, that is, the household sampling through the labour force survey, which shows that men have gone down, and women have gone up slightly. The teenage girls have increased their smoking as well, but the boys have held their own.

Mrs. MacInnis (Vancouver-Kingsway): Thank you.

The Vice-Chairman: Mr. Foster?

Mr. Foster: My questions concern this matter of morbidity, the number of days lost due to people who smoke, as opposed to the mortality, the number who die. I wonder if we have a projection. I believe your percentage was 28 per cent higher between the ages of 45 and 65. Was that correct, Dr. Josie?

Dr. Josie: Excuse me, Mr. Chairman. I think the figure of 28 per cent that I was citing was that 28 per cent of the disability days were an excess associated with cigarette smoking. Twenty-eight per cent of their disability days are estimated to represent an excess associated with cigarette smoking. That is where the figure came from.

[Interpretation]

M. Josie: Dans le manuel de référence que nous avons distribué il y a un instant, il y a une ou deux études qui ont été faites sur les habitudes des étudiants relatives au tabac. Ma mémoire fait un peu défaut, mais dans l'étude de Barrett présentée à Calgary, il montre au tableau 6, à la page 165 de son livre, «*The Influence of Smoking Habits of Parents on Smoking Habits of Students*». Cela donne 15.6 p. 100 de fumeurs, si le père et la mère fument et 8.8 p. 100 lorsque aucun des parents ne fume. Donc cela passe au double, si les parents fument.

Mme MacInnis (Vancouver-Kingsway): Quel est l'âge de ces enfants?

M. Josie: Ce sont des enfants fréquentant l'école secondaire.

Mme MacInnis (Vancouver-Kingsway): L'utilisation du tabac a augmenté. Quelle est l'incidence parmi ces adolescents? A-t-elle augmenté autant que pour les fumeurs adultes?

M. Josie: Monsieur le président, je n'ai pas les dernières données à ce sujet. Il y a eu augmentation, mais pas aussi marquée. Nous attendons les résultats d'une étude permanente, à l'intérieur de l'une des villes canadiennes.

M. Colburn: Nous avons des renseignements préliminaires au sujet de cette étude. Mais nous attendons le rapport définitif. Il semble qu'il y a stabilisation pour les garçons, et une augmentation pour les filles. Et cela correspond aux chiffres de notre BFS qui ont été obtenus d'une façon différente, soit par des échantillonnages sur les foyers, les hommes ont légèrement diminué, les femmes ont légèrement augmenté, pour les adolescents, les filles fument davantage mais les garçons se sont stabilisés.

Mme MacInnis (Vancouver-Kingsway): Merci beaucoup.

Vice-président: Merci. Monsieur Foster.

M. Foster: Mes questions se rapportent à la question de la mortalité. Le nombre de jours perdus par les gens qui fument, par rapport à la mortalité, au moment de leur décès.

Je me demande si nous avons une projection: le pourcentage était 28 p. 100 plus élevé entre 45 ans et 65 ans. Est-ce exact?

M. Josie: Pardonnez-moi monsieur le président, je pense que le chiffre de 28 p. 100 que j'ai cité visait le nombre de jours d'incapacité attribuables à l'usage de la cigarette. Cela représente un excédent associé à l'usage de la cigarette.

[Texte]

Mr. Foster: That is of the whole working population of that group.

Dr. Josie: This is a general household survey again similar to our labour force survey. And from time to time the U.S. National Health Survey asks special questions that go with that particular problem. This particular one was cigarette smoking and health characteristics, and it is about the first information of this kind that we have had from this source.

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We have had, as Dr. Colburn has indicated, information before about the association of disability and the effects.

Mr. Foster: I am interested to know if this has been projected to estimate the number of man-years that would be lost per year in Canada due to cigarette smoking?

Dr. Josie: No, Mr. Chairman, we have not done that. We could convert and apply. We actually have American figures in millions of days per annum, and we could make an estimate for Canada if you wish. We have not done that.

Mr. Foster: Dr. Colburn looked like he wanted to make a comment.

Dr. Colburn: I just wanted to indicate that we are looking at this. We have some information on this and we could provide you with the projections, but I do not have them right at the moment.

Mr. Foster: I think it would be very useful for the Committee. We are a national body trying to assess the importance of this to our country. Also the number of mortalities per year—do you have figures on that in Canada which we could project and attribute to cigarette smoking? Do we have that?

Dr. Josie: Mr. Chairman, I think we could look specifically at that in response to your request. Generally most of the lung cancer deaths are attributed to smoking, a large proportion of the bronchitis emphysema, and a lesser proportion of the coronary artery disease. We may attempt to fix those percentages and give you some estimates.

Mr. Foster: In this connection, do you have offhand the percentage of lung cancer that you attribute to cigarette smoking?

Dr. Josie: Mr. Chairman, my recollection is a little hazy. I have forgotten now whether it is 80 or 90 per cent. Dr. Colburn might be able to fix that for you?

[Interprétation]

M. Foster: Il s'agit de la population laborieuse?

M. Josie: Il s'agit de l'étude sur les foyers. Et de temps à autre, il y a des questions spéciales qui sont posées par le U.S. *National Health Survey*. En particulier, au sujet des habitudes concernant l'usage du tabac. Comme le docteur Colburn l'a dit, nous avons d'autres données.

M. Foster: Je voudrais savoir si cette projection a été faite pour évaluer le nombre d'années-hommes qui ont été perdues au Canada, en raison de l'usage du tabac.

M. Josie: Non, monsieur le président, nous n'avons pas fait cela. Nous pourrions les convertir. Ce sont des chiffres américains, nous pourrions faire une évaluation pour le Canada mais nous ne l'avons pas fait.

M. Foster: Le docteur Colburn semble avoir un commentaire.

M. Colburn: Je voudrais juste faire remarquer que nous examinons la situation. Nous avons quelques données. Nous pourrions vous fournir les projections, mais je ne les ai pas ici.

M. Foster: Cela serait très utile pour le Comité. Nous sommes un organisme national qui essaie d'évaluer l'importance de ce phénomène pour le pays, le nombre de décès par an. Est-ce que vous avez le nombre de décès par an causé par l'usage du tabac. Chiffres qui nous permettraient de faire des projections? Les avez-vous?

M. Josie: Monsieur le président, je pense que nous devrions examiner cela de près, en réponse à votre demande.

En général, la plupart des décès dus au cancer du poumon venaient du fait qu'il s'agissait de fumeurs. En ce qui concerne la bronchite, les emphysemes et les maladies coronariennes nous pourrions vous fixer les pourcentages et vous donner des estimations.

M. Foster: Avez-vous, au pied levé, des pourcentages de cancer du poumon que vous attribuez à l'usage du tabac?

M. Josie: Monsieur le président, je ne me souviens pas exactement s'il s'agit de 80 ou 90 p. 100. Le docteur Colburn pourrait vous donner plus de détails.

[Text]

Dr. Colburn: We have used the figure of 80 per cent. Others would consider that conservative, I think.

Mr. Foster: And pulmonary emphysema?

Dr. Colburn: Emphysema. I would have to look at that again.

Mr. Foster: I see. I think it would be very useful for the Committee if we had those figures at another sitting.

You have already answered the question of Mrs. MacInnis concerning the effects of an outdoor life or a rural environment as opposed to the city situation. I wonder what the difference is where a person has an active life, a labouring individual as opposed to a white collar worker or someone who does not live such a vigorous life. Is there a difference? There is some difference, I believe, for heart patients. It is the volume of air they take in. Is there any difference in this area?

Dr. Colburn: Yes, there are differences between people who are physically active and people who are physically inactive, and these studies have also been carried out to compare the smoking and non-smoking within each of these groups. Each of the categories shows independently, that is, physically inactive people who do not smoke tend to have more coronary disease than physically active people who do not smoke. But likewise, in both these instances this figure is increased by smoking.

Mr. Foster: This is for heart disease?

Dr. Colburn: That is right.

Mr. Foster: Is there any difference in lung cancer?

Dr. Colburn: Not that I am aware of in lung cancer, no.

Mr. Foster: You spoke a couple of times of the infectious period. I cannot think of the term.

Dr. Colburn: Incubation period.

Mr. Foster: The incubation period. Do you have any indication of the number of years this would be. Is there a period in the 40 to 45 years of smoking which seems to be the incubation period?

Dr. Colburn: In regard to lung cancer, most of the studies show that the lung cancer rate starts to increase after 20 to 30 years of smoking. I think in the Canadian study it became very prominent after 30 years.

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Mr. Foster: After 30 years?

[Interpretation]

M. Colburn: Nous avons un chiffre de 80 p. 100. Certains considèrent que c'est une estimation très conservatrice.

M. Foster: Et emphysème pulmonaire?

M. Colburn: L'emphysème? Je devrais examiner cette question.

M. Foster: Je pense qu'il serait très utile que nous disposions de ces chiffres pour une séance ultérieure du Comité. Vous avez déjà répondu à la question de M^{me} MacInnis au sujet de la vie au grand air ou de la vie à la campagne par rapport à la vie urbaine. Je me demande quelle différence il y a entre une personne ayant une vie active, un travailleur, un ouvrier, par rapport à un collect blanc? Il y a une différence entre l'effort fourni, l'effort physique fourni? Il y a, je crois, une différence entre le volume d'air absorbé à chaque respiration. Est-ce exact?

M. Colburn: Oui, il y a des différences entre ceux qui sont actifs ou inactifs physiquement. Des études ont été faites pour comparer les fumeurs aux non-fumeurs. Et chacune des catégories démontre indépendamment, que les inactifs au point de vue physique qui ne fument pas sont plus fréquemment victimes de maladies coronariennes que ceux qui sont actifs. Mais dans les deux cas les chiffres sont toujours plus élevés lorsque l'on fume.

M. Foster: Il s'agit de maladies cardiaques?

M. Colburn: C'est exact.

M. Foster: Est-ce qu'il y a des différences en ce qui concerne le cancer du poumon?

M. Colburn: Pas à ma connaissance.

M. Foster: Vous avez parlé deux ou trois fois des périodes infectieuses; je ne me rappelle pas bien du terme.

M. Colburn: ...la période d'incubation.

M. Foster: Est-ce que vous avez une idée du nombre d'années que cela prendrait? Serait-ce la période d'incubation qui se rapporterait à 40 ou 45 ans d'usage de tabac?

M. Colburn: En ce qui concerne le cancer du poumon, la plupart des études montrent que le taux de cancer du poumon commence à augmenter après 20 ou 30 ans. Dans l'étude canadienne, cela se manifeste très particulièrement après 30 ans.

M. Foster: Après 30 ans?

[Texte]

Dr. Colburn: Yes, but in other studies, 20 or 30 years would be the general.

Mr. Foster: In other words, if a person starts to smoke at 30, it is going to show up 20 or 30 years after that. If he starts to smoke at 15, it will be roughly the same number of years. Is this correct?

Dr. Colburn: Yes, that is when the first magnitude of the problem becomes apparent, after that length of smoking time. You do not see much lung cancer in people who are 30 years of age, or 35.

Dr. Josie: Mr. Chairman, is the member's question concerned with the clinical aspect, the latent period, or the incubation period for a specific case? Or was he thinking of some period when a person is exposed before he develops any signs of a disease? Or was he thinking of it in general terms?

Mr. Foster: I was thinking of it in specific terms like the approximate number of years. I take it from your remarks that it is very rare that after 10 years of smoking cigarettes a person will show symptoms of lung cancer. But when he gets into the 20- to 30-year period, it will show up during this period.

Dr. Josie: Mr. Chairman, I do not know about that. I am a little curious in relation to the business of stopping smoking, and how that effect seems to show up. That could be a different phenomenon in the developing of the disease, but it is an interesting feature of the problem.

Dr. Colburn: May I say that I believe when Dr. Thompson comes here he will be able to give you some evidence regarding the changes found in young smokers; not necessarily lung cancer, but actual changes in the lungs related to smoking. He may be able to give you some further advice from the pathologist's viewpoint on this question of the deterioration that occurs in the development of lung cancer.

Mr. Foster: This is the change in the cells of the lining of the trachea.

Dr. Colburn: Yes, and also deposits of carbon in the lung and so forth.

Mr. Foster: I see. Are we going to have this on film at a later hearing?

The Vice-Chairman: We do not know because Dr. Thompson is coming on the 25th and I am not sure whether he has it. I believe only Mr. Hellyer uses film.

Mr. Foster: I think it would be very interesting.

[Interprétation]

M. Colburn: Oui. Mais dans d'autres études 20 à 30 ans représente la moyenne.

M. Foster: Autrement dit, si une personne commence à fumer à 30 ans, la période critique commencera 20 à 30 ans plus tard? Et si la personne commence à fumer à 15 ans, ce sera pour elle à peu près le même nombre d'années plus tard. Est-ce exact?

M. Colburn: Oui. C'est le moment où le problème commence à se manifester de façon considérable. Il n'y a pas de cancer du poumon chez les gens qui ont 30 ans ou 35 ans.

M. Josie: Monsieur le président, la question des membres du Comité se rapporte à l'aspect clinique, à la période d'incubation ou à la période entre le moment où la personne commence à fumer et le moment où le cancer se manifeste?

M. Foster: Je pensais, je voudrais être plus précis. Le nombre approximatif donné,—d'après ce que vous avez dit, il est très rare qu'après 10 ans, il y ait des symptômes de cancer des poumons—mais, lorsqu'il y a une période de 20 à 30 ans, les symptômes commencent à se manifester.

M. Josie: Monsieur le président, je ne sais pas, je me demande ce qui se passerait lorsque l'on s'arrêterait de fumer. Cela pourrait provoquer un phénomène différent dans l'évolution de la maladie, mais c'est un point intéressant du problème.

M. Colburn: Puis-je dire que je crois que lorsque le docteur Thompson viendra ici, il pourra vous fournir des témoignages sur les changements parmi les jeunes fumeurs. Pas nécessairement sur le cancer du poumon, mais sur l'évolution du poumon lui-même. Il vous donnera peut-être le point de vue du pathologiste en ce qui concerne l'évolution des cellules dans les cas de cancer du poumon.

M. Foster: C'est l'évolution des cellules des muqueuses de la trachée.

M. Colburn: Oui, et également les dépôts de carbone dans les poumons etc. . .

M. Foster: Nous montrera-t-on un film là-dessus, lors d'une séance ultérieure?

Le vice-président: Nous ne savons pas, le docteur Thompson vient le 25. Je crois que le film est entre les mains de M. Hellyer, je ne sais pas si M. Thompson l'a.

M. Foster: Je pense que ce serait très intéressant. Il y a un autre point au sujet duquel

[Text]

The other item I want to inquire about is that in heart disease we have definite studies to indicate that where there is a small amount of animal fat consumed, such as in the Orient, there is less heart disease. Do we have any comparison with countries where there is less smoking? Is there any place in the world where people do not smoke cigarettes, or smoke at a low level, that we can compare with Canada or the United States? Are there any comparisons of this?

Dr. Colburn: Offhand I cannot name you a series of countries, but there are many countries with varying cigarette consumptions where there are different rates of lung cancer.

Mr. Foster: Is the lung cancer proportionate to the amount of cigarette smoking?

Dr. Colburn: Yes, this is generally so.

Mr. Foster: You say in England, for instance, the background of the industrial life seems to trigger a higher incidence of cancer where people do smoke than would occur in a rural environment in North America for example.

Dr. Colburn: There is. This environmental factor in England is primarily related to chronic respiratory disease and its association with smoking. In all countries there seems to be a difference between rural and urban areas, but it is not very great. The smoking factor, both urban and rural, seems to be the dominant one.

The Vice-Chairman: Dr. Josie, do you want to add to that?

Dr. Josie: Mr. Chairman, just on this point about comparative cigarette consumption and

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lung cancer mortality in different countries, there is a graph that is quite informative, I think, on page 34 in that World Conference on Smoking publication that you have on page 34, the Cuyler Hammond study, relating deaths per million to cigarette consumption for about twenty countries—quite a range of countries—and it shows it is a positive correlation of consumption with death rates from lung cancer. That is the sort of thing I said was suggested.

Mr. Foster: Yes. Speaking of the tars and nicotine content, the carcinogenic factors, when we speak of tar, is this one specific substance or is there a whole range of chemical substances called tar?

[Interpretation]

je voudrais vous interroger. En ce qui concerne les maladies cardiaques, différentes études montrent qu'il y a moins de maladies cardiaques dans les régions où l'on consomme moins de matières grasses animales. A-t-on des comparaisons similaires avec des pays au monde où les gens ne fument pas de cigarettes ou en fument si peu que nous puissions faire des comparaisons avec le Canada ou les États-Unis? Est-ce qu'il y a des comparaisons de ce genre?

M. Colburn: A brûle-pourpoint, je ne peux pas vous citer de tels pays. Mais il y a de nombreux pays où la consommation de cigarettes est différente et où le taux de cancer du poumon est différent.

M. Foster: Y a-t-il un rapport entre le cancer du poumon et la quantité de cigarettes fumées?

M. Colburn: Oui, en général.

M. Foster: Vous dites qu'en Angleterre, par exemple, la vie industrielle semble entraîner un taux de cancer du poumon chez les fumeurs plus fort que pour des fumeurs de l'Amérique rurale.

M. Colburn: Oui. Le facteur du milieu en Angleterre a un rapport direct avec certaines maladies respiratoires chroniques associées au tabac. Dans tous les pays, il semble y avoir une différence entre les régions rurales et urbaines, mais elle n'est pas très grande. Le facteur tabac semble être le plus important aussi bien à la ville qu'à la campagne.

Le vice-président: Docteur Josie, est-ce que vous avez quelque chose à ajouter?

M. Josie: Monsieur le président, en ce qui concerne le taux de mortalité due au cancer du poumon par rapport à la consommation de tabac dans différents pays, il y a un graphique intéressant à la page 34 de cette publication de la Conférence mondiale sur l'usage du tabac. Cette étude de Cuyler et Hammond donne le nombre de décès par million d'habitants en fonction de la consommation de cigarettes pour une vingtaine de pays, ce qui est une assez large gamme de pays. Ce graphique montre qu'il y a une corrélation certaine entre la consommation de tabac et le taux de décès par cancer du poumon.

M. Foster: Plus tôt, on a parlé de la teneur en nicotine et en goudrons, les facteurs carcinogènes; lorsqu'on parle de goudron, est-ce que c'est une substance particulière ou est-ce qu'il y a toute une gamme de substances chimiques appelées goudron?

[Texte]

Dr. Colburn: "Tar" is the term given to all of the particulate matter and actually does include the nicotine, but when it is reported the nicotine is usually subtracted from it; that is all the particulate matter as opposed to the gases in cigarette smoke. It includes hundreds of compounds and the most recent report of the health consequences of smoking from the U.S. indicates that there may be thousands of compounds. They have some new methods of measuring them now, but there are several hundred identified.

Mr. Foster: Have there been studies to break these down and decide which ones are the most harmful?

Dr. Colburn: There have been some studies of this kind, particularly in relation to the benzo pyrene and certain of the other compounds, but it seems to be a very big job to try to isolate all the individual components and to do all the necessary tests and studies that are indicated to see what effect each has. This is being done. Chemists and biologists are working away at this gradually.

Dr. Josie: There is a brief summary, Mr. Chairman, included in the abstract from the United States Surgeon General's committee report which we included in the little reference book that we have used lately in our health education. It is on pages 68 and 69.

Chemistry and Carcinogenicity of Tobacco and Tobacco Smoke

and includes some discussion on the complexity of the problem.

Mr. Foster: I was just interested to know if we are talking about a dozen chemical substances. However, you say it is thousands.

Dr. Josie: It seems to be very complex.

Mr. Foster: You say that the gas and the nicotine as well as perhaps substances that also cause cancer.

Dr. Colburn: There is no evidence that the nicotine causes any cancer. There is some evidence that one of the breakdown products of nicotine—cotinine—if fed to animals can cause cancer, but generally the lung cancer is attributed to other substances than nicotine. There is a very recent evidence from Switzerland about the possible effect of gases. Of course, the gases have an effect on the ciliary and they contain irritants, so this could predispose one to any retention of cancer-producing substances either in cigarette smoke or even from other sources. However, there has not been any extensive work done that I am aware of and that shows the effect of gases on lung cancer; it is just that one study.

[Interprétation]

M. Colburn: «Goudron» est le nom donné à toutes les matières qui se déposent, y compris la nicotine. Mais, en général, dans les rapports, la nicotine est soustraite. Il s'agit de toutes les matières solides ou liquides contenues dans la fumée, par opposition aux gaz. On y trouve des centaines de composés et d'après le dernier rapport américain sur les répercussions du tabac sur la santé, il y en aurait des milliers. Il y a de nouvelles méthodes pour les mesurer maintenant, mais il y en a plusieurs centaines d'identifiées.

M. Foster: Est-ce qu'il y a des études séparées de ces produits pour savoir lesquels sont les plus nocifs?

M. Colburn: Certaines études de ce genre ont été faites, notamment sur le benzo-pyrène et certains autres composés, mais il semble qu'il soit très difficile d'isoler tous les composés et de faire tous les essais et études nécessaires pour connaître l'effet de chacun d'eux. Mais on y travaille. Chimistes et biologistes sont constamment à l'ouvrage.

M. Josie: Monsieur le président, dans le petit livret que nous avons utilisé ces derniers temps pour nos cours d'hygiène, vous trouverez aux pages 68 et 69 un résumé d'un rapport du comité général des chirurgiens des États-Unis.

Chimie et carcinogénie du tabac et de la fumée de tabac.

Cette étude discute de la complexité du problème.

M. Foster: Je voudrais seulement savoir si nous parlions d'une douzaine de substances chimiques, en fait il s'agit de milliers.

M. Josie: Cela semble très complexe.

M. Foster: Vous dites que les gaz et la nicotine sont peut-être des substances qui peuvent être cancérigènes.

M. Colburn: Il n'est pas prouvé que la nicotine entraîne le cancer. Cependant, la cotinine un des constituants de la nicotine peut entraîner le cancer lorsqu'on le fait ingérer à des animaux, mais le cancer du poumon est attribué à d'autres substances que la nicotine. En Suisse, on a récemment fait des études sur les effets possibles des gaz. Évidemment, les gaz ont un effet sur les ciliaires et sont irritants ils peuvent donc prédisposer à la rétention de produits cancérigènes provenant de fumée de cigarettes ou d'autres sources. Cependant je n'ai connaissance d'aucun travail très approfondi montrant l'effet des gaz sur le cancer du poumon. Il n'y a eu que cette étude.

[Text]

Mr. Foster: The other matter which you and Dr. Josie raised and discussed in your talk, was the consumption of cigarettes. You say in 1950 it was 1,250 per person in Canada.

Dr. Josie: Mr. Chairman, I actually did not include that in my part of talk, but it developed out of questions from members of the Committee and the information is derived from a chart that Dr. Colburn has on cigarette consumption per capita over a long period of years. He will be glad to check that figure for you. I think it was 1,250.

Dr. Colburn: Was that for 1950?

Mr. Foster: I think it was.

Dr. Colburn: This figure of 1,250 is just an estimate based on this graph.

Mr. Foster: This matter has been raised a couple of times and I am still not clear. You say that the number of deaths from lung cancer has tripled for this period. Is this the total number of deaths in Canada?

• 1730

Dr. Josie: Yes, the lung cancer deaths.

Mr. Foster: Then the incidence of deaths has doubled. Is that correct?

Dr. Josie: That is the rate. It is just putting it on a common denominator. Partly that is the reflection of the growth of the population. There are just more deaths because there are more people.

Mr. Foster: Thank you very much.

Mr. Crossman: Mr. Chairman, most of the questions I had in mind have already been asked and I will be very brief.

It just comes to mind that due to the alarming increase of the ill effects attributed to smoking is it not possible that certain hereditary traits could exist? For instance, would a smoker of today whose parents and grandparents had been smokers be more susceptible to these ill-effects, such as cancer and heart disease, than the smoker of today whose parents had been non-smokers?

Dr. Josie: Mr. Chairman, I think this is an interesting question. I have only seen one reference to parents and grandparents of smokers and I am not able to cite it at the moment. Dr. Colburn might be able to.

Dr. Colburn: I am not aware of any evidence that those whose parents or grandparents were smokers are more likely to have lung cancer because of that.

[Interpretation]

M. Foster: Il y a une autre question que le Dr. Josie et vous-même avez soulevée et discutée, c'est la consommation de cigarettes. Vous dites qu'en 1950, elle était de 1,250 par personne au Canada?

M. Josie: Monsieur le président, ces chiffres n'étaient pas dans mon discours, ils résultent des questions posées par les membres de ce Comité, ils viennent d'un tableau du docteur Colburn sur la consommation de cigarettes par tête au cours d'une longue période. Il pourrait certainement vérifier, mais je crois que c'était 1,250.

M. Colburn: Était-ce pour 1950?

M. Foster: Je pense.

M. Colburn: 1,250 représente une estimation basée sur le graphique.

M. Foster: Cette question a été soulevée deux ou trois fois, mais je suis encore assez perplexe. Vous dites que le nombre de décès par cancer du poulmon a triplé pendant cette période. Est-ce le nombre total de décès au Canada?

M. Josie: Oui, attribuables au cancer au poulmon.

M. Foster: Alors le taux de décès a doublé, n'est-ce pas?

M. Josie: Je crois que oui, si l'on emploie un dénominateur commun, c'est-à-dire si l'on tient compte du facteur de croissance démographique. Car il y a aussi plus de décès parce qu'il y a plus d'habitants.

M. Foster: Merci beaucoup.

M. Crossman: Monsieur le président, la plupart des questions que je voulais poser ont déjà été formulées, je serai donc très bref.

Vu l'augmentation alarmante des effets nocifs attribuables au tabac, ne se peut-il pas que certaines tendances héréditaires existent? Par exemple, un enfant d'aujourd'hui dont les parents et les grands-parents auraient fumé ne pourrait-il pas être plus sujet au cancer du poulmon ou à d'autres maladies qu'un enfant dont les parents n'auraient pas fumé?

M. Josie: C'est une question très intéressante. Je n'ai qu'une seule référence aux parents et grands-parents et je ne peux la citer maintenant, mais peut-être le docteur Colburn est-il mieux renseigné que moi.

M. Colburn: Je n'ai aucune preuve de prédisposition héréditaire au cancer du poulmon.

[Texte]

Mr. Crossman: I ask that because there is an alarming increase in the effects of smoking on the population as a whole and I wondered if there is a certain inherent weakness in the smokers of today, or the last few years, that did not exist in the past?

Dr. Colburn: I am not aware of any evidence of this kind.

Mr. Crossman: That will be all, Mr. Chairman.

The Vice-Chairman: Thank you very much. Are there any further questions?

Mr. Mather: I have one more question.

The Vice-Chairman: This a question, is it?

Mr. Mather: Certainly; all my questions are questions. I have a report here which appeared in *The Vancouver Sun* on February 6 and it quotes the Chairman of the Federal Communications Commission of the United States, Mr. R. H. Hyde and he says that

...one-third of all male deaths between the ages of 35 and 60 are related to cigarette smoking.

My question is, do our witnesses have a similar experience or do their studies so far indicate an approximate agreement with that situation?

Dr. Colburn: Our studies indicate an approximate agreement with that, certainly, but I think this will be brought out in the question that was raised earlier about the attributability in regard to morbidity and mortality that we have said we would report on later.

Mr. Mather: You will have a more detailed report on that? Thank you.

The Vice-Chairman: Madam and gentlemen of the Committee, it is my pleasure to thank Dr. Josie and Dr. Colburn for their evidence. It is obvious they are determined in the cause and their information has been invaluable to this Committee. Thank you very much, gentlemen.

The next meeting will be Thursday, February 20, to hear Dr. F. R. Wake, Associate Professor Psychology at St. Patrick's College and Dr. G.W.O. Moss on behalf of the Smoking Withdrawal Study Centre. The meeting will be at 3:30 p.m., I am given to understand.

The meeting is now adjourned. Thank you, very much.

[Interprétation]

M. Crossman: Je demande cela parce qu'il y a un accroissement alarmant des effets du tabac sur la population et je me demande s'il n'y a pas des facteurs héréditaires qui jouent.

M. Colburn: Je n'ai aucune statistique là-dessus.

M. Crossman: Eh bien c'est tout, monsieur le président.

Le vice-président: Merci beaucoup. Y a-t-il d'autres questions? Oui, monsieur Mather.

M. Mather: J'ai une autre question.

Le vice-président: C'est une question, n'est-ce pas?

M. Mather: Certainement. Toutes mes questions sont des questions.

Je vois un article paru dans le *Sun* de Vancouver en date du 6 février; on cite le président de la commission fédérale des Communications des États-Unis, M. Hyde, qui déclare notamment:

... $\frac{1}{3}$ de tous les décès des individus masculins entre 35 et 60 ans aux États-Unis, sont attribuables à l'usage de la cigarette.

Est-ce que nos témoins ont des données de ce genre ou est-ce que les études qu'ils ont fait jusqu'ici, démontrent que cette statistique est juste?

M. Colburn: Nos études montrent sûrement qu'il y a là corrélation, je crois que cela ressort de la question posée plus tôt au sujet des facteurs héréditaires en ce qui a trait à la morbidité et la mortalité, dont nous parlerons plus tard.

M. Mather: Vous aurez un rapport à ce sujet? Eh, bien c'est tout, M. le président.

Le vice-président: J'ai le plaisir de remercier le docteur Josie et le docteur Colburn pour leur témoignage. Il est manifeste qu'ils luttent pour la bonne cause, les renseignements qu'ils nous ont présentés sont très précieux. Merci beaucoup messieurs. La prochaine réunion aura lieu, jeudi le 20 février. Nous entendrons le docteur F. R. Wake, professeur associé de psychologie au Collège Saint-Patrick, et le Dr G. W. O. Moss, représentant le «Smoking Withdrawal Study Centre». La séance débutera à 15 h. 30.

La séance est levée.

APPENDIX D

Welling, Alberta
Dec. 13/1968.

Dr. Gaston Isabelle,
317—West Block,
Parliament Buildings,
Ottawa.

Dear Dr. Isabelle:

I have been directed by Dr. Colburn of the Department of National Health and Welfare to relay my ideas, which I have sent in before, on the smoking problem, to you as Chairman of the Standing Committee of the House on Health, Welfare and Social Affairs.

I hope my ideas may be helpful to you and your Committee.

Sincerely,

Duane Y. Forsyth.

Ideas on Smoking Problem.

1. Gradual withdrawal of exemption, for advertizing of all forms, of cigarettes in Canada.

This involves the Income Tax Department also.

(a) Step I

1st yr.—only allow 50% of monies spent on advertising as deductible for income tax purposes

(b) Step II

2nd yr.—cut this to 25% deductible in this second year

(c) Step III

3rd yr.—do not allow any deductions as expenses (after this date, decided by Parliament)

2. These non-allowable expenses can be reasonably explained because of the *health hazard*.

3. The anticipated reduction in smoking, unfortunately, will be slow but it will give the primary producing farmers the opportunity to go into other fields of production.

4. Democratic processes are slow by the very nature of the thing. This is good. Therefore, it may take two or more years to get this idea operational but I can see real merit in it. I hope you can "swing it" so some real action is possible.

APPENDICE D

Le 13 décembre 1968

Docteur Gaston Isabelle
Pièce 317, Édifice de l'Ouest
Édifices du Parlement
Ottawa

Cher docteur Isabelle,

Docteur Colburn, du ministère de la Santé nationale et du Bien-être social, m'a demandé de vous faire part, puisque vous êtes président du Comité permanent de la Chambre des communes de la santé, du bien-être social et des affaires sociales, de mes idées que j'avais déjà exposées auparavant, relatives au problème de la cigarette.

J'espère que cela pourra vous être utile, à vous et aux membres de votre Comité.

Sincèrement,

Duane H. Forsyth.

Conseils relatifs au problème de la cigarette

1. Suppression progressive de l'exemption d'impôt accordée au Canada aux fins de la publicité, sous toutes ses formes, pour les cigarettes.

Cela nécessitera la collaboration du ministère du Revenu national.

a) Étape I

1^{re} année—N'autoriser la déduction, aux fins de l'impôt, que de 50 p. 100 des sommes dépensées pour la publicité.

b) Étape II

2^e année—N'autoriser, la deuxième année, que la déduction de 25 p. 100 de ces sommes.

c) Étape III

3^e année—Ne plus autoriser de déductions pour ces sommes (après une date fixée par le Parlement).

2. On pourra facilement expliquer la suppression de cette exemption par le *danger pour la santé* que présente la cigarette.

3. La diminution que l'on prévoit dans la consommation de cigarettes sera malheureusement lente, mais cela donnera aux agriculteurs producteurs de tabac le temps de se lancer dans d'autres types de cultures.

4. Les procédés démocratiques sont lents, de par leur nature même. Cela est une bonne chose. Il faudra donc peut-être deux ans ou plus pour mettre cette idée en pratique, mais j'y vois des avantages certains. J'espère que vous pourrez «faire sauter les choses» de façon à ce que l'on arrive à des mesures positives.

5. I believe that all advertizing could be banned including:

- (a) Signs on cars.
- (b) Posters on buildings and billboards.
- (c) Flyers (printed sheets distributed).
- (d) Newspapers to homes (even imported ones).
- (e) Radio.
- (f) Television.

Good luck to you and all Canadians in this effort.

5. Je pense que l'on pourrait interdire toute publicité pour les cigarettes, y compris au moyen:

- a) d'étiquettes sur les voitures.
- b) d'affiches sur les bâtiments et sur les panneaux d'affichage.
- c) de prospectus (feuilletés imprimés que l'on distribue).
- d) de journaux livrés à domicile (y compris les journaux importés).
- e) de la radio.
- f) de la télévision.

Mes meilleurs vœux de succès dans cette entreprise à vous-même et à tous les Canadiens.

APPENDIX E

MINISTER OF TRADE AND COMMERCE
CANADA

Ottawa, January 21, 1969.

Dr. Gaston Isabelle, M.P.,
House of Commons,
Ottawa, Ontario.

Dear Dr. Isabelle,

I am pleased to respond to your letter of December 27 in which you requested information on behalf of the Standing Committee on Health, Welfare and Social Affairs regarding the activities of this Department as these relate to the promotion of tobacco or tobacco products.

This Department has not been involved in the promotion of either leaf or manufactured tobacco on the domestic market.

We have been involved in the promotion of leaf tobacco in export markets. Flue-cured is a leading cash crop produced primarily in Ontario and has had an auction value of approximately \$140 million annually over the past three years. Exports account for about one-third of the total annual production with a substantial export value. (See table attached).

During the period 1963-65 the Department of Trade and Commerce has sponsored three trade missions to export markets to assist tobacco farmers and the tobacco leaf industry in developing new markets. The program has been directed to countries not served by the existing tobacco trade such as Japan and Eastern Europe where sales are controlled by a government tobacco monopoly. The cost of this program during the period was slightly over \$21,000. There are no further such projects in departmental estimates at this time.

In addition to the direct export promotion projects mentioned above, the Department has assisted the Ontario Flue-cured Tobacco Growers' Marketing Board in its annual negotiation with buyers in the U.K. which constitutes their major market. This assistance takes the form of providing details on the market in that country concerning consumption, production and the likely volume of tobacco required from Canada and other sources to meet their needs.

APPENDICE E

LE MINISTRE DU COMMERCE
CANADA

Ottawa 4, le 21 janvier 1969

Docteur Gaston Isabelle, député
Chambre des communes
Ottawa (Ontario)

Cher docteur Isabelle,

Je suis heureux de répondre à votre lettre du 27 décembre dans laquelle vous demandez des renseignements au nom du Comité permanent de la santé, du bien-être et des affaires sociales concernant l'activité de notre ministère en vue de stimuler le commerce du tabac et des produits du tabac.

Mon ministère ne s'est pas employé à stimuler les ventes de tabac en feuille ou de tabac appâté sur le marché intérieur.

Nous avons cependant participé à la stimulation des ventes de tabac en feuille sur les marchés étrangers. Le tabac jaune est une des principales cultures qui se vendent au comptant; il pousse surtout dans l'Ontario. Depuis trois ans il rapporte aux enchères quelque 140 millions de dollars par an. Les exportations comptent pour environ le tiers du total de la production annuelle ayant une très grande valeur à l'exportation (voir tableau ci-annexé).

Au cours de la période 1963-1965, le ministère du Commerce a patronné trois missions commerciales qui ont visité les marchés d'exportation afin d'aider les cultivateurs de tabac et l'industrie du tabac en feuille à exploiter de nouveaux débouchés. Notre effort a porté sur les pays non servis par le commerce actuel du tabac, notamment le Japon et l'Europe orientale, où les ventes sont régies par un monopole gouvernemental du tabac. Notre programme de promotion au cours de la période en cause a coûté un peu plus de \$21,000. Pour l'instant, les prévisions budgétaires du ministère ne comportent pas d'autres projets du genre.

En plus des projets précités visant à encourager directement l'exportation, le ministère a aidé la Commission des cultivateurs ontariens pour la mise en marché du tabac jaune, dans ses négociations annuelles avec les acheteurs du Royaume-Uni, qui constitue leur principal débouché. Cette aide consiste à fournir des renseignements sur le marché britannique aux points de vue de la consommation, de la production et de la quantité probable de tabac à importer du Canada et d'autres sources pour subvenir aux besoins.

There have been no departmental programs directed to the export sale of manufactured tobacco products although Canadian companies have, from time to time, displayed their products in Canadian Government stands in overseas trade fairs.

I believe that the above is the information which you require. However, should there be further specific questions the Department is at your service and Mr. A. N. Mathieu, General Director, Agriculture, Fisheries and Food Products Branch, will be pleased to provide you with supplementary data.

Yours sincerely,
Jean-Luc Pepin.

CANADA

Value of Export Trade
Tobacco and Products

	\$000
1965	35,363
1966	40,003
1967	49,874
1968 (10 mos)	50,291

Le Ministère n'a réalisé aucun programme tendant à favoriser l'exportation de produits fabriqués du tabac, mais des sociétés canadiennes ont de temps à autre exposé leurs produits aux stands du gouvernement canadien dans les foires commerciales d'outre-mer.

Je crois que ces renseignements sont bien ceux que vous demandez, mais si vous avez d'autres questions précises à poser, le ministère est à votre disposition et M. A. H. Mathieu, directeur général de l'Agriculture, des pêches et des produits alimentaires, se fera un plaisir de vous communiquer des données supplémentaires.

Je vous prie d'agréer l'expression de mes sentiments les meilleurs.

Jean-Luc Pepin.

CANADA

Valeur du Commerce d'exportation
Tabac et sous-produits

	\$000
1965	35,363
1966	40,003
1967	49,874
1968 (10 mois)	50,291

APPENDIX F

SOURCES OF ILLUSTRATIVE MATERIAL

MALE DEATHS, SIX YEARS, ALL CAUSES BY SMOKING HABIT
Age-Specific Death Rates Per 1,000 Study Population

Source: Reproduced from Smoking and Health Reference Book (Canada)
page 104, Department of National Health and Welfare (1964)

Original Source: A Canadian Study of Smoking and Health
Second Report - Best and Walker
Canadian Journal of Public Health, July, 1964

MALE DEATHS, SIX YEARS, ALL CAUSES BY SMOKING HABIT
Number and Age Specific Death Rates Per 1,000 Study Population

Source: Reproduced from Smoking and Health Reference Book (Canada)
page 103, Department of National Health and Welfare (1964)

Original Source: A Canadian Study of Smoking and Health
Second Report - Best and Walker
Canadian Journal of Public Health, July, 1964

OVERALL MORTALITY OF MALE SMOKERS - TABLE 1
CAUSES OF DEATH OF MALE CURRENT CIGARETTE SMOKERS - TABLE 2

Source: Summary of a Canadian Study of Smoking and Health
Best, Walker, Delaquis, McGregor and McKenzie
Department of National Health and Welfare, 1966
Presented at the Annual Meeting of the Canadian
Public Health Association, Quebec, June 1, 1966.

EXPECTED AND OBSERVED DEATHS FOR SMOKERS OF CIGARETTES ONLY
AND MORTALITY RATIOS IN SEVEN PROSPECTIVE STUDIES

Source: Reproduced from Smoking and Health Reference Book (Canada)
page 61, Department of National Health and Welfare (1964)

Original Source: Smoking and Health, Report of the Advisory
Committee to the Surgeon General of the
Public Health Service, 1964, Chapter 8,
page 109.

Department of National Health and Welfare
Ottawa, Ontario
February 18, 1969

APPENDICE F

SOURCE DES ILLUSTRATIONS

DÉCÈS CHEZ LES HOMMES, PÉRIODE DE SIX ANS, TOUTES CAUSES
PAR RAPPORT À L'USAGE DU TABAC.

Taux spécifiques des décès par âge par 1,000 personnes étudiées

Source: "Le tabac et la santé, Manuel de référence (Canada)
p. 111, Ministère de la Santé nationale et du
Bien-être social (1964)

Source originale: Etude sur l'usage du tabac et la santé
Deuxième rapport - Best et Walker
Journal canadien d'hygiène publique,
juillet 1964.

DÉCÈS CHEZ LES HOMMES, PÉRIODE DE SIX ANS, TOUTES CAUSES,
PAR RAPPORT À L'USAGE DU TABAC

Nombres et taux des décès par groupes d'âge, par 1,000
personnes étudiées.

Source: "Le tabac et la santé, Manuel de référence
(Canada) p. 110, Ministère de la Santé
nationale et du Bien-être social (1964)

Source originale: Etude sur l'usage du tabac et la santé
Deuxième rapport - Best et Walker
Journal canadien d'hygiène publique
juillet 1964.

MORTALITÉ D'ENSEMBLE DES FUMEURS DE SEXE MASQUIN - TABLEAU 1
CAUSE DES DÉCÈS DES HOMMES FUMANT ACTUELLEMENT LA CIGARETTE -
TABLEAU 2

Source: Résumé d'une étude Canadienne sur le tabac
et la santé - Best, Walker, Delaquis, McGregor
et McKenzie. Ministère de la Santé nationale
et du Bien-être social, 1966. Étude présentée
à la réunion annuelle de l'Association canadienne
de l'hygiène publique tenue à Québec, le 1^{er} juin
1966.

RÉSULTATS DES SEPT ENQUÊTES COMBINÉES: DÉCÈS PRÉVUS ET
DÉCÈS RÉELS, SEULEMENT CHEZ LES FUMEURS DE CIGARETTE,
AVEC LES COEFFICIENTS DE MORTALITÉ

Source: "Le tabac et la santé, Manuel de référence (Canada)
p. 65, Ministère de la Santé nationale et du
Bien-être social (1964)

Source originale: Smoking and Health, Report of the Advisory
Committee to the Surgeon General of the
Public Health Service, U.S.A. 1964,
Chapter 8, page 109.

Ministère de la Santé nationale et du Bien-être social
Ottawa (Ontario)
le 18 février 1969

Figure 1

MALE DEATHS, SIX YEARS, ALL CAUSES BY SMOKING HABIT

AGE - SPECIFIC DEATH RATES PER 1,000 STUDY POPULATION

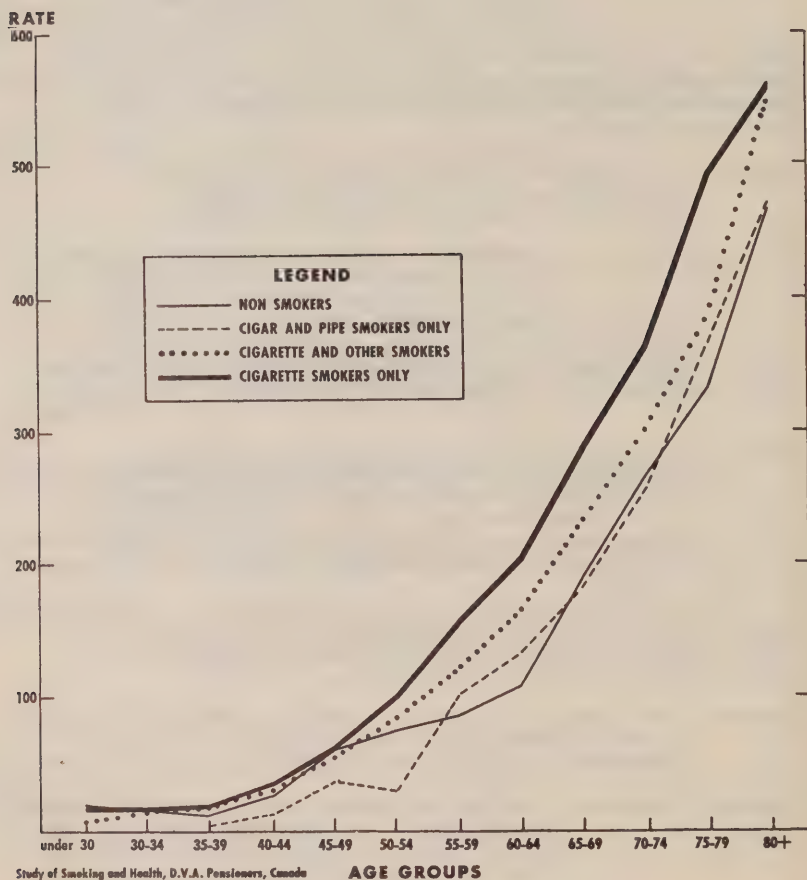
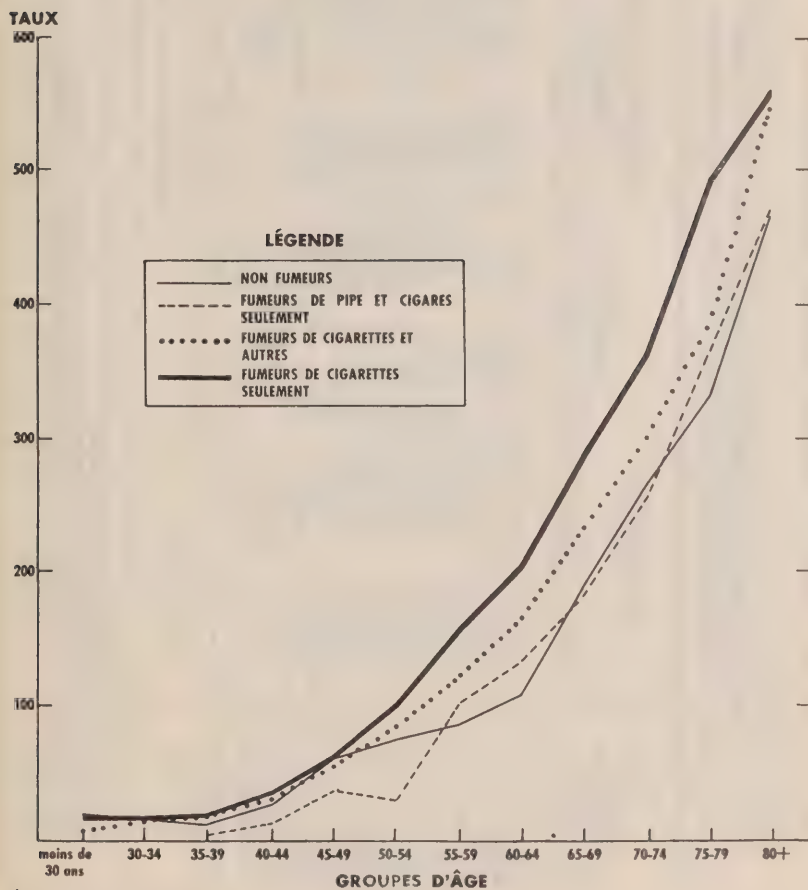


Figure 1

DÉCÈS CHEZ LES HOMMES, PÉRIODE DE SIX ANS, TOUTES CAUSES PAR RAPPORT À L'USAGE DU TABAC

TAUX SPÉCIFIQUES DES DÉCÈS PAR ÂGE PAR 1,000 PERSONNES ÉTUDIÉES



CANADIAN STUDY

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TABLE 1.—MALE DEATHS, SIX YEARS, ALL CAUSES BY SMOKING HABIT
Number and Age Specific Death Rates per 1,000 Study Population

Age Groups (Based on Age in 1956)	NON-SMOKERS (Never Smoked)			Cigar & Pipe Only			Cigarette & Other			Cigarette Only		
	Pop.	Deaths	Rates	Pop.	Deaths	Rates	Pop.	Deaths	Rates	Pop.	Deaths	Rates
Under 30.....	48	1	20.83	6	0	0	258	2	7.75	214	4	18.69
30-34.....	739	12	16.24	162	0	0	4,596	61	13.27	3,185	56	17.58
35-39.....	1,113	14	12.58	187	1	5.35	6,653	121	18.19	4,639	88	18.97
40-44.....	656	18	27.44	145	2	13.79	4,531	149	32.88	3,410	124	36.36
45-49.....	359	22	61.28	104	4	38.46	3,030	169	55.78	2,239	140	62.53
50-54.....	249	19	76.30	98	3	30.61	2,267	193	85.13	1,851	187	101.03
55-59.....	632	55	87.03	372	38	102.15	4,682	576	123.02	3,270	514	157.19
60-64.....	1,067	117	109.65	846	113	133.57	6,052	1,001	165.40	3,791	778	205.22
65-69.....	897	170	189.52	949	173	182.30	3,880	901	232.22	2,421	689	284.59
70-74.....	668	179	267.96	824	212	257.28	2,033	613	301.52	1,195	432	361.51
75-79.....	361	120	332.41	667	243	364.32	871	337	386.91	436	214	490.83
80 plus.....	274	128	467.15	537	253	471.14	345	189	547.83	113	63	557.52
TOTAL.....	7,063	855(O)	—	4,897	1,042(O)	—	39,198	4,312(O)	—	26,764	3,289(O)	—
Expected Deaths**	—	855(E)	—	—	1,021(E)	—	—	3,449(E)	—	—	2,164(E)	—
Difference (O-E).....	—	0	—	—	21	—	—	865	—	—	1,125	—
Percent Difference (O-E) — x 100 E	—	0	—	—	2.06	—	—	25.02	—	—	51.99	—

*Current and Ex-Smokers 1956.

**Based on Age-Specific death rates for non-smokers.
Study of Smoking and Health, D.V.A. Pensioners Canada.
Data prepared by Biostatistics Unit, Research and Statistics Division, Department of National Health and Welfare.
May, 1963.

(O) Observed
(E) Expected

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TABAC ET SANTÉ

TABLEAU 1.—DÉCÈS CHEZ LES HOMMES, PÉRIODE DE SIX ANS, TOUTES CAUSES,
PAR RAPPORT À L'USAGE DU TABAC

Nombre et taux des décès par groupes d'âge, par 1,000 personnes étudiées

Groupes d'âge (âge en 1956)	NON-FUMEURS (n'ont jamais fumé)			FUMEURS (anciens et actuels*)					
	Pipe et cigares seulement			Cigarettes et autres			Cigarettes seulement		
	Pop.	Décès	Taux	Pop.	Décès	Taux	Pop.	Décès	Taux
Moins de 30 ans.....	48	1	20.83	6	0	0	258	2	7.75
30-34.....	739	12	16.24	162	0	0	4,596	61	13.27
35-39.....	1,113	14	12.58	187	1	5.35	6,653	121	18.19
40-44.....	656	18	27.44	145	2	13.79	4,531	149	32.88
45-49.....	359	22	61.28	104	4	38.46	3,030	169	55.78
50-54.....	249	19	76.30	98	3	30.61	2,267	193	85.13
55-59.....	632	55	87.03	372	38	102.15	4,682	576	123.02
60-64.....	1,067	117	109.65	846	113	133.57	6,052	1,001	165.40
65-69.....	897	170	189.52	949	173	182.30	3,880	901	232.22
70-74.....	668	179	267.96	824	212	257.28	2,033	613	301.52
75-79.....	361	120	332.41	667	243	364.32	871	337	386.91
80 et plus.....	274	128	467.15	537	253	471.14	345	189	547.83
TOTAL.....	7,063	855(C)	—	4,897	1,042(C)	—	39,198	4,312(C)	—
Nombre de décès attendus**	—	855(A)	—	—	1,021(A)	—	—	3,449(A)	—
Différence (C-A)	—	0	—	—	21	—	—	863	—
Différence en pourcentage (C-A)	—	0	—	—	2.06	—	—	25.02	—
$\frac{\text{—}}{\text{A}} \times 100$	—	—	—	—	—	—	—	—	—
A	—	—	—	—	—	—	—	—	—

*Fumeurs actuels et anciens fumeurs en 1956.

**Fondé sur les taux spécifiques de décès par âge chez les non-fumeurs.

Étude sur l'usage du tabac et la santé, chez les anciens combattants pensionnés au Canada.

Données préparées par la Section de Biostatistique, Division de la Recherche et de la Statistique, Ministère de la Santé nationale et du Bien-être social. Mai 1963.

(C) constatés
(A) attendus

TABLE 1

OVERALL MORTALITY OF MALE SMOKERS

Excess Deaths and Percentage Elevation of Death Rates for Overall Mortality of Males

by Current Smoking Habit Compared to Males Who Never Smoked

Current Smoking Habit (Smoking Habit at Start of Survey)	Populations at Risk	Observed Deaths	Expected Deaths*	Number of Excess Deaths (Observed Minus Expected)	Mortality Ratio (Observed Divided by Expected)	Percentage Elevation of Death Rate Compared to Non-Smokers
Never Smoked	7,014	853	853	0	1.00	0
Cigarettes only	35,199	4,153	2,700.8	1,452	$\frac{4153}{2700.8} = 1.54$	54%
Cigarettes plus cigars	5,733	506	414.3	92	$\frac{506}{414.3} = 1.22$	22%
Cigarettes plus pipes	4,551	613	487.9	125	$\frac{613}{487.9} = 1.26$	26%
Cigarettes plus pipes and cigars	6,725	646	570.7	75	$\frac{646}{570.7} = 1.13$	13%
Cigars only	1,594	196	184.4	12	$\frac{196}{184.4} = 1.06$	6%
Pipes only	3,319	723	685.4	38	$\frac{723}{685.4} = 1.05$	5%
Cigars plus pipes	2,253	365	373.5	-9	$\frac{365}{373.5} = 0.98$	-2%
TOTAL (Smokers only)	59,374	7,202	5,417.0	1,785	$\frac{7202}{5417.0} = 1.33$	33%

* Based on the age specific death rates of men who never smoked.

TABLEAU 1

MORTALITÉ D'ENSEMBLE DES FUMEURS DE SEXE MASCULIN

Décès excédentaires et élévation proportionnelle des taux des décès pour la mortalité d'ensemble des hommes fumant actuellement par rapport aux hommes n'ayant jamais fumé

Habitude présente de la cigarette (c.à.d. lors du début de l'enquête)	Nombre de personnes étudiées	Décès constatés	Décès prévus*	Nombre de décès excédentaires (décès constatés moins les décès prévus)	Quotient de la mortalité (décès constatés divisés par les décès prévus)	Élévation proportionnelle de la mortalité chez les fumeurs par rapport aux non-fumeurs
N'ayant jamais fumé	7, 014	853	853	0	1.00	0
Ne fumant que la cigarette	35, 199	4, 153	2, 700.8	1, 452	$\frac{4153}{2700.8} = 1.54$	54%
Fumant la cigarette et le cigare	5, 733	506	414.3	92	$\frac{506}{414.3} = 1.22$	22%
Fumant la cigarette et la pipe	4, 551	613	487.9	125	$\frac{613}{487.9} = 1.26$	26%
Fumant la cigarette, la pipe et le cigare	6, 725	646	570.7	75	$\frac{646}{570.7} = 1.13$	13%
Ne fumant que le cigare	1, 594	196	184.4	12	$\frac{196}{184.4} = 1.06$	6%
Ne fumant que la pipe	3, 319	723	685.4	38	$\frac{723}{685.4} = 1.05$	5%
Fumant le cigare et la pipe	2, 253	365	373.5	-9	$\frac{365}{373.5} = 0.98$	-2%
TOTAL (fumeurs seulement)	59, 374	7, 202	5, 417.0	1, 785	$\frac{7202}{5417.0} = 1.33$	33%

* Chiffres fondés sur la mortalité par âge des hommes n'ayant jamais fumé.

TABLE 2

CAUSES OF DEATH OF MALE CURRENT CIGARETTE SMOKERS

Excess Deaths and Percentage Elevation of Death Rates of Male Current Cigarette Smokers

Compared to Males Who Never Smoked

Cause of Death and I.C.D. Number	Observed Deaths Among Current Cigarette Smokers	Expected Deaths*	Number of Excess Deaths (Observed Minus Expected)	Percentage of Excess Deaths Due to Specified Cause	Mortality Ratio (Observed Divided by Expected)	Percentage Elevation of Death Rate Compared to Non-Smokers
HEART & CIRCULATORY DISEASES 400-468	2,054	1,219.7	834	57.4%	$\frac{2054}{1219.7} = 1.68$	68%
Coronary Heart Diseases - 420.1	1,380	860.0	520	35.8%	$\frac{1380}{860.0} = 1.60$	60%
Other Heart and Circulatory Diseases - 400-468 (excl. 420.1)	674	359.7	314	21.6%	$\frac{674}{359.7} = 1.87$	87%
MAJOR LUNG DISEASES 162,163,500-502,527.1	440	35.0	405	27.9%	$\frac{440}{35.0} = 12.57$	1,157%
Lung Cancer - 162-163	325	21.8	303	20.9%	$\frac{325}{21.8} = 14.91$	1,391%
Bronchitis & Emphysema 500-502, 527.1	115	13.2	102	7.0%	$\frac{115}{13.2} = 8.71$	771%
ALL OTHER CAUSES	1,659	1,446.1	213	14.7%	$\frac{1659}{1446.1} = 1.15$	15%
TOTAL - ALL CAUSES	4,153	2,700.8	1,452	100.0%	$\frac{4153}{2700.8} = 1.54$	54%

* Based on the age specific death rates of men who never smoked

TABLEAU 2

CAUSE DES DÉCÈS DES HOMMES FUMANT ACTUELLEMENT LA CIGARETTE

Décès excédentaires et élévation proportionnelle de la mortalité des hommes fumant actuellement la cigarette par rapport aux hommes n'ayant jamais fumé

Cause de décès et n° liste internationale	Décès constatés chez les fumeurs actuels de la cigarette	Décès prévus*	Nombre de décès excédentaires (Décès constatés moins décès prévus)	Proportion des décès excédentaires attribuables à une cause précise	Quotient de la mortalité (Décès constatés divisés par les décès prévus)	Élévation proportionnelle de la mortalité par rapport à celle des non-fumeurs
MALADIES DU COEUR ET DES VAISSEAUX SANGUINS - 400-468	2,054	1,219.7	834	57.4%	$\frac{2054}{1219.7} = 1.68$	68%
Maladies coronariennes - 420.1	1,380	860.0	520	35.8%	$\frac{1380}{860.0} = 1.60$	60%
Autres maladies du coeur et des vaisseaux sanguins - 400-468 (sauf 420.1)	674	359.7	314	21.6%	$\frac{674}{359.7} = 1.87$	87%
PRINCIPALES AFFECTIONS PULMONAIRES 162, 163 500-502, 527.1	440	35.0	405	27.9%	$\frac{440}{35.0} = 12.57$	1,157%
Cancer du poulmon - 162-163	325	21.8	303	20.9%	$\frac{325}{21.8} = 14.91$	1,391%
Bronchite et emphysème 500-502, 527.1	115	13.2	102	7.0%	$\frac{115}{13.2} = 8.71$	771%
TOUTES AUTRES CAUSES	1,659	1,446.1	213	14.7%	$\frac{1659}{1446.1} = 1.15$	15%
TOTAL - AUTRES CAUSES	4,153	2,700.8	1,452	100.0%	$\frac{4153}{2700.8} = 1.54$	54%

* Chiffres fondés sur la mortalité par âge des hommes n'ayant jamais fumé.

TABLE 2.1—EXPECTED AND OBSERVED DEATHS FOR SMOKERS
OF CIGARETTES ONLY AND MORTALITY RATIOS IN SEVEN
PROSPECTIVE STUDIES

Underlying cause of death	Expected deaths	Observed deaths	Mortality ratio
Cancer of lung (162-3) ²	170.3	1,833	10.8
Bronchitis and emphysema (502, 521.1)	89.5	546	6.1
Cancer of larynx (161)	14.0	75	5.4
Oral cancer (140-8)	37.0	152	4.1
Cancer of esophagus (150)	33.7	113	3.4
Stomach and duodenal ulcers (540, 541)	105.1	294	2.8
Other circulatory diseases (451-68)	254.0	649	2.6
Cirrhosis of liver (581)	169.2	379	2.2
Cancer of bladder (181)	111.6	216	1.9
Coronary artery disease (420)	6,430.7	11,177	1.7
Other heart diseases (421-2, 430-4)	526.0	868	1.7
Hypertensive heart (440-3)	409.2	631	1.5
General arteriosclerosis (450)	210.7	310	1.5
Cancer of kidney (180)	79.0	120	1.5
All causes ³	15,653.9	23,223	1.68

¹Abridged from Table 26, Chapter 8, Mortality.

²International Statistical Classification numbers in parentheses.

³Includes all other causes of death as well as those listed above.

TABLEAU 2.¹—RÉSULTATS DES SEPT ENQUÊTES COMBINÉES:
DÉCÈS PRÉVUS ET DÉCÈS RÉELS, SEULEMENT CHEZ
LES FUMEURS DE CIGARETTE, AVEC LES COEFFICIENTS
DE MORTALITÉ

Causes sous-jacentes du décès	Coefficients de mortalité	
	Décès prévus	Décès réels
Cancer du poumon (162-163) ²	170.3	1,833
Bronchite et emphysème (502, 527.1)	89.5	546
Cancer du larynx (161)	14.0	75
Cancer de la cavité buccale (140-148)	37.0	152
Cancer de l'œsophage (150)	33.7	113
Ulcères de l'estomac ou du duodénum (540, 541)	105.1	294
Autres maladies circulatoires (451-468)	254.0	649
Cirrhose du foie (581)	169.2	379
Cancer de la vessie (181)	111.6	216
Maladie coronarienne (420)	6,430.7	11,177
Autres maladies du cœur (421-422, 430-434)	526.0	868
Maladie hypertensive (440-443)	409.2	631
Artériosclérose généralisée (450)	210.7	310
Cancer du rein (180)	79.0	120
Toutes causes ³	15,653.9	23,223
		1.68

¹ Abrégé du tableau 26, chapitre 8, Mortalité.

² Les nombres entre parenthèses sont ceux de la Classification statistique internationale.

³ Comprend toutes les causes de décès, et non pas seulement la liste qui précède.

OFFICIAL BILINGUAL ISSUE

FASCICULE BILINGUE OFFICIEL

HOUSE OF COMMONS

CHAMBRE DES COMMUNES

First Session

Première session de la

Twenty-eighth Parliament, 1968-69

vingt-huitième législature, 1968-1969

STANDING COMMITTEE

COMITÉ PERMANENT

ON

DE LA

**HEALTH, WELFARE AND
SOCIAL AFFAIRS**

**SANTÉ, DU BIEN-ÊTRE SOCIAL
ET DES AFFAIRES SOCIALES**

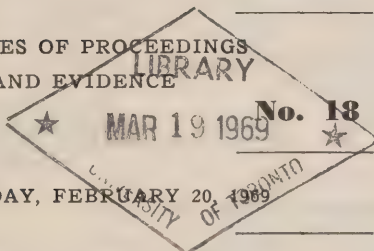
Chairman

M. Gaston Isabelle

Président

MINUTES OF PROCEEDINGS
AND EVIDENCE

PROCÈS-VERBAUX ET
TÉMOIGNAGES



THURSDAY, FEBRUARY 20, 1969

LE JEUDI 20 FÉVRIER 1969

Respecting the subject-matter of

Concernant la question de fond des

Bill C-39, An Act to amend the Broadcasting Act (cigarette advertising).

Bill C-39, Loi modifiant la Loi sur la radio-diffusion (Annonces de cigarettes).

Bill C-45, An Act to restrain the use of Tobacco.

Bill C-45, Loi visant à restreindre l'usage du tabac.

Bill C-53, An Act to amend the Food and Drugs Act.

Bill C-53, Loi modifiant la Loi des aliments et drogues.

Bill C-134, An Act to amend the Tobacco Restraint Act.

Bill C-134, Loi modifiant la Loi sur la répression de l'usage du tabac chez les adolescents.

Bill C-137, An Act to amend the Broadcasting Act (Prohibition of cigarette advertising).

Bill C-137, Loi modifiant la Loi sur la radio-diffusion (Interdiction de réclames de cigarettes).

Bill C-147, An Act to control the tar content and nicotine level of cigarettes.

Bill C-147, Loi ayant pour objet de contrôler la teneur en goudron et en nicotine des cigarettes.

WITNESSES—TÉMOINS

(See Minutes of Proceedings)

(Voir Procès-verbaux)

THE QUEEN'S PRINTER, OTTAWA, 1969
L'IMPRIMEUR DE LA REINE, OTTAWA, 1969

STANDING COMMITTEE ON
HEALTH, WELFARE AND
SOCIAL AFFAIRS

Chairman
Vice-Chairman

¹ Benjamin,
Forget,
Fortin
Foster,
Godin,
Guilbault,

M. Gaston Isabelle
Mr. Steve Otto
and Messrs.
et Messieurs

³ Haidasz,
Howe,
Mrs. MacInnis (M^{re}),
McBride,
Monteith,
¹ Osler,

COMITÉ PERMANENT DE
LA SANTÉ, DU BIEN-ÊTRE SOCIAL
ET DES AFFAIRES SOCIALES

Président
Vice-président

Ritchie,
Robinson,
Rochon,
Rynard,
Thomas (*Maisonneuve*),
Yewchuk—(20).
(Quorum 11)

La secrétaire du Comité:
Gabrielle Savard
Clerk of the Committee.

Pursuant to S.O. 65(4) (b)

¹ Replaced Mr. Crossman on February 19
² Replaced Mr. Saltsman on February 19
³ Replaced Mr. Whicher on February 19

Conformément à l'article 65(4) (b) du
Règlement

¹ Remplace M. Crossman le 19 février
² Remplace M. Saltsman le 19 février
³ Remplace M. Whicher le 19 février

(Text)

MINUTES OF PROCEEDINGS

THURSDAY, February 20, 1969.
(21)

The Standing Committee on Health, Welfare and Social Affairs met this day at 3:55 o'clock p.m. The Chairman, Mr. Gaston Isabelle, presided.

Members present: Mrs. MacInnis, Messrs. Benjamin, Forget, Haidasz, Howe, Isabelle, McBride, Osler, Otto, Robinson, Thomas (*Maisonneuve*) (11).

Witnesses: Dr. F. Robert Wake, Associate Professor of Psychology, St. Patrick's College, Ottawa; and Dr. G. W. O. Moss, M.D., D.P.H., Deputy Medical Officer of Health, Department of Public Health, City of Toronto.

The Committee resumed consideration of the subject-matter of Bills C-39, C-45, C-53, C-134 and C-147.

The Chairman introduced the witnesses.

Dr. Wake read a statement and was questioned thereon.

At 5:00 o'clock p.m. the Members being called in the House for a vote, the Committee adjourned till 8:00 o'clock p.m. this evening.

EVENING SITTING (22)

The Committee reconvened at 8:15 o'clock p.m. The Vice-Chairman, Mr. Otto, presided.

Members present: Mrs. MacInnis, Messrs. Benjamin, Foster, Haidasz, Howe, McBride, Osler, Otto, Ritchie, Robinson, Rochon, Thomas (*Maisonneuve*), Yewchuk (13).

Witness: Dr. G. W. O. Moss, M.D., D.P.H., Deputy Medical Officer of Health, Department of Public Health of the City of Toronto.

The Vice-Chairman introduced Dr. Moss.

(Texte)

PROCÈS-VERBAUX

Le JEUDI 20 février 1969.
(21)

Le Comité permanent de la Santé, du Bien-être social et des Affaires sociales se réunit aujourd'hui à 3 h. 55 de l'après-midi, sous la présidence de M. Gaston Isabelle.

Présents: M^{me} MacInnis, MM. Benjamin, Forget, Haidasz, Howe, Isabelle, McBride, Osler, Otto, Robinson, Thomas (*Maisonneuve*)—(11).

Témoins: Le docteur F. Robert Wake, professeur adjoint de psychologie au Collège St. Patrick d'Ottawa; et le docteur G. W. O. Moss, M.D., D.P.H., directeur médical adjoint du Service de Santé de la ville de Toronto.

Le Comité reprend l'étude de la question de fond des bills C-39, C-45, C-53, C-134, C-137 et C-147.

Le président présente les témoins.

Le docteur Wake lit un exposé et est interrogé.

A 5 heures de l'après-midi, les députés étant convoqués à la Chambre pour un vote, le Comité s'ajourne à 8 heures ce soir.

SÉANCE DU SOIR (22)

Le Comité se réunit de nouveau à 8 h. 15 du soir, sous la présidence de M. Otto, vice-président.

Présents: M^{me} MacInnis, MM. Benjamin, Foster, Haidasz, Howe, McBride, Osler, Otto, Ritchie, Robinson, Rochon, Thomas (*Maisonneuve*), Yewchuk—(13).

Témoin: Le docteur G. W. O. Moss, M.D., D.P.H., directeur médical adjoint du Service de Santé de la ville de Toronto.

Le vice-président présente le docteur Moss.

*Agreed,—*That Dr. Moss' preliminary statement be taken as read and printed into the record.

Dr. Moss commented on his statement and was questioned thereon.

On behalf of the Committee, Mr. Otto thanked the witness for his presentation, and at 9:45 p.m. the Committee adjourned to 11:00 o'clock a.m. Tuesday, February 25, 1969.

Gabrielle Savard,
Clerk of the Committee.

*Il est convenu,—*Que l'exposé préliminaire du Docteur Moss soit considéré comme ayant été lu et qu'il soit imprimé au compte rendu.

Le docteur Moss ajoute quelques commentaires et il est interrogé.

Le vice-président remercie le docteur Moss d'être venu et à 9 h. 45 du soir le Comité s'ajourne à 11 heures du matin le mardi 25 février 1969.

La secrétaire du Comité,
Gabrielle Savard.

[Texte]

EVIDENCE

(Recorded by Electronic Apparatus)

Thursday, February 20, 1969.

• 1557

The Chairman: I see a quorum. The meeting is open. We are now resuming consideration of the subject matter of the bills on smoking.

It is my pleasure to introduce Dr. F. R. Wake, Associate Professor of Psychology, St. Patrick's College, Ottawa. Also Dr. G. W. O. Moss, Deputy Medical Officer of Health, Department of Public Health, Toronto. Dr. Moss' statement is already in your hands. He is the Technical Director of the Smoking Withdrawal Study Centre. As Dr. Wake has to leave us at 5.30 p.m., or maybe before that, we shall ask him to present his brief. Dr. Wake.

Dr. F. R. Wake (Associate Professor of Psychology, St. Patrick's College, Ottawa): Thank you, Dr. Isabelle. Mr. Chairman, members of the Committee, ladies and gentlemen.

On behalf of our research team, made up of Dr. Walther, Miss Haycock and myself, I should like to thank you for the opportunity of appearing before you. We have nothing of great importance to bring, but feel that our somewhat specialized work may provide side-lights of some interest.

For several years, our unit has worked on different aspects of the smoking problem. Current efforts are devoted to a fairly large sample of Grade Seven students. If you are interested in any of these studies, I should be happy to try to answer your queries.

With regard to advertising, a radio-TV ban on such until 10 p.m. for cigarettes at least should be a step in the right direction, since many young persons will be in bed when the ads appear. The fact that many will not be in bed should not discourage such a straightforward step. It may be that cigarette manufacturers will press for earlier times in order to reach larger audiences and they may even justify such early commercials on the grounds

[Interprétation]

TÉMOIGNAGES

(Enregistrement électronique)

Le jeudi 20 février 1969

Le président: Je vois qu'il y a quorum, par conséquent la séance est ouverte. Nous reprenons l'étude du bill sur l'usage du tabac.

J'ai maintenant le plaisir de vous présenter M. F. R. Wake, professeur adjoint de psychologie au Collège Saint-Patrick d'Ottawa, de même que le docteur G. W. O. Moss, médecin hygiéniste adjoint, du ministère de la Santé publique, Toronto.

Vous avez déjà la déclaration du docteur Moss. Il est directeur technique du Smoking Withdrawal Study Centre.

Je crois que M. Wake doit partir à 5 h 30, ou même avant, c'est pourquoi je vais lui demander de présenter son mémoire maintenant. Monsieur Wake.

M. F. R. Wake (professeur adjoint de psychologie au Collège Saint-Patrick d'Ottawa): Merci bien, docteur Isabelle. Monsieur le président, messieurs les membres du Comité, mesdames et messieurs.

Au nom de notre équipe de recherche composée du docteur Walther, de M^{lle} Haycock et de moi-même, je tiens à vous remercier de m'avoir donné l'occasion de venir témoigner devant vous. Nous n'avons pas tellement de données nouvelles à vous apporter, mais nous estimons que notre travail spécialisé pourra peu-être vous fournir des renseignements d'un certain intérêt.

Depuis plusieurs années, nous nous occupons de plusieurs aspects du problème de l'usage du tabac. Notre étude porte sur un échantillon assez considérable d'élèves de la septième année. Si vous êtes intéressés par les résultats de ces études, je me ferai un plaisir d'essayer de répondre à vos demandes de renseignements.

En ce qui a trait à la réclame, l'interdiction, jusqu'à 10 heures, de la publicité à la radio et à la télévision, pour la cigarette du moins, serait un pas dans la bonne direction puisque bon nombre de jeunes seront déjà couchés lorsque la réclame passera à la radio et à la télévision. Le fait que plusieurs ne seront pas encore couchés ne devrait pas dissuader de prendre cette initiative. Il se peut fort bien que les fabricants de cigarettes

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that they are not interested in making advertisements attractive to teenagers, that they have no wish to persuade teenagers to smoke. On the surface, the statement may have a certain veracity—ads do not show teenagers and cigarettes together. However, a strong teenage motivation is to become adult, and to be seen as adult at as early an age as possible. The quick way to appear adult is to take on the trappings of maturity—to smoke, drink, drive cars, stay out late, be in love. Such being the case, advertisements intended for adults can exert a strong appeal to teenagers—the he-man on the prairies, the loving couple relaxing together.

Seen in this light, many commercials supposedly intended to interest adults only may have a far more powerful effect on the young than on the adult. Similarly, it is nonsensical to pretend that offers of expensive prizes to lucky purchasers motivates smoking in adults only. On the contrary, one of the sad discoveries in growing up is that in the great majority of cases, prizes have to be earned. Adults know the odds against a lucky draw—to the young, the miracle is close at hand and the ads beckon them on.

Combating such inducements are governmental programs of education supported by research. Considering the sums of money promoting the sale of cigarettes, governmental funds are small and yet, the anti-smoking side is beginning to win. The beginning success should not lead to a reduction in effort; on the contrary, there are so many unknowns in the field of smoking behaviour that the present momentum must be increased through more research and more education. Since our own project operates on government funds, perhaps it is a little aggressive, a bit personalized, for me to urge further expenditures. However, a few examples may indicate the need.

First, if some people smoke cigarettes and some do not, then there are differences between these groups. It stands to reason that somehow the personalities of the people in one group must differ from the personalities of the people in the other. One group should have "a smoker's personality". Furthermore, heavy smokers should be different from light smokers, and so on. It is all so reasonable; yet research on the personalities of smokers has been distinctly unrewarding. Why? Perhaps because the only way in which the groups differ is in cigarette smoking or not smoking and this, incidentally, is true of other patterns of behaviour such as alcoholism, and so on. On the other hand, perhaps the problems

[Interpretation]

essaient d'obtenir une meilleure heure d'écoute et ils pourraient peut-être justifier ces annonces en disant qu'ils ne sont pas intéressés à présenter une publicité attrayante pour les adolescents, qu'ils ne désirent pas du tout induire les adolescents à fumer. A première vue, cela est peut-être vrai: les annonces ne montrent pas les adolescents et les cigarettes ensemble. Toutefois, les jeunes veulent se considérer comme des adultes et cela le plus tôt possible. Ainsi, ils veulent faire comme les adultes, fumer, boire, conduire des voitures, se coucher tard, etc. Donc, la publicité faite pour les adultes peut influencer beaucoup les jeunes.

Vue sous cet angle, une grande partie de la publicité qui a pour but d'attirer l'attention des adultes peut avoir beaucoup plus d'influence sur les jeunes que sur les adultes. De même, il est insensé de prétendre que les prix très élevés qu'on offre motivent seulement les adultes. En fait, en grandissant, on se rend compte malheureusement que, dans la plupart des cas, il faut gagner ces prix. Les adultes savent quelles sont leurs chances, mais pour les jeunes, cela paraît plus miraculeux.

Si l'on veut combattre cette influence, des programmes gouvernementaux d'éducation appuyés par des recherches, s'imposent. Compte tenu des montants d'argent consacrés à la vente de la cigarette, les fonds gouvernementaux sont minces, et pourtant la campagne anti-cigarette commence à avoir des effets. Mais les succès du début ne devraient pas nous pousser à réduire nos efforts. Au contraire, il y a tellement de données inconnues dans le domaine du comportement des fumeurs que les efforts actuels doivent être intensifiés par la recherche et l'éducation. Puisque notre projet est tributaire de fonds gouvernementaux, peut-être serait-ce quelque peu exigeant de réclamer un surcroît de dépenses. Cependant, quelques exemples en montreront la nécessité.

Premièrement, si certaines personnes fument et d'autres ne fument pas, il y a des différences entre ces groupes. On voit fort bien que la personnalité des gens d'un groupe doit être différente de celle des gens de l'autre groupe. Un groupe aura une personnalité propre aux fumeurs. En outre, les gros fumeurs sont différents des petits fumeurs, etc. Tout cela est rationnel. Cependant les recherches sur la personnalité des fumeurs n'ont pas donné de bons résultats, peut-être parce que la seule différence entre les groupes, c'est l'habitude du tabac. Et il en va de même pour les autres types de comportement comme l'alcoolisme, etc. Peut-être nos recherches n'ont-elles pas été suffisamment méthodi-

[Texte]

that our research has been too crude; that it has lacked adequate controls.

Second, another example, while we know much about smoking habits across Canada, and that consumption is greater in some provinces than others, we really know little about the extent of the variation. One of our pilot studies—and this, let me say, without proper controls—nevertheless shows differences between the numbers of young smokers in two Ontario towns, and yet the towns are only 20 miles apart. We do not rely on these data, but clearly the matter should be pursued.

Your Committee has been interested in the effect of parental smoking on the development of the habit in children. For some years, different approaches to research have indicated that there is a higher probability that children will smoke if their parents smoke than if their parents do not smoke. However, there is some reason to believe that the crucial factor is not that the parents smoke, but rather how much the parents care that their children do not smoke. That is to say, where the parent smokes, has tried to quit and can not but explains the situation to the child and makes plain his concern for the child, it is more probable that the child will not smoke. Curiously enough, there is a reverse twist to this problem which has received little publicity; namely, that parents with children seem to find it easier to stop smoking than do single persons or married people with no children. Some of these factors may underlie pilot study data which show some large differences between our two Ontario samples in the number of Grade Seven smokers whose parents also smoke. The data also indicate that even if a parent smokes, about 50 per cent of the children in the sample do not.

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We note that in Mr. Mather's Bill C-45, clause 4, it is proposed to penalize juveniles guilty of possession, purchase or use of tobacco in various forms. Our understanding of juveniles suggests that enactment of this clause might well constitute a challenging game on the part of the young people to defeat the Establishment, with relatively little penalty, at the cost of a cumbersome enforcement procedure. Of course, there might be the positive effect of parental involvement in the Court procedure which, in turn, might lead to a greater control of juvenile smoking by parents and which Mr. Mather may have had in mind.

[Interprétation]

ques et qu'elles n'ont pas eu de modes de réglementation pertinents.

En second lieu, même si nous connaissons bien l'habitude des fumeurs au Canada, et même si nous savons que la consommation de tabac est plus élevée dans certaines provinces que dans d'autres, nous savons très peu de choses sur l'importance des variations. Une de nos études pilotes, effectuée sans modes de vérification pertinents, a révélé des différences entre deux groupes de jeunes fumeurs de deux villes ontariennes, qui ne sont pourtant éloignées que de vingt milles. Nous n'accordons pas énormément d'importance à ces données, mais il est évident que cette question devrait être étudiée plus à fond.

Votre Comité s'intéresse à la transmission des habitudes des fumeurs à leurs enfants. Depuis quelques années, diverses recherches ont montré qu'il est plus probable que les enfants fument si leurs parents fument aussi. Cependant, il y a des raisons qui nous portent à croire que le facteur essentiel n'est pas que les parents fument, mais plutôt jusqu'à quel point les parents tiennent à ce que leurs enfants ne fument pas. C'est-à-dire que lorsque les parents fument, qu'ils essaient en vain d'abandonner cette habitude et qu'ils expliquent la situation aux enfants en leur faisant comprendre pourquoi il ne faut pas fumer, il est probable que l'enfant ne fumera pas. Fait curieux, l'inverse se produit également, mais on en parle peu; les conjoints qui ont des enfants arrêtent plus facilement de fumer, semble-t-il, que les célibataires ou les conjoints sans enfant. Cela ressort des données de l'étude pilote, qui révèlent des différences considérables entre les deux échantillons ontariens d'élèves de septième année qui fument et dont les parents fument également. Les données indiquent aussi que même si les parents font l'usage du tabac, environ 50 p. 100 des enfants de l'échantillon ne fument pas.

Nous constatons que dans le bill C-45 de M. Mather, article 4, on tend à imposer des sanctions aux jeunes gens qui possèdent, achètent ou fument du tabac sous toutes ses formes. Tel que nous connaissons les jeunes, nous croyons qu'une disposition de ce genre pourrait constituer pour les jeunes un défi de la part de l'autorité, les sanctions étant relativement légères et leur application difficile. Bien entendu, cela aurait peut-être pour effet positif d'impliquer les parents dans les poursuites judiciaires, ce qui les amènerait peut-être, du même coup, à exercer une surveillance plus stricte pour empêcher les adolescents de fumer. C'est peut-être ce que M. Mather avait à l'idée.

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Too, the entire matter of juvenile purchase has been immensely complicated by the prevalence of vending machines, to the point of some resentment by store operators who do not wish to allow juvenile purchase but, at busy times, cannot give adequate supervision. Thus, clause 5 of the Bill C-45 may place the vendor in a difficult position. One can easily imagine the fun it would be for a group of boys to play "Beat the Vendor". It is our feeling that the punishment approach might well be sacrificed for one on a public basis perhaps stressing the uselessness of smoking and raising questions to the young people such as "Why bother smoking? What good will it do you?" rather than hammering at "Don't do it". Experience with the young has taught us that the "What's wrong with it" argument is prized by youth for it places adults on the defensive, but youth is remarkably inept at arguing against the question "Why should you?"

[Interpretation]

D'autre part, toute la question de l'achat de cigarettes par les jeunes est extrêmement compliquée par l'existence des machines distributrices, au point qu'il pourrait y avoir des protestations de la part de commerçants qui ne veulent pas laisser les jeunes acheter des cigarettes, mais qui, lorsqu'ils sont très occupés, ne peuvent pas exercer la surveillance voulue. Ainsi, l'article 5 du bill C-45 pourrait mettre les commerçants dans une situation difficile. On peut aisément imaginer combien il serait amusant pour un groupe de garçons d'essayer de déjouer le commerçant. Nous estimons qu'il vaudrait beaucoup mieux, plutôt que de sévir, mettre l'accent sur le plan public, peut-être, sur l'inutilité de la cigarette, et poser aux jeunes des questions du genre: «Pourquoi fumer? Qu'est-ce que cela va te donner?» plutôt que de leur répéter à tout bout de champ: «Ne fume pas.» Nos contacts fréquents avec les jeunes nous ont appris combien ces derniers aiment se servir de l'argument: «Quel mal y a-t-il à cela», qui met les adultes sur la défensive. Par contre, ils ne trouvent rien à répondre à la question: «Pourquoi ferais-tu cela?»

One of the continuing puzzles for those in anti-smoking campaigns has been the paradox between the fact that so many smokers are well-informed on the hazards of smoking and yet continue the habit. It is tempting to think of curtailing the information type of propaganda. It must be noted, however, that data on smokers who did not stop tell us nothing about those who did and, further, nothing about those who may have been influenced not to begin. Some of our earlier research, furthermore, indicated that if the argument is altered from whether persons know of the hazards, to the point of how convinced they are of the hazards, then the data show that rate of cessation increases with greater conviction.

Un objet d'étonnement constant pour ceux qui participent à des campagnes contre l'usage du tabac est le fait paradoxal que tant de fumeurs soient au courant des dangers que comporte l'usage de la cigarette et continuent néanmoins à fumer. Il est tentant de songer à réduire la propagande du type informatif. Il faut remarquer, cependant, que les données relatives aux fumeurs qui n'ont pas arrêté de fumer ne nous donnent aucune indication sur ceux qui ont arrêté, ni, de plus, sur les personnes qui ont été encouragées à ne pas commencer. Certaines de nos recherches précédentes, en outre, indiquent que si l'on change d'argument, et que l'on cherche à savoir, non pas si une personne est au courant des dangers, mais jusqu'à quel point elle est convaincue de l'existence de ces dangers, les données permettent de constater que plus cette conviction est solide, plus il y a de gens qui renoncent à l'usage du tabac.

Finally, results from our recent pilot studies indicate that teenagers believe in special programs of education about smoking and health. They strongly endorse control of advertising. They are concerned about health dangers. If these data are confirmed by larger and better controlled studies, it seems clear that support of teenagers in anti-smoking campaigns could be anticipated.

Enfin, les résultats de notre récente étude pilote indiquent que les adolescents ont confiance dans les programmes spéciaux d'éducation sur le tabac et la santé. Ils sont fortement en faveur d'une réglementation de la publicité. Ils s'inquiètent de ce qui met en péril leur santé. Si ces données sont confirmées par des études plus vastes et plus poussées, il semble clair que nous pourrions compter sur l'appui des adolescents pour les campagnes contre l'usage du tabac.

The Chairman: Thank you, Dr. Wake. Is it the wish of the Committee that we proceed

Le président: Merci, docteur Wake. Le Comité désire-t-il commencer tout de suite à

[Texte]

with questioning Dr. Wake or wait until Dr. Moss has finished his statement?

Mr. Howe: Did I understand correctly that Dr. Wake has another appointment?

The Chairman: Yes, at 5:30.

Dr. Wake: I have until 5:30.

Mr. Otto: We could question Dr. Wake.

The Chairman: As you wish.

Mr. McBride: Mr. Chairman. The crucial point would be; are they along the same line? Is it really one presentation?

The Chairman: No; they are two different presentations.

Mr. McBride: They do not have to be linked together.

The Chairman: Is it agreed? You may direct your questions to Dr. Wake.

Mrs. MacInnis (Vancouver-Kingsway): I did not get Dr. Wake's organization.

The Chairman: Dr. Wake is an Associate Professor of Psychology at St. Patrick's College in Ottawa.

Mr. Otto: Dr. Wake, I think your brief is very well done. I have a question I would like to ask about which you might have some knowledge. Let us suppose that there was no advertising on television, or let us suppose that the children—and this is your specialty, the young children or young teenagers—were not exposed to the advertising, do you think imitation, one of another, or word of mouth, or bucking the Establishment would be just as influential, or do you really think there would be a drop in the smoking incidence among young people?

Dr. Wake: I think there would be a drop, yes. I do not think it would eliminate it by any means but I think there would be a drop and I think, if I recollect correctly, that in some countries there has been a drop associated with this; I do not say it caused it. I think so because it seems to me that when teenagers see adulthood made attractive, that is, a cigarette associated with what looks like an interesting adult kind of life, they are going to want to copy this because they do want to be seen early on as adults, and I think if we took this away from them it certainly would make a difference.

[Interprétation]

interroger le docteur Wake, ou préfère-t-il attendre jusqu'à ce que le docteur Moss ait terminé sa déclaration?

M. Howe: Avez-vous bien dit que le docteur Wake avait un autre rendez-vous?

Le président: Oui, à 5 h. 30.

M. Wake: J'ai jusqu'à 5 h. 30.

M. Otto: Nous pourrions interroger le docteur Wake.

Le président: Comme vous voudrez.

M. McBride: Monsieur le président, il y a une question importante. Les deux exposés traitent-ils du même sujet? S'agit-il d'un seul et même exposé?

Le président: Non, il s'agit de deux exposés distincts.

M. McBride: Nous n'avons pas à les présenter en même temps.

Le président: Est-ce qu'on est d'accord? Vous pourriez donc adresser vos questions au docteur Wake.

Mme MacInnis (Vancouver-Kingsway): Je n'ai pas compris le nom de l'organisation dont le docteur Wake fait partie.

Le président: Le docteur Wake est professeur adjoint de psychologie au Collège Saint-Patrick, à Ottawa.

M. Otto: Docteur Wake, votre exposé me semble excellent. Peut-être pourriez-vous me donner certains renseignements à ce sujet. Supposons qu'il n'y ait pas de réclame à la télévision ou supposons que les enfants ou les adolescents, et c'est là votre champ de compétence, ne seraient pas exposés à cette réclame, pensez-vous que l'instinct d'imitation ou le simple fait de vouloir se révolter contre l'ordre établi pousserait les jeunes à fumer ou pensez-vous qu'il y aurait une diminution de l'usage du tabac chez les jeunes?

M. Wake: Je crois qu'il y aurait une réduction. L'habitude ne disparaîtrait sûrement pas, mais il y aurait une réduction. Dans certains pays, il y a eu de fait une réduction par suite de l'interdiction de la réclame. Je ne dis pas quelle en a été la cause, mais il me semble que lorsque les adolescents voient une réclame qui représente la vie des adultes sous un jour attrayant où la cigarette est associée à une vie d'adulte intéressante, ils vont l'imiter, car ils veulent passer pour des adultes le plus tôt possible. Si nous leur enlevions cet attrait, il y aurait certainement une différence.

[Text]

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Mr. Otto: But then, as you will probably acknowledge, Dr. Wake, in most countries where there has been a substantial drop the curtailment of advertising went hand in hand with educational programs. The question I ask is, can it really be identified and pinpointed to the advertising or to the educational program as you have mentioned further on in your brief?

Dr. Wake: No, I would not attempt to say what apparently I have said. I did not mean to say this. I did not mean to say that we could demonstrate that only this did it. You asked me whether I thought so and I answered, "Yes, I think it would make a difference". I think it would make a significant difference, but I cannot demonstrate this. We cannot do this very well anyway without a very large research project; it is far too cumbersome.

Mr. Otto: Of course, there is no reason why you should not have the facilities to do a large research program if we are studying this problem, and it is a very serious problem. Again, on the same tack, so long as adults are smoking—you know, live adults are smoking—do you think the curtailment of smoking by television personalities would have that much effect? I am not arguing against it, but I am asking a question.

Dr. Wake: Of course, I am in favour of adults not smoking, too. We have to face the fact that this is a pattern of behaviour for many people, and I think it probably would be unfair for us to deny some people cigarettes. So there would be some examples.

On the other hand, I think the data that I mention here do demonstrate that you do have an example for many young children and they still do not smoke. Something is keeping them from smoking. I think that anything we can do that will remove even a partial temptation to smoke would be worthwhile.

I might just point out one other thing, and that is that I do not really see what the justification for advertising is anyway. If cigarettes are not useful and they are not going to do any good, why should they be advertised? From my point of view I do not think it would hurt a bit if we got rid of it.

Mr. Otto: I agree with you. In fact, I agree we could do this with the advertising of a great number of products, the use of which is questionable. However, getting back to page 4, and this is I think a very profound state-

[Interpretation]

M. Otto: Mais, comme vous le reconnaîtrez sans doute, docteur Wake, dans la plupart des pays où il y a eu une réduction considérable, la réduction de la publicité allait de pair avec les programmes d'éducation. Voici donc la question que j'aimerais poser. Est-ce qu'on peut vraiment l'attribuer à l'interdiction de la réclame ou aux programmes d'éducation?

M. Wake: Non, je n'essaierais pas de dire ce que j'ai dit. Je ne l'entendais pas ainsi. Je ne dis pas que nous pouvons démontrer que le résultat est attribuable à telle cause. Vous m'avez demandé si je le pensais et j'ai dit que c'était mon opinion. Je crois qu'il y aurait une différence considérable, mais je ne puis pas évidemment le démontrer. Nous ne pouvons pas le faire sans un programme considérable de recherches, qui serait beaucoup trop compliqué.

M. Otto: Il n'y a aucune raison pour laquelle vous n'auriez pas les services voulus pour entreprendre un programme de recherches. Vous étudiez ce problème qui est très grave. Encore une fois, dans la même veine, dans la mesure où les adultes fument, des adultes présentés en direct à la télévision, pensez-vous que le fait que les personnalités présentées à la télévision, ne soient pas en train de fumer, auraient de tels effets? Je ne nie rien; je pose simplement la question.

M. Wake: Bien entendu, je préférerais, moi aussi, que les adultes ne fument pas. Il faut nous rendre compte que, pour bien des gens, cela fait partie du comportement habituel, et je crois qu'il serait donc injuste d'empêcher certaines personnes. Il y aurait ainsi toujours de mauvais exemples.

D'autre part, j'estime que les données que je viens de mentionner montrent bien que bon nombre de jeunes enfants reçoivent ce mauvais exemple, et pourtant ne fument pas. Il y a quelque chose qui les retient de fumer. Tout ce que nous pouvons faire, à mon sens, pour éliminer même une tentation partielle de fumer en vaut la peine.

Je pourrais mentionner une autre chose, c'est que je ne vois pas du tout de justification pour la réclame. Si les cigarettes ne servent à rien et ne font aucun bien, pourquoi en faire la réclame? Pour ma part, je ne vois pas que nous perdriions quoi que ce soit en abandonnant la réclame.

M. Otto: Je suis tout à fait d'accord avec vous. En fait, j'estime que nous pourrions en faire autant avec la réclame pour toutes sortes d'autres produits dont l'utilité est contestable. Pour en revenir à la page 4, je crois

[Texte]

ment that you have made, and a discovery. You say:

One of the continuing puzzles for those in anti-smoking campaigns has been the paradox between the fact that so many smokers are well informed on the hazards of smoking and yet continue the habit.

Then you go on to say that it is a question of conviction. I think you are absolutely right. It is all well and good to rationalize, but when you are finally convinced of the association between dangers to health in smoking then, of course, it is of some consequence. Previous to that, in this paper you point out that it seems to be easier for adults who are parents to give up smoking than for those who have no children. Is it a question of motivation?

Dr. Wake: So far as I can make out, it seems to be that the parents are so anxious for their children not to smoke that it does motivate them to break a habit that is very difficult for them to give up. We have had what I suppose you would call anecdotal evidence of this. Sometimes there has been a kind of game between the young people and the parent. The child says: "Well, if you do not want me to smoke, you quit; and if you quit, I will quit." This has worked as a game between them.

Mr. Otto: Of course, the children always test the king of the castle.

Dr. Wake: That is right.

Mr. Otto: However, we just mentioned a point of motivation. At least you thought it might be a motivation on the part of the parent to show good example, and that is a very strong motivation. How about the motivation of the purse? Let us suppose there was

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a tax of a dollar per package on cigarettes. Would that be effective as far as motivation is concerned?

Dr. Wake: Do you mean motivation to the child?

Mr. Otto: Motivation to the parent, and possibly the child too. Let us suppose a package of cigarettes cost \$1.50.

Dr. Wake: I think that for some people it probably would rule out smoking for them. People who are strongly concerned about costs and who keep a tight budget might conclude they simply cannot smoke. Others, I

[Interprétation]

que vous avez fait là une déclaration très profonde, et une découverte. Vous dite:

Un sujet constant d'étonnement pour ceux qui participent à des campagnes contre l'usage de la cigarette, c'est le fait paradoxal que, tant de fumeurs soient au courant des dangers que présente l'usage du tabac et continuent néanmoins à fumer.

Puis vous poursuivez en disant que c'est une question de conviction. J'estime que vous avez parfaitement raison. C'est bien joli de faire des raisonnements, mais lorsqu'on est vraiment convaincu des dangers que présente la cigarette pour la santé, cela prend de l'importance. Plus haut dans ce document, vous faites remarquer qu'il semble être plus facile pour les parents qui ont des enfants d'abandonner l'usage du tabac que pour ceux qui n'en ont pas. S'agit-il d'une question de motifs sérieux?

M. Wake: Pour autant que je sache, il semble que les parents tiennent tellement à ce que leurs enfants ne fument pas que cela les incite à abandonner cette habitude, malgré les sacrifices que cela demande. Nous avons des preuves anecdotiques, si l'on peut les appeler ainsi, de ce fait. Parfois, il y a une sorte de jeu entre les parents et les jeunes. L'enfant dit: «Si vous ne voulez pas que je fume, cessez de fumer; si vous vous arrêtez, je m'arrêterai aussi.» Il s'agit d'un petit jeu entre eux.

M. Otto: Bien sûr, les enfants mettent toujours les parents à l'épreuve.

M. Wake: C'est exact.

M. Otto: En tout cas, nous venons de mentionner la question des motifs sérieux. Du moins, vous pensez que c'est peut-être un motif de la part des parents que de donner le bon exemple, et c'est là un motif très sérieux. Que dire de la question argent? Supposons qu'il y ait une taxe d'un dollar sur chaque paquet de cigarettes. Cela représenterait-il un motif sérieux?

M. Wake: Pour les enfants?

M. Otto: Pour les parents, et sans doute aussi pour les enfants. Mettons qu'un paquet de cigarettes coûte \$1.50.

M. Wake: Je pense que cela empêcherait sans doute certaines personnes de fumer. Les gens qui surveillent leurs dépenses et qui ont un budget serré décideraient sans doute qu'il n'est plus question de fumer. D'autres, je

[Text]

think, would give up something else rather than smoking. We recently have had one example of a man who is suffering severely from some kind of respiratory illness. He is satisfied it is due to smoking, and yet he continues to smoke. So that some people, even though they know the danger and they are highly motivated, still cannot break it up. I think some people would consider a tax of \$1.00 on a package of cigarettes so tough they might give up something like education for their children or good food or something of this nature. Therefore, I think it would have to be looked at very closely.

There is another thing that would disturb me a little bit about this, and it is just an idea, but I think if you put a tax of a dollar on cigarettes and you had, as we do have, a number of young people who are smoking, some of them might be tempted to get their cigarettes illegally. It might be easier to steal them than it would be to buy them.

Mr. Otto: I want to just go back to what you said. I am not speaking of the person who you say will give up food for cigarettes. I am speaking of the average smoker, the one who Dr. Moss would say has a chance of giving it up. We are not dealing with a problem where everyone who smokes finds it absolutely impossible.

Dr. Wake: No, I would say that some people would simply say, "We cannot smoke anymore, it is too expensive."

Mr. Otto: As many Canadians know, in Holland and Belgium during the war cigarettes were 10 guilders apiece on the black market. And obviously many of the people of Holland who were smokers were not happy—possibly all they could afford was two cigarettes a day or two cigarettes a week—but they survived somehow for a long time. My question is, do you think that the purse, as far as the Canadian citizen is concerned, is as strong a motivation as putting up a good example for the children?

Dr. Wake: I have no data so I really do not know what it would be. I think that you would get different responses from different people, because there would be competing motivations and whichever motivation was more important would win. I think you might be surprised, if we did do this, to discover how many people would feel that it was quite an unfair tax...

[Interpretation]

pense, préféreraient sacrifier autre chose plutôt que la cigarette. Nous avons eu l'exemple récent d'un homme qui souffre gravement d'une maladie respiratoire. Il sait avec certitude que cela est dû à l'usage de la cigarette, et pourtant il continue à fumer. Donc, il y a des gens qui, même s'ils sont au courant des dangers et ont de bonnes raisons d'arrêter, ne peuvent renoncer à cette habitude. Je crois que certaines personnes trouveraient une taxe d'un dollar sur un paquet de cigarettes si dure pour leur budget qu'elles renonceraient peut-être à la bonne nourriture, à l'éducation de leurs enfants, ou à quelque chose de ce genre. Je crois donc qu'il faudrait examiner cette question de très près.

Une autre chose m'inquiéterait en l'occurrence; ce n'est qu'une hypothèse, mais je crois que si vous imposiez une taxe d'un dollar sur les cigarettes et qu'il y ait, comme c'est le cas ici, bon nombre de jeunes qui fument, certains d'entre eux seraient peut-être tentés d'obtenir des cigarettes en fraude. Il leur serait peut-être plus facile de les voler que de les acheter.

M. Otto: Je veux juste en revenir à ce que vous avez dit. Je ne parle pas des personnes qui, vous le dites, sacrifieraient la nourriture plutôt que la cigarette. Je parle du fumeur moyen, celui dont le docteur Moss dirait qu'il y a une chance pour qu'il abandonne l'usage de la cigarette. Nous n'avons pas un problème où tous ceux qui fument sont absolument incapables d'abandonner.

M. Wake: Non, je suis d'avis que certaines personnes diraient simplement: «Nous ne pouvons plus fumer, cela coûte trop cher.»

M. Otto: Comme le savent bien des Canadiens, en Hollande et en Belgique, pendant la guerre, les cigarettes coûtaient 10 florins l'une au marché noir. Évidemment, bon nombre de Hollandais qui étaient fumeurs n'étaient pas contents—tout ce qu'ils pouvaient se permettre, c'était deux cigarettes par jour, ou par semaine—et pourtant, ils ont tenu le coup pendant longtemps. Voici ma question: à votre avis, la question d'argent est-elle, en ce qui concerne les Canadiens, un motif aussi puissant que le désir de donner le bon exemple aux enfants?

M. Wake: Je n'ai pas de données là-dessus, et je ne sais donc vraiment pas ce qu'il en serait. Je pense qu'il y aurait des réactions différentes selon les personnes, car il y aurait là des motifs en concurrence, et le motif le plus fort l'emporterait. Vous seriez peut-être surpris de découvrir combien de personnes estimerait que cette taxe était tout à fait injuste, si l'on essayait de l'imposer...

[Texte]

Mr. Otto: Of course.

Dr. Wake: ... and that, therefore, to circumvent this tax was not really immoral.

Mr. Otto: Oh yes, we had that problem with alcohol if you recall for years, but it finally dawned upon them that alcohol sold by the government is perfectly moral, and sold by bootleggers immoral. It takes time but eventually it works out. That is all, Mr. Chairman.

The Chairman: Thank you, Mr. Otto.

Mr. Howe: Mr. Chairman, I would like to ask Dr. Wake a few questions in connection with his brief. It must be an interesting experience working with these young people as you are. What did you mean by "specialized" works?

Dr. Wake: What I really meant is that we do research in a fairly narrow field. It seems very big to us, but really we are not tackling anything like all of the problems having to do with smoking behaviour. In this research that we are carrying out, we are really working on how to prevent young people from begin-

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ning to smoke. This is our focus, and it might not answer many of the questions that you people would be interested in, because we are not tackling them.

Mr. Howe: What is the average age of the grade seven students you are working with?

Dr. Wake: I think it would be about 13 years. It varies a little bit, and this is one of our problems. It varies according to ability.

Mr. Howe: There have been some indications that children are maturing earlier these days. Is this a fact?

Dr. Wake: Physically it is. There are arguments that psychologically and socially they are maturing earlier. I am not as convinced of the latter.

Mr. Howe: Is this due to a change in our way of life or is it due to the fact that under our educational programs they start teaching more mature subjects in lower grades of school these days?

[Interprétation]

M. Otto: Bien entendu!

M. Wake: ... et, par conséquent, ne considéreraient pas comme immoral d'essayer de la contourner.

M. Otto: Oh, en effet, nous avons eu le même problème avec l'alcool pendant des années, si vous vous en souvenez, mais finalement les gens se sont rendu compte que l'alcool vendu par le gouvernement était parfaitement moral, alors que l'alcool vendu par les contrebandiers était immoral. Cela prend du temps, mais cela a finalement son effet. C'est tout ce que j'ai à dire, monsieur le président.

Le président: Merci, monsieur Otto.

M. Howe: Monsieur le président, je voudrais poser quelques questions au docteur Wake au sujet de son mémoire. Cela doit être très intéressant, docteur, de travailler avec les jeunes, comme vous le faites. Vous avez parlé de «travail spécialisé». Que voulez-vous dire par là?

M. Wake: Ce que je voulais dire, au fait, c'est que nous faisons des recherches dans un domaine assez limité. La tâche nous semble très importante, mais, à vrai dire, nous sommes loin de nous attaquer à tous les problèmes relatifs au comportement du fumeur.

Dans les recherches que nous faisons, nous essayons de trouver des moyens d'empêcher les jeunes de commencer à fumer. C'est sur ce problème que nous concentrons nos efforts; cela ne répondrait peut-être pas à bon nombre des questions qui nous intéresseraient, et desquelles nous ne nous occupons pas.

M. Howe: Quel est l'âge moyen des enfants de septième année, sur lesquels s'appuient vos expériences?

M. Wake: Je pense que c'est à peu près 13 ans. Cela varie un peu, et c'est là l'un de nos problèmes. Cela dépend des aptitudes de l'enfant.

M. Howe: On estime que les enfants mûrissent plus vite de nos jours. Est-ce vrai?

M. Wake: Physiquement, c'est vrai. Aux points de vue psychologique et social, on dit que c'est la même chose. Je ne suis pas tout à fait aussi convaincu de ce dernier point.

M. Howe: Est-ce que cela dépend du changement de notre mode de vie ou est-ce que parce qu'actuellement on enseigne des sujets plus avancés dans les basses classes aujourd'hui?

[Text]

Dr. Wake: I gather from some of my medical friends that the reasons for the earlier physical maturing are not at all clear. I asked about this because I think it is important and they told me up until last year or so that it could have something to do with the higher centres of the brain, perhaps more stimulation from environment on the higher centres of the brain. Am I making any sense? In any event, it is not entirely clear.

As to the other aspect, my guess—and it is a guess—is that we have learned how to teach more mature subjects better in the last 25 years than we did before, and consequently my children are exposed to the same mathematics in lower grades that I was exposed to in higher grades. So, I think it is that they have learned how to handle these things because they are better taught and there are better ways of doing it and therefore they are perhaps learning things at 15 that we learned at 17 or 18.

Mr. Howe: Of course, this would give effect to the sentence at the bottom of the first page, which reads:

The quick way to appear adult is to take on the trappings of maturity...

In other words, where it used to be at the age of 15 or 16, they now start this at 12 and 13. Is this true?

Dr. Wake: I do not think there is any question that we have seen young people attempting at much earlier ages to take on the trappings of maturity. They also attempt to go past this. They like to argue at earlier ages than they used to about more fundamental problems, perhaps, than we did but certainly in the social activities of young people today one can see an attempt to be mature far before their time, and in this particular city there has sometimes been an effort made to reverse this trend on the grounds that they are trying to be far more mature than they have the ability to be mature. So that socially in many ways, yes, they are being taught and being helped to be more mature earlier, and I think that would make the need for the cigarette perhaps a little more pressing.

Mr. Howe: Of course, this goes right through the whole field of their lives; even their clothing and their toys, and things, are more mature at an earlier age these days. Do you not think this is so?

Dr. Wake: Yes, than they were for us.

Mr. Howe: You make a statement on page three with regard to the pilot studies that

[Interpretation]

M. Wake: D'après certains médecins de mes amis, les raisons de cette maturité physique précoce ne sont pas très claires. J'ai posé des questions à ce sujet parce que ce me semble important. On m'a répondu qu'il pourrait y avoir une relation avec la stimulation apportée au cerveau. De toute façon, ce n'est pas tout à fait clair. Quant aux autres aspects, je pense, que nous avons appris à mieux enseigner les sujets avancés qu'il y a 25 ans, de sorte que mes enfants étudient les mathématiques avancées à un âge inférieur à celui auquel je les ai apprises moi-même. Alors, ils apprennent à manipuler ce genre de choses parce qu'on les leur enseigne mieux et ils apprennent des choses à 15 ans qu'on apprenait peut-être, nous, à 17 ou 18 ans.

M. Howe: Cela expliquerait la dernière phrase au bas de la première page, où il est dit:

Le moyen rapide de paraître adulte consiste à se parer des atours de la maturité...

Alors qu'autrefois, c'était à 15 ou 16 ans, aujourd'hui ils commencent à 12 et 13 ans. Est-ce exact?

M. Wake: Il n'y a pas de doute. Les jeunes essaient beaucoup plus tôt qu'auparavant de se parer des atours de la maturité. Et ils vont même plus loin. Ils aiment discuter, à des âges toujours plus jeunes, de problèmes plus fondamentaux que nous ne discutons nous-mêmes. Mais, on peut voir dans les activités sociales des jeunes, aujourd'hui, qu'ils essaient d'avoir de la maturité bien avant leur temps. On a même tenté, dans cette ville-ci de renverser cette tendance en déclarant qu'ils essaient d'être plus vieux qu'ils ne peuvent l'être. Alors, socialement, de bien des façons, on leur apprend à être plus mûrs plus tôt et c'est ce qui peut expliquer ce besoin de la cigarette.

M. Howe: Ceci se retrouve dans tous les domaines: leurs jouets, leurs vêtements, etc. Ils mûrissent plus rapidement. N'est-ce pas vrai?

M. Wake: Oui, plus rapidement que ce ne le fut pour nous.

M. Howe: Vous parlez, à la page 3 de votre mémoire, de l'étude que vous avez menée et

[Texte]

you have made and the differences between towns that are 20 miles apart, for instance, in the number of young people that are smoking. Would this partly be attributable to the fact that in one town they have more youth activities, a more active YWCA or Scouts or Guides or somebody who is more interested in promoting good hockey and youth activities than in the other?

Dr. Wake: I guess I will simply have to say that we have the data that shows there are these differences, and my qualifications about these all along—and I am talking about the pilot data, is that we do not know at all.

Mr. Howe: You have not continued your study to find out?

Dr. Wake: We have not had a chance. The data was worked up the day before yesterday and we have not had a chance to do so yet, and I do not think we will be able to answer this from the data we have. However, we have some hopes that in the larger study—not the pilot study—the one that is underway now, we might just be lucky. We might get some more information, and we will go back. It kind of startled us to find two towns that I think I could argue with you are very much alike. I am quite familiar with them and yet these differences are there. They might not hold up in another two towns but

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our point is the simple one that we have so much to learn when we can find differences between towns that are so close together. One expects differences in widely varying parts of Canada but not really in the same area. I do not.

Mr. Howe: You probably saw this book that was put out by the Department of National Health and Welfare in connection with the whole problem, and on page four they mention the fact that there are two definite areas for the smoker. There is the psycho-social factor and then there is the pharmaceutical factor that has an effect, and I am trying to get at the question of your own feelings with regard to these two towns. Do you not feel—and I feel this way—that in a community where there are people who are giving good leadership and direction in the fields of Scouting, Guiding and youth activities that they will have a certain effect on the habits of the young people that come under their direction?

Dr. Wake: I am, of course, tempted to say yes to what you say, but if I could change the tenor of this—which perhaps is unfair—and say that good leadership will make a differ-

[Interprétation]

des différences qui existent, entre des villes situées à 20 milles l'une de l'autre, dans le nombre des jeunes fumeurs. Est-ce que ceci serait partiellement attribuable au fait que dans l'une de ces villes, il y a plus d'activités pour ces jeunes ou qu'il y a une personne qui est plus intéressée à promouvoir ces activités pour les jeunes?

M. Wake: Je crois que je me contenterai de dire que les différences existent et que nous n'en savons pas davantage.

M. Howe: Vous n'avez pas continué l'étude?

M. Wake: Nous n'avons pas encore eu la chance de poursuivre cette étude puisque nous n'avons ces données que depuis avant-hier. Et je ne pense pas que nous puissions y répondre avec les données que nous avons. Mais nous espérons que dans une étude plus vaste, nous serons plus chanceux. Nous obtenons peut-être plus de renseignements. Nous avons été assez étonnés de voir ces deux villes qui sont fort semblables. Je les connais assez bien, et toutefois, les différences existent. Peut-être que cela ne se vérifierait pas dans deux autres villes, mais ce qui nous frappe c'est qu'il nous reste beaucoup à apprendre lorsque nous notons de telles différences entre deux villes si rapprochées. Nous pouvons nous attendre à des différences entre deux villes éloignées mais pas des villes rapprochées. Moi, je ne m'y attendais pas, en tout cas.

M. Howe: Dans la brochure publiée par le ministère de la Santé et du Bien-être sur *La cigarette et la santé*, on mentionne que deux facteurs différents entrent en jeu: les facteurs psychosociaux et l'élément pharmacologique. Je voudrais connaître vos propres impressions au sujet de ces deux villes. Ne croyez-vous pas, (c'est ce que moi, je pense) que dans ces villes où des personnes s'occupent de la jeunesse, que ce soit dans le scoutisme, le guidisme ou dans d'autres activités, que ces personnes auront une certaine influence sur les habitudes de ces jeunes.

M. Wake: Je suis tenté de répondre, oui. Et si je pouvais changer cela, cela est peut-être injuste, et dire que le leadership fait la différence et que ce leadership se trouve dans les

[Text]

ence and that good leadership is often found in a town where you have many organizations, then I think I would agree with you.

On the other hand, the simple fact that there are a number of organizations, a number of things that boys do, a number of groups they belong to and that they seem fairly active, I do not think over the years has demonstrated that just having the organizations stops a particular activity.

I know of one very large international organization that felt activity would prevent young men from all sorts of behaviour that they did not think was good, but I do not think they were ever able to demonstrate this. If you were to ask me if I thought these activities and the leadership in these groups, and this sort of thing, should be encouraged my answer would be yes, but I cannot think of any data that would back it up.

Mr. Howe: There are no statistics on this particular question?

Dr. Wake: That is right.

Mr. Howe: Of course, my bill in connection with this is one that has to do with controlling the amount of nicotine and tar in the cigarettes. This will be the function of it. Of course, that comes into the pharmaceutical question. Do you not feel that this particular thing is a drug that the young people start and it makes it more difficult for them to stop because it has an effect on them. It has an effect that brings them back.

Dr. Wake: I would really rather not deal with that, sir. I do not really know anything about it. I must say that to a great extent I confine myself with young people to simply trying to say, "I do not know any reason why you should smoke. I do not think there is a good reason for it and the pharmaceutical people tell us that there are these tars and I happen to be convinced that they are dangerous". But certainly from the psycho-social aspect, which is mine, I concentrate on trying to get them to give me a reason for smoking, and that really means any cigarette and it would mean a cigarette with no tar in it, because I do not know any reason for smoking those either.

Mr. Howe: But it is rather difficult to convince the young people of this, is it not?

Dr. Wake: It has been. I have never said this before to anyone, but young people being what they are and changing their fads as often as they do, in some ways it would not surprise me if someday they changed and did almost a flip-flop—would that not be some-

[Interpretation]

viles où il y a de nombreux organismes, alors je serais d'accord avec vous. D'autre part, la seule existence de ces organismes, les activités des adolescents, leur appartenance à ces associations et le fait qu'ils y participent activement n'ont pas, que je sache, au cours des années, mis un terme à une activité quelconque.

Je connais une organisation internationale importante qui pensait que ses activités tiendraient les jeunes à l'écart de toutes sortes de comportements qu'elle jugeait mauvais, mais je ne pense pas qu'elle ait jamais réussi à le prouver. Si vous me demandiez: «Pensez-vous que ces activités devraient être encouragées?» Je vous répondrais: «Oui.» Mais je n'ai pas de données à vous offrir pour appuyer ma réponse.

M. Howe: Il n'existe pas de statistiques à ce sujet?

M. Wake: Non.

M. Howe: Mon projet de loi traite du contrôle de la nicotine et du goudron dans les cigarettes. C'est le but de ce bill. Il rejoint cet élément pharmacologique dont nous parlions. Ne croyez-vous pas que la cigarette a l'effet d'une drogue chez ces jeunes personnes et qu'il leur est difficile d'arrêter à cause de l'effet que la cigarette a sur eux?

M. Wake: Je préférerais ne pas m'aventurer sur ce terrain. De fait, je n'en sais rien, et je tente de m'en tenir à dire ce qui suit aux jeunes: «Je ne connais aucune bonne raison pour vous dire de fumer. Les spécialistes en pharmacie nous parlent du goudron que contient la cigarette et je suis convaincu que c'est là un danger.» Du point de vue psycho-social, je tente de les convaincre de me donner une raison pour laquelle ils devraient fumer, et je parle même d'une cigarette qui ne contiendrait pas de goudron car je ne vois pas pourquoi on fumerait ces cigarettes-là non plus.

M. Howe: Mais, c'est assez difficile de convaincre les jeunes, n'est-ce pas?

M. Wake: Cela a été difficile. Je ne l'ai jamais dit avant à qui que ce soit, mais, les jeunes étant ce qu'ils sont et changeant de modes et de caprices aussi souvent qu'ils le font, cela ne m'étonnerait pas qu'ils changent un jour tout à fait. Ce serait vraiment quel-

[Texte]

thing to see—where the cigarette became the thing not to do, and I think this is possible.

Mr. Howe: Let us hope it happens.

Dr. Wake: Yes.

Mr. Howe: Thank you.

The Chairman: Mrs. MacInnis.

Mrs. MacInnis (Vancouver-Kingsway): I am very much interested in this whole survey and the psychological aspects of it. I just wonder if as part of your survey you ask these young people some very direct questions. For instance, have you asked them why they smoke, to try to get at the reason?

Dr. Wake: Yes, we have.

Mrs. MacInnis (Vancouver-Kingsway): With what result?

Dr. Wake: You know, I sometimes think that this is the wrong question to ask, because if you ask them why they think they have to have a logical reason, then they try to think of a logical reason and then assume they give it. Nevertheless, we have asked and we do ask, and one of the answers we get is, "Because I was curious". Other reasons given for doing it are, "My friends did it and therefore I did it too".

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Some of them feel that they started because they tried it and found that it gave them something to do with their hands. Look, I use a paper clip instead of a cigarette. This business of having to do something with the hands has been very important over the years, which suggests to us that we ought to find a better way for young people—and older people—to control the tension they are bound to feel at times in a situation that is stressful to them. We should have some kind of an educational campaign where we can say, "Instead of using a cigarette, find another way of getting rid of your tension". After all, most of the things young people indulge in are not a matter of life and death and they should not be so tense about them anyway.

Mrs. MacInnis (Vancouver-Kingsway): Would I be correct in thinking that from a psychological point of view you believe that tension is a big factor behind making people smoke?

Dr. Wake: Certainly that has been a popular view, and I was afraid that you or someone else might ask me something about this, and I do have some information on it which

[Interprétation]

que chose à voir, si la cigarette n'était plus de mode. Je crois que c'est possible.

M. Howe: Espérons que ça se produise.

M. Wake: Oui.

M. Howe: Merci.

Le président: Madame MacInnis.

Mme MacInnis (Vancouver-Kingsway): Je m'intéresse beaucoup à votre enquête et à ses aspects psychologiques. Je me demande si vous avez demandé aux jeunes des questions directes. Par exemple, leur avez-vous demandé pourquoi ils fument, pour en connaître la raison?

M. Wake: Oui, nous l'avons fait.

Mme MacInnis (Vancouver-Kingsway): Quelles sont ces raisons?

M. Wake: Vous savez, je pense parfois que ce n'est pas la bonne question à poser, car si vous leur demandez pourquoi, ils cherchent une raison logique, ils réfléchissent, ensuite ils donnent une raison qu'ils croient logique. Toutefois, nous l'avons demandé. Et on nous a dit, entre autres: «Parce que j'étais curieux.» Une autre réponse qu'on nous a faite: «Mes amis le faisaient, donc, j'ai essayé moi aussi.»

D'autres pensent qu'ils ont commencé à fumer parce qu'ils ont essayé la cigarette et ont réalisé qu'ils pouvaient ainsi occuper leurs mains. Moi, je me sers d'un trombone à la place. On a beaucoup parlé, au cours des années, du besoin de faire quelque chose de ses mains, ce qui me porte à croire qu'il faudrait trouver un meilleur moyen pour que jeunes et vieux puissent contrôler leur tension d'une autre façon lorsque le besoin s'en fera sentir. Il faudrait lancer une campagne d'éducation pour convaincre les gens de trouver autre chose que la cigarette pour éliminer cette tension. Car ce ne sont pas toujours des questions de vie ou de mort qui intéressent les jeunes et ils ne devraient pas être aussi tendus.

Mme MacInnis (Vancouver-Kingsway): Au point de vue psychologique, vous pensez que la tension est un facteur important qui encourage les gens à fumer?

M. Wake: C'est une opinion assez répandue—et j'avais peur que quelqu'un pose une question à ce sujet. J'ai des renseignements, mais ils concernent une thèse de maîtrise ès

[Text]

happens to be in an unfinished thesis by an M.A. candidate and I do not have her permission to release the data.

Mr. Otto: Dr. Hans Selye will be here next week, I believe.

Dr. Wake: Perhaps what I can do if you think it would be useful is to ask her whether she will mind if I pass the information on to you. Essentially this is the kind of stress that arises during examinations in school which, I think, we would all agree are stressful moments for young people. The data are interesting and if you like I will get them to you if she will allow me to.

Mrs. MacInnis (Vancouver-Kingsway): I would love to see them. May I ask another question? Have you asked them how they got started?

Dr. Wake: Yes.

Mrs. MacInnis (Vancouver-Kingsway): What sort of replies did you get?

Dr. Wake: One of the answers they give is that they started because a friend was smoking; and they started because since friends are smoking and since adults are smoking and since the ads—if I can come back to the ads again for a minute—indicate that this is really pleasurable they want to find out about it themselves. They start this way and I think it is to the credit of many of these young people that they give it up. We can find data to show that they quit smoking after they have tried.

But there is this challenge, you know, to act like an adult and so they want to try the cigarette and, of course, one of the astonishing things is how quickly they can smoke like an adult. They have all the manoeuvres, all the motions, and frankly it makes some of them feel more like a grown-up. They can say to other kids, "You really are not grown-up; you do not even smoke, do you?" and the other child says, no. Then they say, "Well, there you are."

So, there is curiosity, other people, and no doubt the fact that their parents smoke; this has some effects sometime.

Mrs. MacInnis (Vancouver-Kingsway): Have you ever asked any of them what would make them stop?

Dr. Wake: I do not think we have asked that question in that form. We are asking one that I think is like it, and maybe we are not really asking a question so much as trying to get them into a discussion.

In the present research we are doing, essentially we are trying out a number of

[Interpretation]

arts inachevée d'un candidat à la maîtrise et je n'ai pas sa permission pour donner les détails.

M. Otto: Dr. Hans Selye sera ici la semaine prochaine, je crois.

M. Wake: Si vous pensez que ce serait utile, je peux peut-être lui demander si elle me permet de faire connaître ces renseignements. Essentiellement, c'est le genre de stress, par exemple, qui arrive au cours des examens. Ce sont des moments de stress pour les jeunes, nous le reconnaissons. Si j'ai la permission, eh bien, je vous apporterai ces renseignements.

Mme MacInnis (Vancouver-Kingsway): Je voudrais poser une autre question. Leur avez-vous demandé dans quelles circonstances ils ont commencé à fumer et pourquoi?

M. Wake: Oui.

Mme MacInnis (Vancouver-Kingsway): Quelles ont été leurs réponses?

M. Wake: Une des réponses données est parce que leurs amis fumaient et comme leurs amis fument comme les adultes fument et, si je peux revenir à la publicité, on indique que c'est vraiment un désir et ils veulent vraiment savoir eux aussi. Il y en a plusieurs qui cessent de fumer après avoir essayé. Je pense que c'est à leur crédit mais c'est un défi. On veut se conduire en adulte.

Alors ils veulent essayer de fumer et il y a une chose surprenante, ils se rendent compte tout de suite qu'ils peuvent fumer comme les adultes. Ils ont les gestes et tout, et c'est un fait qu'ils se sentent plus adultes. Ils peuvent dire aux autres: «Eh bien, vous êtes encore des enfants, vous ne fumez même pas.» Certains le font par curiosité et aussi parce que leurs parents fument, cela a une influence aussi.

Mme MacInnis (Vancouver-Kingsway): Leur avez-vous déjà demandé ce qui les ferait cesser de fumer?

M. Wake: Nous n'avons pas posé la question sous cette forme, mais il y a une question semblable. Peut-être que nous ne posons pas tellement une question mais nous essayons d'entreprendre la discussion.

[Texte]

different ways of trying to get young people to consider the hazards and see whether we cannot get them to stop.

One of the things we want them to do—and Dr. Walther is very keen on this—is to get them in a group and say, look we have had bad luck with young people in getting them to stop smoking once they start. Would you tell us how we should approach young people so that we can convince them not to start and, if they have started, convince them to stop.

Now, I think this is the same thing that you are talking about. Instead of being a direct question, it is trying to get them to think seriously about methods that we could use after they have told us to get young people to stop. We have not started these; we will start next week or the week after.

Mrs. MacInnis (Vancouver-Kingsway): What I had in mind is that there are certain types of sports, apparently, that are their incentives; belonging to certain teams or doing certain things which would be incentives.

Dr. Wake: In our pilot study the young people said that they felt the association of prominent people, including athletes and others, with cigarettes was wrong because it would convince people to start, so they certainly want to be involved in this kind of thing.

Incidentally, you have asked me the question, have you ever asked them? When I say yes, we have asked them, I mean we have asked them on a questionnaire. It might have been better for us to have done some actual interviewing. We have not done this yet. Whether we will is questionable, because the interviewing technique which has some advantages over just a plain questionnaire is a very lengthy, time consuming and highly skilled process. Mind you, it might be a lot better too.

Mrs. MacInnis (Vancouver-Kingsway): Have you noticed any difference in the amount of smoking between income groups? Is there more smoking in higher or lower income groups, or is there any distinction at all?

Dr. Wake: My recollection is that the lower income groups are more likely to smoke; a higher percentage of them do. This is just recollection, though. From an earlier study we have data, not from young people but from adults, and the indications were that the

[Interprétation]

Et dans notre projet de recherche, nous essayons différentes méthodes pour que les jeunes considèrent les risques de fumer et songent à cesser. Un des projets que nous avons, et le docteur Walther est très compétent dans ce domaine, c'est de les grouper et de leur dire: Voici, nous avons éprouvé quelques difficultés à amener les jeunes à cesser de fumer. Pourriez-vous nous dire comment nous devrions procéder pour les convaincre de ne pas commencer à fumer et s'ils l'ont fait, les persuader de cesser.

Je pense que c'est de cela que vous parlez. Au lieu d'une question directe, on veut les faire réfléchir sérieusement au sujet de méthodes que nous pourrions utiliser pour faire cesser les jeunes de fumer. Nous n'avons pas encore commencé; ce sera pour la semaine prochaine ou la suivante.

Mme MacInnis (Vancouver-Kingsway): Voici à quoi je songeais. Par exemple, les sports de certains genres sont des stimulants. Par exemple, les sports en équipe. On est motivé.

M. Wake: Dans l'étude pilote, les jeunes ont dit qu'ils pensaient que l'association avec des gens bien connus y compris des athlètes pourrait les convaincre, que la cigarette n'est pas bonne, parce qu'ils veulent jouer un rôle dans cela.

Vous m'avez demandé cette question et lorsque je dis oui, cette question apparaissait sur une questionnaire et il aurait été mieux de faire des interviews, nous ne l'avons pas fait encore. Je ne sais pas si nous le ferons ou non car la technique de l'interview a des avantages sur le questionnaire mais c'est très long et c'est très difficile à préparer mais ce serait peut-être mieux.

Mme MacInnis (Vancouver-Kingsway): Avez-vous établi une différence entre l'habitude de fumer parallèlement au revenu? Est-ce qu'on fume plus dans les milieux où l'on gagne plus ou quoi?

M. Wake: Les gens à revenu moins élevé fument plus. C'est un souvenir car je n'ai pas de données là-dessus. Oh oui, plutôt, nous en avons des données. Une autre étude, faite non pas avec les jeunes, mais avec les adultes nous a indiqué que les gens appartenant aux

[Text]

lower socio-economic level is more likely to smoke.

Mrs. MacInnis (Vancouver-Kingsway): Why?

Dr. Wake: Well, my answer to this, I think, an unfortunate one. I think perhaps the reason they do is because we have better educational devices for the higher socio-economic level people. It is not because more of them want to smoke or would smoke; it is simply that when we have an anti-smoking campaign it is geared to the middle and upper classes. I do not think we know anything at all about how to reach the lower socio-economic group with a good campaign. After all, if you put it in reading material, as we often do, they do not read it, because a lot of them—not all, of course, but I am talking of generalities—do not read much of anything.

They may watch TV, but with the kind of programs often that we put on TV—and I have been involved with these and have been on some of them—I am sure that what I said and my approach to it was not going to reach the lower socio-economic level people. So, I do not think there is any real sort of basic difference between the groups.

I think probably our propaganda efforts—and I use the word propaganda, I think, in the proper sense—are just geared to the middle and upper levels.

Mrs. MacInnis (Vancouver-Kingsway): Have you noticed very much difference in the smoking habits of girls and boys in this project?

Dr. Wake: Yes, we are not different from other findings in this. More boys smoke than do girls, but I think any data we do have indicate that the women are catching up—this is for women and young people.

We made a recommendation at one time in one of our reports to the government that we thought something ought to be done about this. If there is some kind of modelling effect—which is our word for starting to smoke because one of your friends does, or someone else does—clearly if we can keep the numbers of women who smoke from increasing very much there will be far less for the younger people to identify with, far fewer people. So I think if we could somehow persuade women not to act like men in more of them starting to smoke, this would help in many ways. In other words, I think we should have a very strong campaign of some kind aimed at women.

Mrs. MacInnis: Thank you, very much.

[Interpretation]

niveaux socio-économiques moins élevés fument plus que les autres.

Mme MacInnis (Vancouver-Kingsway): Pourquoi?

M. Wake: Ma réponse est la suivante: Je pense que c'est malheureux et je pense qu'ils fument plus parce que nous avons de meilleurs moyens d'instruction pour les groupes d'un niveau économique plus élevé lorsque nous avons une campagne contre la cigarette elle s'adresse plutôt aux classes plus élevées. Je pense que nous ne savons pas comment atteindre les autres. Car après tout, si vous le publiez, ces gens-là ne le liront pas, mais je parle de façon générale, il y a beaucoup de gens des niveaux inférieurs qui lisent très peu.

Ils regardent peut-être la télévision, mais dans les émissions de télévision, et j'ai participé à certaines émissions de télévision, je suis sûr que ce que j'ai dit ne pouvait pas atteindre ces gens-là. Alors je ne pense pas qu'il y ait de différence fondamentale entre les groupes.

Je pense plutôt que nos efforts de propagande, et je me sens «d'efforts de propagande» dans le bon sens du mot, cela s'adresse plutôt à la classe moyenne et supérieure.

Mme MacInnis (Vancouver-Kingsway): Y a-t-il beaucoup de différence entre les filles et les garçons quant à la cigarette?

M. Wake: Oui. Il y a plus de garçons que de filles qui fument mais dans toutes les données on voit que les femmes se rattrapent, chez les jeunes du moins.

Nous avons fait une recommandation dans un rapport adressé au gouvernement disant que nous pensons qu'il faudrait faire quelque chose à ce sujet, car si cela sert de modèle, par exemple, si on fume parce que ses amis fument, on pourrait empêcher le nombre de femmes qui fument d'augmenter, car il y aura moins de gens qui s'identifieront à elles. Mais si nous pouvons persuader les femmes de ne pas agir comme les hommes, cela pourrait aider de bien des façons. Autrement dit, je crois que nous devons entreprendre une campagne intense axée sur les femmes.

Mme MacInnis (Vancouver-Kingsway): Merci beaucoup.

[Texte]

Mr. McBride: Mr. Chairman, I would like to identify with Mr. Otto and Mrs. MacInnis in commending Dr. Wake and his associates on this paper. In my humble opinion it is very good; very tantalizing would be the best word to describe it. It seems to demonstrate, if I might make an observation, that the research into the psychological factors determining human behaviour—in this instance, smoking—is certainly in its embryonic stage. So many of these projects need to be pushed further and, therefore, I want to encourage Dr. Wake, Dr. Walther and Miss Haycock to continue this.

Mr. Chairman, I also want to draw an observation that when we had Mr. Ouimet from the CBC here, we came to the similar conclusion that this paper comes to, and that is that advertising beamed at adults will perhaps have a more poignant effect upon youth than advertising beamed at youth, because youth wants to be grown up and this came out at that earlier point.

I have a couple of specific questions. Would it be permissible, or do you wish, to tell us what two towns you studied, or is this a question that you would rather not answer publicly?

Dr. Wake: When we go to a school in a town, we promise them that the results will not be published until they have had a chance to see them first. Now, one of these towns has indicated that it does not matter very much to them. We have not had an opportunity within the last day or so to contact the other town to ask them whether they care. Again, this would be a very simple thing to get for you, I think.

Mr. McBride: I am somewhat interested on the assumption that since you are here in Ottawa and my constituency is right up against Ottawa, there may be some of my towns here and I am very familiar with them.

Mr. Chairman, Dr. Wake suggested that many teenagers begin to smoke and then terminate the habit, and then he also referred to the matter of children of smoking parents tending to be smokers more often than children of non-smoking parents. Let me ask you a fairly technical question here. Does the fact that the parents do smoke motivate children to smoke, or does the fact that the parent smokes undermine his protestations against his child's smoking with the result that the child is not as motivated to give it up and that in fact similar numbers of children of smokers and non-smokers begin the habit but the non-smoking parent argues from a strong-

[Interprétation]

M. McBride: Monsieur le président, j'aimerais souscrire aux propos de M. Otto et de M^{me} MacInnis et féliciter le docteur Wake et ses adjoints pour la préparation de cet exposé qui me semble excellent et affriolant. C'est le meilleur adjectif que je puisse employer pour le décrire. Je crois que la recherche des facteurs psychologiques déterminant le comportement humain et en l'occurrence l'habitude du tabac dépasse le stage embryonnaire. Bon nombre de ces projets doivent avoir plus d'ampleur. J'encourage donc le docteur Wake, le docteur Walther et M^{lle} Haycock à continuer leur travail.

Monsieur le président, je tiens aussi à formuler une observation. Lorsque nous avons rencontré M. Ouimet de Radio-Canada, nous avons tiré, je crois, une conclusion analogue à celle que tire le document, à savoir que la réclame a un effet plus prenant sur les jeunes que sur les adultes. Les jeunes veulent être adultes plut tôt.

J'ai quelques questions précises à poser. Pouvez-vous nous dire quelles deux villes vous avez étudiées ou est-ce que cette question est secrète?

M. Wake: Lorsque nous allons dans une école, dans une ville, nous leur disons que les résultats ne seront pas publiés jusqu'à ce qu'ils aient eu l'occasion de les voir. Dans le cas d'une de ces villes, ça ne leur fait rien mais nous n'avons pas eu l'occasion depuis quelques jours de nous mettre en communication avec les autorités de l'autre ville pour leur communiquer les résultats. Mais je crois qu'il sera assez facile de vous les présenter.

M. McBride: Puisque vous êtes ici à Ottawa, et que ma circonscription est très près d'Ottawa, peut-être ces deux villes tombent dans ma circonscription. C'est tout ce que je supposais.

Monsieur le président, le docteur Wake a dit que bon nombre d'adolescents commencent à fumer et puis abandonnent l'habitude et là aussi parlait de la question des enfants qui ont des parents qui fument et qui tendent à devenir fumeurs beaucoup plus que les enfants dont les parents ne fument pas. Permettez-moi de vous poser une question assez technique. Est-ce que le fait que les parents fument pousse les enfants à fumer ou sape les intervention des parents contre l'usage de tabac de sorte que l'enfant n'est pas motivé contre le tabac? Un nombre égal d'enfants de parents qui fument et de parents qui ne fument pas peuvent commencer à fumer,

[Text]

er position against his child continuing the habit?

Mr. Otto: Say that again.

Mr. McBride: Do you understand my point?

Dr. Wake: I think I understand your point fine, just fine, but I do not think we have any data on this.

Mr. McBride: It is an interesting point, though, and it only struck me when you talked about so many beginning and stopping.

Dr. Wake: Let me see if I did understand your question by answering, as most professors do, by starting somewhere out in left field.

Almost all the data of any kind that we have on smoking, so far as I know—and I do not mind if Dr. Moss corrects me—are group data, so that what you have is a bunch of youngsters and you know that so many of them, let us say 18 per cent in grade 8 smoke and maybe the next year that 25 per cent of them smoke. The strange thing is that you do not know whether it is the same kids who have continued to smoke, or whether it is an entirely new group.

One of the things we are trying to do with our research this time is to make it longitudinal and to follow these youngsters. We have a way of doing this anonymously. We do not know anything about which kid gave us this sheet of paper but we can get back to him; we can collect data from him again, but we will never know who he is. The people who know who he is do not know the results, so it is anonymous.

What we want to do—and I think hopefully it is one of the most interesting things we can do with the data we are going to collect—is to find out whether the group that smokes this year in fact does smoke next year, and then we will be able to relate this to the parents who smoke and do not smoke, because we will have those data as well.

The answer, then, to your question is that we may have something on this by the middle of the summer.

The Chairman: Mr. Robinson.

Mr. Robinson: Thank you, Mr. Chairman. First of all, Dr. Wake, are all three members of the research team mentioned here psychologists?

Dr. Wake: Dr. Walther is. Miss Haycock has pursued an MA in psychology and I cannot actually tell you whether she received it

[Interpretation]

mais les parents qui ne fument sont peut-être dans une meilleure position pour protester.

M. Otto: Pardon?

M. McBride: Avez-vous compris ma question?

M. Wake: Oui, je pense que je comprends très bien votre question, mais je ne pense pas que nous ayons de données à ce sujet.

M. McBride: J'ai été étonné lorsque vous avez parlé du grand nombre qui commence et puis cesse de fumer.

M. Wake: Je vais répondre comme la plupart des professeurs le font, en donnant d'abord les antécédents.

La plupart des données que nous avons sur l'usage du tabac, pour autant que je sache, et le docteur Moss peut rectifier mes propos, ce sont des données collectives. Lorsqu'on a un groupe de jeunes dont 18 p. 100, par exemple, en huitième année fument et que l'année suivante peut-être 25 p. 100 fument, l'une des choses les plus étranges c'est qu'on ne sait pas si ce sont les mêmes jeunes qui fument ou s'il s'agit d'un nouveau groupe de fumeurs.

L'une des choses que nous essayons de réaliser par nos recherches, c'est d'établir un projet longitudinal, où l'échantillon est constant. Nous pouvons le faire en conservant l'anonymat. Nous ne savons pas quel enfant a répondu, mais nous pouvons obtenir de nouvelles données à son sujet, mais nous ne savons pas quel est l'individu; les gens qui connaissent l'individu ne connaissent pas les résultats, il y a donc l'anonymat.

Mais, ce que nous voulons faire, et je crois que c'est sans doute l'une des tâches les plus intéressantes que nous pouvons accomplir, c'est de savoir si le groupe qui fume cette année fumera encore l'an prochain; puis, nous pourrions faire le rapport entre le fait que les parents fument ou ne fument pas.

Et je crois que, pour répondre à votre question, nous aurons des résultats avant la fin de l'été.

Le président: Monsieur Robinson.

M. Robinson: Merci, monsieur le président. Tout d'abord, docteur Wake, les trois membres de l'équipe en cause ici sont-ils tous psychologues?

M. Wake: Le docteur Walther est psychologue; M^{lle} Haycock a fait des études en vue d'une maîtrise en psychologie. J'ignore si elle

[Texte]

or not. I think not. She has been in the psychology department of the main campus for some years.

Mr. Robinson: I see. You have indicated that your sample of grade 7 students had an average age of 13. Is this usual?

Dr. Wake: Well, I said that. Let me find it. In the two samples we mentioned the average

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age of grade 7 as 11.8; 12.6; 11.9 and 12.4. So these would be the average for those two samples we took. I presume they would be fairly close here. I was a little high.

Mr. Robinson: It seemed to me that perhaps there was something unusual about the fact...

Dr. Wake: Yes, I think there is something unusual, and now I am trying to excuse myself for the previous remark. I think that you would find that in these classes there are none of what we might call the slower learners who do tend to be older. If we had a big enough sample of them I think we might find it would come up a little bit, but probably 13 is too high. You are right.

Mr. Robinson: On page 2 you indicate that your project operates on government funds. I would assume, when you say "project", that you have had a number of projects and that they have all been operated through government funds. Perhaps you could tell us how much has been allotted for this kind of pilot project. I appreciate that you do not get much for your money these days, but I would like to know what, if anything, we are doing in this. The Minister had mentioned some \$200,000 towards an advertising program. How much of it is related to this kind of pilot project that you have been working on?

Dr. Wake: This particular one this year is going to run, before it is finished, to upwards of \$12,000, I expect. The previous ones that we have had have been less than this, depending upon how much work and effort went into them. I could sit and think and probably calculate fairly roughly how much the others were, but they would be in the nature, I should think, of about \$3,000.

Mr. Otto: You can buy cigarettes and with the prize of \$10,000 you could carry on the research.

Dr. Wake: It seems like a risky way of going about getting money.

[Interprétation]

l'a obtenue ou non, mais je crois que non. Mais elle travaille à la Faculté de psychologie de l'institution principale depuis quelques années.

M. Robinson: Vous avez indiqué aussi que votre échantillon d'élèves de la septième année ont une moyenne d'âge de 13 ans; est-ce que c'est normal?

M. Wake: C'est ce que j'ai dit. Les deux échantillons que nous avons mentionnés en septième année, l'âge moyen est de 11.8, 12.6; 11.9 et 12.4. Voilà les moyennes pour ces deux échantillons et cela me semble à peu près normal. Mes autres chiffres étaient un peu élevés.

M. Robinson: Il me semblait qu'il y avait quelque chose d'inusité...

M. Wake: Il y a peut-être quelque chose d'inusité, et je dois maintenant m'excuser de mes remarques précédentes. Je crois qu'on constatera que, dans ces classes, il n'y a pas d'étudiants plus lents et plus âgés. Si l'échantillon était plus considérable, la moyenne d'âge serait probablement un peu plus élevée. Je crois que 13 ans, en effet, c'est un âge trop avancé.

M. Robinson: Je constate aussi, à la page 2 de votre exposé, vous indiquez que votre projet reçoit des fonds de l'État. Je suppose que vous avez un certain nombre de projets qui sont tous financés par des fonds de l'État, n'est-ce pas? Pouvez-vous nous dire quels sont les crédits qu'on vous a accordés pour ce genre de projets? Je sais que l'argent ne va pas loin aujourd'hui, mais j'aimerais le savoir. Le ministre a mentionné \$200,000 en vue d'une campagne de publicité; je me demande quelle partie de ces fonds vont au projet-pilote dont vous parlez?

M. Wake: Cette année, notre programme coûtera plus de \$12,000 lorsqu'il sera terminé. Les programmes précédents constituaient des dépenses moindres, dépendant évidemment du travail et des efforts qui y étaient consacrés. Je pourrais peut-être faire un calcul approximatif, pour déterminer ce que les autres projets ont coûté, mais il me semble que ce serait environ \$3,000.

M. Otto: Achetez des cigarettes et le gros lot de \$10,000 vous permettra de poursuivre les recherches?

M. Wake: Je crois que c'est un moyen assez dangereux d'obtenir des fonds.

[Text]

Mr. Robinson: You might never get any project off the ground.

Have you had any follow-up studies from any of your pilot projects?

Dr. Wake: Yes, if you want to call it this. One of the earlier pieces of research we did indicated to us that there were some personality factors that we could test by means of standard psychological tests which would tell us something about the smoking personality.

There were some problems with this research in the sampling and so the next year we asked the department for more money and got it. During the whole summer we went into a project, fairly tightly controlled, I would say, and came up with this document which indicated that the positive results we had had one year were not borne out by the completely negative results of the next year. That accounts for the somewhat caustic comments in the paper about the fact that we have gone nowhere with personality research. In spite of this, we are giving personality tests to our grade 7 youngsters. Some day we have got to find this, something has to happen; but so far this particular follow-up was very disappointing.

Mr. Robinson: Is this because, as you mentioned in your report, you did not have proper control in your initial pilot project?

Dr. Wake: We think that that may be the reason, but of course many things can contribute to the fact that you get a positive result one year and not the next. You can have a lot of things that could be just a fluke. Chance could have given it to us the first time and tantalized us and then the laws of chance caught us the second time around.

We did know in the first instance that the controls were not as close as we had wanted, and we are not apologizing for this at all because I think that we had a fair shot at controlling the samples. But we just could not control everything and we found in the end that in this particular area it was not as good as we had wanted. If we had come up with this, the advantages might have been very great. We might have been able to send people to a clinic, saying to them that the predictions of these tests were that these people would respond to treatment. This is what we were hoping for.

[Interpretation]

M. Robinson: Vous ne pourrez peut-être pas mettre aucun projet en marche. Avez-vous fait des études supplémentaires sur les projets-pilotes?

M. Wake: Oui, si je puis employer l'expression, l'un des premiers projets de recherche que nous avions accompli a révélé qu'il y avait des facteurs relatifs de personnalité que nous pouvions étudier au moyen de tests ordinaires de psychologie et qui nous renseigneraient sur la personnalité des fumeurs.

Il y avait certains problèmes d'échantillonnage et l'année suivante, nous avons donc demandé des fonds supplémentaires au ministère que nous avons obtenus. Nous avons lancé un projet très surveillé pendant tout l'été et le document indique que les résultats positifs que nous avions obtenus l'année précédente n'étaient pas appuyés par les efforts négatifs de l'année suivante. Ce qui explique les remarques sarcastiques à cet égard. En dépit de cela, nous faisons passer des tests de personnalité aux jeunes de septième année. Il faut que nous puissions circonscrire ces éléments. Un jour nous aurons des résultats concrets, mais jusqu'à présent ces études supplémentaires ont été décevantes.

M. Robinson: Est-ce que dans votre premier projet-pilote, comme vous le mentionnez dans votre rapport, vous n'aviez pas les modes de contrôle voulus?

M. Wake: Nous pensons que c'est peut-être là la raison, mais, bien entendu, beaucoup de choses peuvent contribuer au fait que vous obtenez des résultats positifs une année et non pas l'année suivante. Il peut y avoir bien des facteurs en jeu; la chance était peut-être de notre côté la première fois. La loi du hasard peut nous attraper. Nous savions que nos contrôles n'étaient pas aussi serrés qu'ils devraient l'être, nous ne nous en excusons pas, car je crois que nous avons quand même réussi à contrôler l'échantillonnage jusqu'à un certain point.

Mais, nous ne pouvions pas tout contrôler et nous avons constaté que dans ce domaine ils n'étaient pas aussi serrés que nous ne le voulions. Si nous avions pu le faire, nous aurions peut-être eu de grands avantages. Nous aurions pu envoyer des jeunes aux cliniques, en leur disant que selon les résultats de ces tests, ils réagiraient positivement au traitement. C'est ce à quoi nous voulions en venir.

[Texte]

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[Interprétation]

Mr. Robinson: I see. I would assume that in your pilot projects your control group was like a class of students and that you took everyone in the class.

Dr. Wake: The one that I was referring to then was a large number of civil servants. This was an adult group rather than children.

Mr. Robinson: But you were not doing a random sample. You were taking the group as it came.

Dr. Wake: Well, that can be quite random, but it was a random sample of only civil servants in a particularly large building in Ottawa.

Mr. Robinson: Have you in your research picked out groups who maintained that they were heavy smokers? Have you studied this type of group?

Dr. Wake: No, we have not taken a specialized group yet to see what we could do with it.

Mr. Robinson: Along with this you have indicated that the parents by and large do have a great deal of effect on the children in so many ways in their growing up. Have you carried out any experiments with parents in this field, or do you contemplate carrying out such experiments?

Dr. Wake: I would have to answer no, although if we were to discover this year that this was one of the important associations, parental smoking and non-smoking, whatever information we could get, if this seemed to be far more important than any educational program in the school, then I would see nothing in our minds to keep us from saying, "This is where we should go". We would go back to the government and say in the report we made, "If you are interested in doing it, you ought to work on parents, not children". At the present time we are not looking that far ahead.

Mr. Robinson: I note that on page 3, at the bottom, you state:

...our two Ontario samples in the number of Grade Seven smokers whose parents also smoke. The data also indicate that even if a parent smokes, about 50 per cent of the children in the sample do not.

What do you draw from this conclusion?

M. Robinson: Je vois. Je suppose que dans vos projets-pilotes, votre échantillon était une classe d'élèves?

M. Wake: Le projet dont je parlais englobait un grand nombre de fonctionnaires. Il s'agissait d'un groupe d'adultes.

M. Robinson: Il ne s'agissait pas d'un échantillon pris au hasard. Vous preniez le groupe déjà constitué.

M. Wake: Le groupe peut être constitué assez au hasard, mais il s'agissait d'un groupe de fonctionnaires constitué au hasard dans un des gros immeubles d'Ottawa.

M. Robinson: Avez-vous choisi des groupes qui prétendaient par exemple qu'ils étaient de gros fumeurs? Avez-vous étudié ce genre de groupe?

M. Wake: Non, nous n'avons pas encore choisi de groupe spécialisé.

M. Robinson: Vous avez indiqué aussi que les parents, dans l'ensemble, ont beaucoup d'influence sur les enfants et de bien des façons. Je me demande si vous avez fait des expériences avec les parents dans ce domaine, ou si vous songez à en faire?

M. Wake: Il faut que je réponde par la négative. Cependant, si nous découvrons cette année que c'est là un des facteurs importants, qu'il y a un rapport important entre le fait que les parents fument ou ne fument pas, si cela semblait plus important que n'importe quel programme d'éducation dans les écoles, je ne vois pas ce qui nous empêcherait d'orienter nos travaux en conséquence. Nous dirions alors au gouvernement: «Si vous êtes intéressés à continuer ce travail, vous devez vous occuper des parents, non des enfants». Mais à l'heure actuelle, nous n'en sommes pas rendus là.

M. Robinson: Au bas de la page 3, vous déclarez ce qui suit:

...deux échantillons d'écopiers ontariens de la septième année qui fument, et dont les parents fument aussi. Les données indiquent que même si un des parents fume, environ 50 p. 100 des enfants de l'échantillonnage ne fument pas.

Quelle conclusion tirez-vous de cette constatation?

[Text]

Dr. Wake: I was trying to demonstrate that the whole business of the influence of the parents is not clear. If you have a sample of parents and children where the parents smoke and yet only 50 per cent of the children smoke, then you cannot easily argue that the parents have an overwhelming effect in their example, because 50 per cent of the kids do not bother, even though their parents smoke. What I am really trying to say here is that there is an important influence here which we should explore, but it is very confused at the present time, because if parents had such a tremendous effect, then we should have 100 per cent of the children smoking where their parents smoke. We do not have that. So, something else is operating.

As we mention in the paper, in many instances the father sits down with his son and says: "Look, you learn in school about the hazards of this. I cannot quit smoking. I would give anything if I could and the last time I tried you got after me because I was so nasty. My nerves were frayed, and I was in bad shape. I cannot quit so for heaven's sake do not get in the same box", and the boy says: "Well, okay." This can be a positive kind of thing if the parent handles it properly.

Mr. Robinson: Well, you are speaking now of, shall we say, the psychology in the advertising for or against smoking.

Dr. Wake: Yes.

Mr. Robinson: I would assume in the advertising we have towards smoking or towards the use of tobacco in any form, that it is baited towards the children, towards the adult, towards men, towards women, towards people generally. In your studies, or in any contemplated studies, there is the suggestion that you try and isolate the areas in the smoking advertising that pertain to children or would influence children rather than adults.

Dr. Wake: We had not contemplated doing any research in the foreseeable future on what it is in advertising that does it. We have quite a bit to do, and this is just one area into which we had not contemplated putting a great effort.

Mr. Robinson: Is there any consideration being given towards looking into the whole question of smoking from the point of view of children and women who by and large smoke cigarettes? I do not thing very many of them smoke cigars or pipes. Yet there is quite a tendency in men to smoke cigarettes, pipes or cigars.

[Interpretation]

M. Wake: J'essayais de montrer que l'influence des parents n'est pas clairement délimitée. Si vous avez un échantillon de parents et d'enfants dont les parents fument et que 50 p. 100 seulement des enfants fument, on ne peut pas prétendre que les parents ont une influence prépondérante, car 50 p. 100 des enfants, même si leurs parents fument, ne fument pas. Il y a une question d'influence et d'influence importante: c'est quelque chose que nous devrions explorer, mais, à l'heure actuelle, la situation est assez confuse, car si les parents avaient tellement d'influence, 100 p. 100 des enfants des fumeurs devraient fumer. Il y a donc quelque chose d'autre, d'autres facteurs.

Je crois que, dans bien des cas, et c'est ce que nous mentionnons dans le document, les parents disent à l'enfant: «tu apprends à l'école les dangers de l'usage du tabac. J'ai essayé d'arrêter de fumer, mais je ne peux pas, mon système nerveux est affecté, la dernière fois que j'ai essayé, vous avez vu, j'étais de mauvaise humeur. Par conséquent, toi, ne contracte pas l'habitude». Et cela ne peut qu'avoir une influence positive.

M. Robinson: Vous parlez maintenant de l'influence psychologique de la campagne d'éducation contre l'usage du tabac.

M. Wake: Oui.

M. Robinson: Je suppose que, dans la publicité que nous avons pour la cigarette ou pour encourager l'usage du tabac, cela vise les enfants, les hommes, les femmes, les adultes, l'ensemble de la population. Je me demande si, dans vos études, ou dans toute étude projetée, vous essayez d'isoler les secteurs de la réclame qui influencent les enfants, qui seraient aptes à influencer les enfants plutôt que les adultes.

M. Wake: Nous n'avons pas songé à faire des recherches dans l'avenir immédiat sur quoi que ce soit dans la réclame qui a de l'influence c'est un secteur que nous ne songions pas à analyser.

M. Robinson: Est-ce que sera étudiée toute la question de l'usage de la cigarette au point de vue des enfants et des femmes qui fument la cigarette par exemple? Je ne pense pas qu'il y en ait tellement qui fument le cigare ou la pipe, même si les hommes tendent à fumer la cigarette, la pipe, ou le cigare.

[Texte]

Dr. Wake: One of our earlier pieces of research indicated that pipes and cigars were quite potent substitutes for cigarettes and perhaps a campaign to get people to change might be quite successful. We did not pursue it farther than that, but it does seem to me that a person, whether male or female, who has an established habit, ought to be encouraged to change to a substitute rather than to try to quit.

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This is based on a lot of things that I am sure you do not want me to go into now. It is based on the fact that if you have tried to quit a number of times and you have not been able to make it, your chances are not very good and so on. Certainly the idea of the substitute is great. I have not heard anyone who is willing to take on the problem of trying to persuade women that they would look just as attractive smoking a pipe as they would smoking a cigarette.

Mr. Robinson: Nevertheless, we notice there is a great change in habit. Years ago there were fewer women smoking and when they did smoke, they smoked inside. Now you will see women smoking as they are walking down the street. This is quite an innovation. How do we account for this?

Dr. Wake: Well, there is, I think, there has been a well identified sexual change, if I may use some jargon, in our society. Women's behaviour is changing in so many ways it is becoming much more like men's behaviour.

Mr. Otto: In the field of smoking only, I hope.

Dr. Wake: Oh no! The field of dress, for example, is one.

Mr. McBride: In the field of M.P.'s?

Dr. Wake: Yes. Do we not have some kind of a group which is going to equalize pay for women before very long, for the same job which would be a...

Mrs. MacInnis (Vancouver-Kingsway): An excellent idea!

Dr. Wake: We have this. Sociologists and psychologists are satisfied that you do have this overall change, and it is not changing equally; that is, you do not have the men moving toward the women's kind of behaviour but the women moving toward the men's...

[Interprétation]

M. Wake: L'un de nos premiers projets de recherche indiquait que l'usage du cigare et de la pipe pouvait être un substitut à la cigarette et que des campagnes visant à pousser les gens à changer de mode de fumer pourraient avoir du succès. Lorsque quelqu'un a une attitude ancrée, que ce soit un homme ou une femme, il aura peut-être tendance à adopter un substitut plutôt qu'abandonner la pratique, l'habitude complètement.

Cela est fondé sur bien des facteurs, et si vous avez essayé d'abandonner l'habitude bon nombre de fois et que vous n'avez pas réussi, l'idée d'un substitut est aussi très intéressante. Je n'ai jamais vu personne qui soit prêt à essayer de convaincre les femmes qu'elles ne perdront rien de leurs charmes en fumant la pipe, plutôt que la cigarette.

M. Robinson: Nous constatons qu'il y a de grands changements dans les habitudes. Il y a un certain nombre d'années, très peu de femmes fumaient et, lorsqu'elles fumaient, c'était à la maison; maintenant on les voit fumer dans la rue. Je crois que c'est là du nouveau. Comment pouvons-nous justifier ce changement?

M. Wake: Eh bien, il y a eu un changement d'ordre sexuel bien identifié, bien repéré dans notre société. Le comportement féminin se modifie et se rapproche beaucoup du comportement masculin à bien des égards.

M. Otto: Au point de vue de la cigarette seulement, j'espère.

M. Wake: Oh non, pas du tout. Pour le vêtement aussi, par exemple.

M. McBride: Le fait d'être élu député aussi.

M. Wake: Est-ce que, de plus en plus, nous n'allons pas rémunérer les femmes de façon égale?

Mme MacInnis (Vancouver-Kingsway): Bonne idée!

M. Wake: Les psychologues et les sociologues sont convaincus que ce changement général s'est produit, mais le changement n'est pas égal. Les hommes ne se rapprochent pas du comportement féminin.

[Text]

Mrs. MacInnis (Vancouver-Kingsway): May I just raise a point, there. How about all this hairdo? Is that not...

Dr. Wake: Well, that is one where they have gone in the feminine direction but...

Mrs. MacInnis (Vancouver-Kingsway): And dress: the kind of clothes that a lot of people wear! How about the beads and things like that?

Dr. Wake: Yes, in dress I readily confess that many men are going in the direction of women. As an example, it is almost shocking to see how many women, or girls rather, want to go into engineering these days. You do not find...

Mr. Osler: They have always been engineers.

Mr. Otto: How long do you want to stay here?

Dr. Wake: I wonder if I could say that you might consider it a fact that mostly women are going in the direction of male behaviour rather than males in the direction of female behaviour. If this be true, then, of course, we can envisage the fact that in 10 or 15 years women will smoke cigars and pipes just as readily as men. I just do not see much of it.

Mr. Robinson: Is it fair to say that some studies so far have indicated that a greater percentage of men have stopped smoking than women?

Dr. Wake: Yes, I think—I hope I can find this quickly for you.

Mr. Robinson: Well, just speaking generally.

Dr. Wake: No, I am sure that we have a statement somewhere that says that in one sample we used more men than women tried to stop smoking and were successful.

Mr. Robinson: If this is so, and women have a tendency to follow men, then eventually they may go the complete circle. Men will quit smoking altogether and the women will eventually follow them and do likewise.

Mrs. MacInnis (Vancouver-Kingsway): Hear, hear; that is a good idea.

Dr. Wake: The only thing we would like to do is to stop them from having to go through this following pattern, because they would have to build up to a certain stage...

[Interpretation]

Mme MacInnis (Vancouver-Kingsway): Que dire des hommes qui portent les cheveux longs?

M. Wake: Oui, peut-être dans ce domaine, y a-t-il eu rapprochement du comportement féminin, mais...

Mme MacInnis (Vancouver-Kingsway): Et que dire du vêtement maintenant? Si vous voyiez les vêtements que portent certaines personnes!

M. Wake: Pour le vêtement, fort bien. J'avoue que, parfois, bien des hommes se rapprochent du comportement féminin. Il est presque étonnant de voir combien de femmes et de jeunes filles veulent suivre un cours de génie aujourd'hui.

M. Osler: Elles ont toujours été des ingénieurs.

M. Otto: En avez-vous encore pour longtemps.

M. Wake: Je me demande si vous ne devriez pas considérer, à la fin, que ce sont surtout les femmes qui se rapprochent du comportement masculin plutôt que l'inverse. Si c'est le cas, bien entendu, nous pouvons envisager le fait que, dans 10 ou 15 ans, les femmes vont fumer le cigare et la pipe.

M. Robinson: Est-ce qu'on peut dire avec justesse que certaines études faites jusqu'ici indiquent qu'il y a une proportion plus élevée d'hommes qui ont arrêté de fumer que de femmes qui ont arrêté de fumer?

M. Wake: Je crois que je puis trouver les données assez rapidement.

M. Robinson: D'une manière générale.

M. Wake: Nous avons une déclaration quel que part disant que, dans un échantillon, plus d'hommes que de femmes ont essayé d'arrêter de fumer et n'ont pas réussi.

M. Robinson: Si les femmes ont tendance à imiter les hommes, éventuellement les hommes arrêteront de fumer et les femmes finiront par arrêter elles aussi.

Mme MacInnis (Vancouver-Kingsway): Bonne idée!

M. Wake: La seule chose que nous aimerions faire, c'est de les empêcher d'avoir à suivre tout ce cycle, car il y aurait un moment où...

[Texte]

Mr. Robinson: Is there not such a thing as short-cutting this or short-circuiting it through experiments like a padlock experiment of conditioning people to either smoke or not to smoke? I think they have been conditioned to smoke because of the advertising campaigns that we have had. But is there not such a thing as reversing the process and conditioning them not to smoke?

Dr. Wake: We could do this but I think we will have to get at it and get at it very quickly because there generally is a lag in these things. We were late in trying to stop

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people smoking, and this is one of the reasons we are having so much trouble getting people to stop. I am afraid that if you get a large number of women smoking, and they continue to smoke, that you are working against a much bigger force than if we could do it now before too many of them start.

Mr. Robinson: I personally feel that psychology can have a great deal to do with this kind of program because, in my humble opinion, psychology has had a great deal to do with the extent to which smoking is carried out today. I think they have to reverse the process. I had a bill that I was proposing, which is not before the Committee, but I just want to point out to you that in my view this had some psychology behind it. Perhaps I could get the benefit of your senior knowledge in this idea.

The purpose of the bill was to make certain that tobacco and cigarette users are aware at all times that their use constitutes a health hazard. It was therefore proposed that a written and graphic warning be placed on all packages of tobacco and cigarettes. I was suggesting in effect that all packages of tobacco and cigarettes should bear the words, in a prominent place on the front of the package: "Health Hazard—Use at your own risk" with a skull and crossbones symbol thereunder. Psychologically do you think that this would have any influence?

Dr. Wake: I am certain that it will have some influence. People do read things on packages of cigarettes. They sometimes only read them once or twice, but they are there. In respect of billboard advertising they used to argue that it was not that you had to read it but the fact that you were exposed to it so often. People might not even realize they were reading it but they were, and this would be effective. I am certain that this would

[Interprétation]

M. Robinson: N'y aurait-il pas de court-circuit du cycle grâce à des expériences comme le conditionnement des gens soit à l'usage du tabac, soit à l'abandon de l'habitude. Les campagnes de publicité que nous avons eues ont poussé les gens à fumer; mais si on renversait maintenant le procédé, on pourrait peut-être les induire à ne pas fumer.

M. Wake: Je crois que nous pourrions le faire, mais il va falloir nous attaquer au mal très rapidement, car il y a souvent des retards. Nous nous y sommes pris trop tard pour essayer d'empêcher les gens de fumer, c'est la raison pour laquelle nous avons beaucoup de difficultés à faire en sorte que certaines personnes s'arrêtent de fumer. Si vous avez un grand nombre de femmes qui fument, qui ont contracté l'usage du tabac et qui continuent avec cette habitude, il faudra s'attaquer à un plus grand nombre de gens.

M. Robinson: Je crois que la psychologie pourrait fort bien apporter des remèdes à ce mal car je crois, à mon humble avis, que la psychologie a eu beaucoup à faire avec l'habitude de la cigarette telle qu'on la retrouve aujourd'hui. Je crois que si on renversait le processus, on aurait une influence inverse. J'avais proposé un bill, qu'on n'a pas soumis au Comité, mais j'aimerais simplement vous signaler qu'à mon avis, il y a une valeur psychologique derrière cette situation; peut-être pourrais-je avoir vos vues de spécialistes là-dessus?

Le but du bill, c'était de s'assurer que les fumeurs soient au courant du fait que l'usage du tabac constitue un danger pour la santé. On a alors proposé qu'un avertissement soit placé sur tous les paquets de cigarettes et de tabac. Tous les paquets de cigarettes et de tabac devraient porter, bien en vue, l'indication suivante: «Menace à la santé, fumez à vos propres risques.» avec le symbole de la tête de mort et des deux tibias croisés. Pensez-vous que psychologiquement, cela peut avoir une influence?

M. Wake: Je suis sûr que cela aurait une certaine influence. Les gens lisent ce qu'il y a d'écrit sur les paquets de cigarettes. Peut-être ne le lisent-ils qu'une fois ou deux mais du moins, ils savent que c'est là. On a dit des placards publicitaires que ce n'était pas le fait de les lire, mais d'y être exposé qui était important. Les gens ne réalisent peut-être pas qu'ils les lisaient, mais pourtant c'était le cas et c'était efficace. Je suis sûr que cela aurait

[Text]

have some effect. Now I am not at all clear how much effect it would have, and I suspect in comparison to some other things we might do that it would have less effect. I think that certain kinds of educational campaigns might be more effective. I am not arguing against what you are proposing at all. I think it perhaps would not be as effective as some other things we might do—like education in the schools or even some of these excellent TV clips that the government has turned out.

Mr. Robinson: I do not want to take up more time, Mr. Chairman, but there is one area on which I would like to have more information, namely the whole question of motivation.

The Chairman: The bells are ringing to signal a vote.

Mrs. MacInnis (Vancouver-Kingsway): I think I will have to go because it will be on our amendment.

The Chairman: Shall we adjourn until after the vote?

Mr. Otto: I am sure Mr. Robinson is through with Dr. Wake. Maybe, we could come back for Dr. Moss.

Mrs. MacInnis: This will be just one vote, will it not?

Mr. Robinson: I would be quite prepared to adjourn now. However, I was quite concerned about the whole question of motivation either for or against smoking and this is one thing I wanted to ask him about before we adjourned.

Dr. Wake: Mr. Chairman, could I ask you a question? This may be immodest of me but would it be possible for me to come back some time? I am available, I am in the city.

The Chairman: Do you feel we should ask Dr. Wake to come back later on? He is available.

Mr. Otto: He might also have further results from studies going on now.

Mr. Robinson: In view of what transpired today, Dr. Wake possibly could be helpful in bringing forth a few answers to some of the questions.

The Chairman: I think we should adjourn until right after the vote when we will hear Dr. Moss. Dr. Moss is from Toronto and I think he should be heard.

[Interpretation]

une certaine conséquence, je ne sais pas jusqu'à quel point, et si on compare cela à autre chose qu'on peut faire, cela aura sans doute moins d'influence. Il y aurait probablement des campagnes plus efficaces que cela. Je ne m'oppose pas du tout à ce que vous proposiez. Je pense seulement que ce ne sera peut-être pas aussi efficace que d'autres moyens, tels que des cours dans les écoles ou d'excellents petits films de télévision comme le gouvernement en a produits.

M. Robinson: Monsieur le président, je ne veux pas prendre plus de temps, mais je voudrais avoir plus de renseignements sur la question de la motivation.

Le président: La cloche sonne pour signaler un vote.

Mme MacInnis (Vancouver-Kingsway): Je vais m'en aller, car il s'agit de notre amendement.

Le président: Alors, devrions-nous ajourner jusqu'après le vote?

M. Otto: Je pense que M. Robinson en a fini avec le docteur Wake. Nous pourrions peut-être revenir pour entendre le docteur Moss.

Mme MacInnis (Vancouver-Kingsway): Il n'y aura qu'un seul vote n'est-ce pas?

M. Robinson: Je suis prêt à ajourner. Cependant, la question de la motivation m'intéresse, qu'elle soit en faveur ou contre la cigarette, et c'est ce que je voudrais lui demander avant que nous partions.

M. Wake: Puis-je vous poser une question monsieur le président? C'est peut-être un peu présomptueux de ma part, mais serait-il possible que je revienne une autre fois par exemple. Je suis à Ottawa, alors ça ne me dérange pas.

Le président: Alors, pensez-vous que nous devrions inviter le docteur Wake une autre fois, puisque il lui est facile de revenir?

M. Otto: Il pourrait aussi avoir de nouveaux résultats sur les études en cours.

M. Robinson: Au vu des questions posées aujourd'hui, le docteur Wake pourrait peut-être nous aider en apportant un certain nombre de réponses.

Le président: Je pense qu'il vaut mieux ajourner jusqu'à l'issue du vote, après quoi nous entendrons le docteur Moss. Le docteur Moss vient de Toronto et nous devons l'entendre aujourd'hui.

[Texte]

Mr. Howe: Could Dr. Moss come this evening.

Dr. Moss: I am available, yes.

The Chairman: Is it the wish of the Committee to return right after the vote or to come back at 8 o'clock?

Some hon. Members: Eight o'clock.

The Chairman: The meeting is adjourned until 8 o'clock tonight.

[Interprétation]

M. Howe: Le docteur Moss pourrait-il revenir ce soir?

M. Moss: Oui, je peux.

Le président: Que décide le Comité, revenir immédiatement après le vote ou revenir à 8 heures?

Quelques députés: A 8 heures.

Le président: La séance est levée jusqu'à 8 heures ce soir.

EVENING SITTING

Thursday, February 20, 1969

• 2015

The Vice-Chairman: I think we will start now, madam and gentlemen. We have with us Dr. G. W. O. Moss, Deputy Medical Officer of Health, City of Toronto, Department of Public Health and, of course, he is here from the previous meeting. Dr. Moss is the Technical Director of the Smoking Withdrawal Study Centre, SWSC, and his statement is already in your possession. I believe you have had it for a while and I am going to suggest that instead of reading the statement—to which he agrees—Dr. Moss will go over it, expand on it where he feels it should be expanded upon and give us a little more information, following which we can ask questions. May I take or granted, then, the consent of this Committee that the written brief be accepted and printed?

Some hon. Members: Agreed.

Dr. Gaston Isabelle, Chairman,
and Members of the Standing Committee
on Health, Welfare, and Social Affairs,
House of Commons,
Canada.

With the release of the report of the expert advisory Committee to the Surgeon General of the Public Health Service, U.S. Department of Health, Education and Welfare, in January 1964, attention was sharply focused on the adverse effect of cigarette smoking on health. Although scientific evidence to this effect had been coming forward for some years, the publication of the comprehensive analysis of world-wide experience in this field by this expert committee established beyond reasonable doubt that an adverse relationship between cigarette smoking and health did in fact pertain.

SÉANCE DU SOIR

Le jeudi 20 février 1969

Le vice-président: Je pense que nous allons commencer maintenant, madame et messieurs. Nous avons avec nous ce soir le docteur G. W. O. Moss, directeur adjoint de la Santé publique pour la ville de Toronto, qui était ici avec nous cet après-midi. Il est directeur technique du Centre des études de l'abandon du tabac. Vous avez déjà son mémoire en main depuis un certain temps. Je suggère donc qu'au lieu de lire ce document, et il est d'accord, le docteur Moss le complète, s'il le juge nécessaire, en donnant des explications ici et là. Nous pourrions ensuite l'interroger. Le Comité est-il d'accord pour que ce document écrit soit accepté et imprimé?

Des voix: D'accord.

Monsieur le Docteur Gaston Isabelle,
Président
et les Membres du Comité Permanent de
la Santé, Bien-être Social et Affaires Sociales,
Chambre des Communes,
Canada.

La publication au mois de janvier 1964 du rapport du Comité consultatif d'experts rédigé à l'intention du Chirurgien général du service de la santé publique du Ministère de la Santé, de l'Éducation et du Bien-être social des États-Unis a fortement attiré l'attention sur l'effet néfaste des cigarettes sur la santé. Des preuves scientifiques s'accumulaient déjà dans ce sens depuis quelques années, mais la publication de cette analyse complète à l'échelle mondiale faite par ce comité d'experts a établi sans aucun doute que la consommation de cigarettes a un effet néfaste sur la santé.

[Text]

The Local Board of Health of the City of Toronto quite naturally was concerned when these findings became known. It established a special advisory committee upon which prominent leaders, both lay and professional, in health circles in the community were invited to sit. Its primary objective was to give consideration to the creation of a test pilot clinic to determine the best methods of smoking withdrawal. Although some work had been done in this connection in other countries, particularly Sweden, Denmark, the United Kingdom, and the United States, the effectiveness of such work was not impressive. No attempts of this kind had been made in Canada.

The outcome of this group's consideration was a recommendation to the effect that the Local Board of Health explore the advisability of a pilot project to undertake investigations into the health problems of cigarette smoking and discontinuing smoking. In view of the scope of such an undertaking and the need for resources not generally found in a local public health department, the necessity to have joint sponsorship was recognized. Eventually it was decided to establish a Smoking Withdrawal Study Centre under the Local Board of Health of the City of Toronto with the joint sponsorship and participation of the Faculty of Medicine of the University of Toronto. In order to make the Smoking Withdrawal Study Centre operative, financial support was required, and this was forthcoming, upon the filing of the necessary protocol and application, from the Department of National Health and Welfare under the research portion of its Smoking and Health Program.

This financial support is greatly appreciated, and the Centre could not have operated without it. It has been applied to the purchase of special scientific equipment, and to payment of the professional and technical staff necessary for operation of the Centre. Nevertheless, important contributions have been made by individuals and health agencies on a voluntary basis without whose assistance not everything planned could have been accomplished. The Centre has been housed on city property.

The Smoking Withdrawal Study Centre did not become operative until the fall of 1966. The acquisition of scientific equipment took considerable time. Moreover some of the components had to be obtained in the United States and the United Kingdom as well as Canada. The whole had to be assembled here. Some of the equipment was especially designed for this Centre.

[Interpretation]

Ces résultats ont bien sûr inquiété le Conseil local d'hygiène de Toronto. Il a donc établi un comité consultatif spécial auquel ont été invitées à siéger des personnalités professionnelles et non-professionnelles des cercles d'hygiène de la communauté. Son objectif essentiel était d'envisager la création d'une clinique pilote d'essai pour déterminer les meilleures méthodes permettant de cesser de fumer. Des travaux avaient déjà été menés dans ce domaine dans d'autres pays, en particulier en Suède, au Danemark, au Royaume-Uni et aux États-Unis, mais les résultats de ces travaux n'étaient pas formidables. Aucune tentative de la sorte n'avait été faite au Canada.

A l'issue de ses travaux d'étude, ce groupe recommanda que le Conseil local d'hygiène étudie la possibilité d'entreprendre un projet pilote d'enquête sur les problèmes touchant la santé par suite de la consommation des cigarettes et de l'abandon des cigarettes. Étant donné l'ampleur de l'entreprise et la nécessité de ressources dépassant les limites générales d'un conseil d'hygiène local, on se rendit compte que le projet devrait être patronné par deux organismes. Finalement, on décida d'établir un Centre d'étude des problèmes relatifs à l'abandon de la cigarette sous les auspices du Conseil local d'hygiène de Toronto et avec la participation et le patronage conjoints de la Faculté de médecine de l'Université de Toronto. Le fonctionnement du Centre d'étude nécessitait un appui financier; une fois que les démarches nécessaires furent accomplies et que la demande voulue fut soumise, le Ministère de la Santé Nationale et du Bien-être Social fournit cet appui dans le cadre de la section de recherche de son programme d'études sur le tabac et la santé.

Cet appui financier est extrêmement apprécié et le Centre n'aurait pas vu le jour sans un tel appui. Il a servi à acquérir un outillage scientifique spécial et à payer les salaires du personnel professionnel et technique nécessaire pour le fonctionnement du Centre. Des contributions volontaires considérables ont également été faites par des organismes d'hygiène et des individus et sans cet appui il aurait été impossible d'accomplir tout ce qui était au programme. C'est la ville de Toronto qui a fourni le local du Centre.

Le Centre d'étude n'a commencé à fonctionner qu'à l'automne 1966. L'acquisition des appareils scientifiques prit un temps considérable. De plus certaines pièces ont dû être commandées aux États-Unis et au Royaume-Uni en plus de celles acquises au Canada. Le tout a dû être monté ici. Certains appareils ont été spécialement conçus pour ce Centre.

[Texte]

Volunteer subjects for the Centre were, in the first instance, obtained from industrial and commercial concerns, but later were obtained from the public at large by appeal through the press, radio, and television. Enquiries also came from acquaintances of subjects who had attended the Centre. Volunteers were accepted beginning in the fall of 1966. No new volunteers will be processed after June 1969. It is expected that between 500 and 600 subjects will have been studied during the life of the project.

This does not seem to be a large number. However the nature of the Centre has determined this, and groups of 24 are processed monthly. Nowhere to my knowledge has a person desiring to give up smoking been given as exhaustive investigation and as concentrated service as in this Centre. A large amount of data is being accumulated on each volunteer subject and its analysis and correlation will throw new light on the effect of smoking on health.

The Centre is unique in the sense that it provides a service in helping subjects give up smoking and is able to investigate the effects of smoking and giving up smoking on health.

The service feature has concentrated on the educational approach so that the volunteer might have an accurate factual basis upon which to strengthen the resolve to quit smoking. Speakers, prominent in their chosen fields, have addressed the groups. Appropriate visual aids (movies, slides, and literature) have been used to illustrate. As it was obvious that the habitual use of tobacco is very closely related to psychological and social drives, a socio-psychological component was built into the Centre. The educational effort was reinforced through the art of group dynamics with group discussion leaders specialized in this field. The opportunity has been taken to determine the psychological factors which affect the individual's attitudes towards smoking and the ease or difficulty which may be experienced in the discontinuance of smoking.

Physical examinations of subjects are conducted to measure the effect of cigarette smoking on function and to detect abnormal conditions. The subjects complete a comprehensive health questionnaire and are examined by a physician. Special laboratory tests are conducted on the blood (haemoglobin determination), heart (electrocardiogram), lungs (ventilatory studies, gas exchange studies) and the bronchial tree (sputum cytology).

[Interprétation]

Des volontaires ont d'abord été recrutés dans l'industrie et le commerce, puis ensuite ils sont venus du grand public grâce aux appels lancés par la presse, la radio et la télévision. Des demandes de renseignements ont été également formulées par les connaissances de personnes ayant fréquenté le Centre. Le Centre a pris des volontaires à partir de l'automne 1966 mais il n'en acceptera plus après le mois de juin 1969. On compte que les études faites pendant la durée de l'entreprise porteront sur cinq ou six cents personnes.

Ce nombre ne semble pas très élevé. Cette limite provient de la nature du Centre chaque mois nous traitons des groupes de 24 personnes. Pour autant que je sache, aucune personne désirant abandonner la cigarette n'a jamais fait l'objet de recherches aussi complètes ni d'une attention aussi poussée que dans ce Centre. Nous accumulons une grande quantité de données sur chaque volontaire: l'analyse et la confrontation de ces données permettront de mieux connaître les effets du tabac sur la santé.

Le Centre est unique en ce sens qu'il rend service aux volontaires en les aidant à cesser de fumer et qu'il peut en même temps faire des recherches sur les répercussions du tabac et de l'abandon de la cigarette sur la santé.

En ce qui concerne l'aide aux volontaires, le centre insiste sur l'aspect éducatif pour fournir à l'individu des notions solides reposant sur des faits, qui appuient sa résolution d'abandonner la cigarette. Des orateurs qualifiés dans leur domaine se sont adressés aux groupes. Des moyens visuels ont été utilisés à titre d'illustration (films, diapositives, et brochures). Comme il était évident que l'utilisation du tabac a un lien étroit avec les tendances psychologiques et sociales, on a insisté sur l'aspect socio-psychologique dans le Centre. L'effort éducatif a été renforcé grâce à la science de la psychologie de groupe lors de discussions en groupe animées par des spécialistes en la matière. On a saisi l'occasion de déterminer les facteurs psychologiques qui affectent l'attitude des individus envers le tabac et la facilité ou la difficulté d'abandonner la cigarette.

Les sujets passent des examens médicaux visant à mesurer les répercussions du tabac sur le fonctionnement de l'organisme et à découvrir les anomalies qui peuvent exister. Ils remplissent un questionnaire très complet et sont examinés par un médecin. On leur fait passer des examens de laboratoire spéciaux sur le sang (détermination de l'hémoglobine), le cœur (électrocardiogrammes), les poumons (études de respiration, études d'échange de gaz) et l'arbre bronchique (cytologie des crachats).

[Text]

A subject attending the Centre first does so for a month's course comprising seven evenings during which the above-outlined program is carried out. Within a month, the subject returns and is given the results of the various tests. When there are significant abnormal findings, they are made available to the subject's own doctor for further investigation and treatment as may be required. We attempt to keep in touch with subjects and have them return in alternate months for a year, at which time all of the special laboratory tests are repeated. In this way, a comparison can be made of the subject's health at the time of first attendance when he or she was smoking and a year later no matter whether the subject has been successful or not in changing or modifying the cigarette habit.

The work of the Centre could be reported in both its short-term and long-term effects. It has been agreed by the senior professional participants in the project that the results of the various facets of investigation will be reported in the appropriate scientific literature at the conclusion of the study so that all data bearing upon the subject can be utilized. We are not in a position at this time to give specific results.

In view of my association with this Centre during its conception, formation, and operation, there are certain observations which I can make which do have some bearing on the subject matter of the private bills with respect to the regulation of tobacco and cigarette smoking before your Committee at this time.

The Centre was set up in the expectation that certain physiological and pathological processes which have come to be identified with smoking would be encountered. In this regard, one has not been disappointed. In the first year of observation about 40% of the subjects had evidence of bronchitis or emphysema or a combination of both. About 20% showed changes in the cellular lining of the bronchial tree. There was a wide variation in the degree of cellular change; some were so marked that periodic follow-up of the subjects has been instituted at a hospital. About 20% presented abnormal patterns in the electrocardiograph tracings. One would hope that when the subject stops smoking a favourable reversal of these findings will become evident.

In the first year about one-third of the subjects were completely successful in breaking the cigarette smoking habit, about one-third modified the habit, and one-third failed. Although the success rate has been better in

[Interpretation]

Le sujet assiste d'abord à un cours d'un mois où il vient au Centre pendant sept soirées au cours desquelles le programme est mis en œuvre. Le mois suivant, le sujet revient et on lui fait part des résultats des différents tests. S'il y a des anomalies graves, on les communique au médecin du sujet et c'est à lui de faire les recherches et d'administrer les traitements nécessaires. Nous essayons de rester en contact avec les sujets et de les faire revenir un mois sur deux pendant un an; au bout d'un an on leur fait passer une seconde fois tous les examens de laboratoire spéciaux. De cette manière, on peut comparer la santé des sujets lors de leur première visite quand ils fumaient et un an plus tard, qu'ils aient réussi ou non à changer leurs habitudes de fumer des cigarettes.

Le Centre pourrait rendre compte de ses activités en faisant part de ses résultats immédiats et à long terme. Les principaux membres professionnels du projet ont décidé que les résultats des différents aspects de l'enquête seront publiés dans les revues scientifiques voulues à la fin de l'étude de manière à pouvoir utiliser toutes les données sur la question. A l'heure actuelle, nous ne pouvons pas encore faire part de résultats précis.

Étant donné mes rapports avec ce Centre lors de sa conception, de sa formation et de son opération, je peux faire certaines observations pertinentes au sujet des projets de loi privés soumis à votre comité, touchant la réglementation de la consommation de tabac et de cigarettes.

Le Centre a été créé dans l'espoir de rencontrer certains phénomènes physiologiques et pathologiques qui ont été associés à l'utilisation du tabac. Les résultats n'ont pas été décevants de ce point de vue-là. Pendant la première année d'observation, environ 40% des sujets présentaient des symptômes de bronchite ou d'emphysème ou de ces deux affections. Chez 20% d'entre eux environ, on pouvait observer des changements dans la paroi cellulaire de l'arbre bronchique. On a pu constater une grande variation dans l'intensité des changements cellulaires; certains sujets étaient si affectés qu'on leur a fait subir un examen périodique de rappel dans un hôpital. Environ 20% présentaient des anomalies visibles sur les tracés d'électrocardiogramme. On espère que l'abandon du tabac aura pour résultat de rétablir l'état normal des sujets.

La première année, environ un tiers des sujets ont réussi à abandonner complètement la cigarette, environ un tiers ont changé leur habitude et un tiers ont échoué. Bien que le taux de succès ait été meilleur dans certains

[Texte]

some of the groups processed in the second year, it does not appear likely that any great improvement in these findings will evolve. In recent months, I have become increasingly conscious of how difficult some persons find it is to give up smoking, and some of the subjects at the Centre are strongly motivated and anxious to do so.

The use of prescription drugs in smoking withdrawal has not been found of value by other investigators. We have concentrated on health education in all its aspects, but soon felt the need to reinforce this with guided group discussion. Our results to date have not been so good as we had hoped. It is important to have an informed public, and continued effort must be expended in the area of health education.

Nevertheless, there will be some who want to smoke cigarettes. There will be those who want to give up smoking and who are unable to succeed or, to put it another way, are unable to help themselves.

In view of the established relationship of cigarette smoking as a health hazard, there would seem to be an obligation on the part of government to protect the consumer. The promotion and support of health education programs are commendable, but these should now be reinforced through regulatory control. In my opinion, such regulation could most effectively be carried out through the Food and Drug Directorate.

In summary, I have outlined the development of a pilot, limited but long-term venture into smoking and health. A Smoking Withdrawal Study Centre has been established under the joint sponsorship of the Local Board of Health, City of Toronto, and the Faculty of Medicine, University of Toronto, with the financial assistance of the Department of National Health and Welfare. The Centre provides an opportunity to investigate cigarette smokers and to give them a service in assisting them to give up cigarette smoking. Provision has been made to follow these subjects for at least a year. Although the mid-point of the project has been passed, findings have not yet been evaluated or correlated. Based on personal experience with the Centre, I have been impressed by the extent of abnormal functional and health findings. Health education techniques alone or reinforced by guided group discussions will not succeed for everyone, even though a person is highly motivated to give up cigarette smoking. Although government is urged to continue its efforts in the promotion of health

[Interprétation]

groupes traités la deuxième année, il ne semble pas probable qu'il y ait de grand progrès dans les résultats. Ces derniers mois, je me rends de plus en plus compte à quel point il est difficile pour certaines personnes de cesser de fumer, et certains de ces sujets au Centre sont fermement résolus et désireux de le faire.

D'autres enquêteurs n'ont pas trouvé que les médicaments spéciaux étaient utiles pour ceux qui veulent abandonner le tabac. Nous avons insisté sur l'éducation dans le domaine de l'hygiène dans tous ses aspects, mais nous avons vite senti le besoin de renforcer cette formule par des discussions en groupe menées par un animateur. Nos résultats jusqu'à présent n'ont pas été aussi favorables que nous l'espérons. Il est important que le public soit bien renseigné et les efforts d'enseignement en matière d'hygiène doivent être maintenus.

Cependant, il y en aura qui voudront fumer des cigarettes. Il y aura ceux qui veulent cesser de fumer mais n'y réussissent pas, ou en d'autres termes n'arrivent pas à s'imposer cette discipline.

Étant donné que l'effet néfaste de la cigarette sur la santé a été établi, il semble que le gouvernement a le devoir de protéger le consommateur. L'encouragement et l'appui de programmes éducatifs en matière d'hygiène sont louables mais devraient être renforcés par un contrôle réglementaire. A mon avis, ceci pourrait être fait par la Direction des Aliments et Drogues.

En résumé, je viens d'exposer l'histoire d'une étude d'essai, limitée mais à long terme, sur la question du tabac et de la santé. Un Centre d'études de l'abandon du tabac a été créé sous le patronnage conjoint du Conseil local d'hygiène de la ville de Toronto et de la Faculté de médecine de l'Université de Toronto, avec l'assistance financière du Ministère de la Santé Nationale et du Bien-être Social. Le Centre permet de faire des recherches sur les fumeurs de cigarettes tout en leur rendant service en les aidant à abandonner le tabac. Ces sujets seront suivis pendant au moins un an. Bien que plus de la moitié du projet ait déjà été accomplie, les résultats n'ont pas été évalués ni confrontés. D'après ce que j'ai observé moi-même au Centre, j'ai été impressionné par l'étendue des phénomènes anormaux dans la santé et le fonctionnement de l'organisme des fumeurs. Des cours d'hygiène seuls ou même accompagnés de discussions en groupes ne suffiront pas dans tous les cas; même quelqu'un qui a la ferme résolution de cesser de fumer pourra échouer dans ses efforts. Le gouvernement doit certes conti-

[Text]

education, the point has been reached when some steps have to be taken through regulation to protect the consumer of cigarettes.

[Interpretation]

nuer ses efforts dans la diffusion de l'éducation en matière d'hygiène, mais on en est arrivé au point où il faut protéger le consommateur de cigarettes par voie de réglementation.

10 February 69.

G. W. O. Moss, M.D., D.P.H.,
Deputy Medical Officer of Health,
City of Toronto,
and
Technical Director,
Smoking Withdrawal Study Centre,
Toronto.

le 10 février 69

G. W. O. Moss, M.D., D.P.H.,
Directeur Adjoint de la Santé Publique,
Ville de Toronto,
et
Directeur Technique,
Centre des études de l'abandon du tabac,
Toronto.

The Chairman: Dr. Moss?

Dr. G. W. O. Moss, M.D., D.P.H. (Deputy Medical Officer of Health, Department of Public Health, City Hall, City of Toronto): Thank you, Mr. Chairman. Mrs. MacInnis and members of the Committee, I would like to amplify and extend the written submission. The submission was written in general terms and therefore, I think, perhaps does suffer from some generalities. You will appreciate from the submission, however, that our work at the Smoking Withdrawal Study Centre has not yet been completed. We are past the halfway mark in our study and we are gathering a wealth of data, but these data have not yet been compiled and evaluated. However, this evening I can speak from personal experience in the Centre and answer questions of the members in this vein.

The submission does point out why we are operating a centre, what we are doing and, to some extent, how we are doing it. One of the questions that we had hoped to answer is how a person can stop smoking. It is a question that is being asked and we did not have the answer, obviously, when we started. I do not have it yet, but it is something that I think is on people's minds and has been coming to the fore just within the last couple of weeks.

In the letters to the editor section of one of the Toronto papers, one correspondent has written that the authorities have pointed out the hazards, the risks, attendant upon cigarette smoking but when are they going to tell us how to stop smoking? I think this, in one sense, reveals progress. Some of our messages are getting through but the more important and practical question to some people has not yet been answered and I do not think there is an easy solution to the problem.

Le président: Docteur Moss?

Dr G. W. O. Moss (Directeur adjoint de la santé publique et Directeur technique du Centre des études de l'abandon du tabac, Toronto): Merci, monsieur le président. Madame MacInnis, messieurs les membres du Comité, j'aimerais apporter des détails sur ce mémoire qui a été rédigé en termes généraux et qui est peut-être, en conséquence, trop général. Vous vous rendrez compte, à la lecture du mémoire, que notre travail, au Centre, n'est pas encore terminé. Nous avons complété la moitié du travail et accumulé de nombreuses données mais elles n'ont pas encore été étudiées et évaluées. Toutefois, ce soir, je peux parler de mon expérience personnelle au Centre et répondre à vos questions.

Dans le mémoire, on dit pourquoi le Centre a été ouvert, quel est le travail qui y est accompli et comment nous nous y prenons. L'une des questions auxquelles nous espérons pouvoir répondre est la suivante: Comment quelqu'un peut arrêter de fumer? C'est une question qui est souvent demandée. Nous n'avions évidemment pas la réponse en main, en commençant, et nous ne la connaissons pas encore. Mais, je pense que c'est une question qui traverse l'esprit de bien des gens et qui est mentionnée de plus en plus depuis quelques semaines.

Dans la colonne réservée à l'opinion des lecteurs dans un quotidien de Toronto, un lecteur rappelle que les autorités mentionnent les risques qu'entraîne l'usage de la cigarette mais se demande quand ces mêmes autorités diront au public comment arrêter de fumer. Je pense qu'en un sens, cela est un signe de progrès. Nos messages ont porté fruit mais l'aspect le plus important, aux yeux de plusieurs, demeure sans réponse. Je ne crois pas qu'il y ait de solution facile à ce problème.

[Texte]

I do want to point out that the origin of this Centre stemmed from the interest of lay persons, particularly an alderman of the City of Toronto, who brought this matter before the Board of Health with the question of what can we do as a health department to help people to stop smoking. In our community and by our responsible lay leaders there has been a concern with respect to this problem.

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I would also like to emphasize the professional concern which has been expressed in this Centre. The Centre is unique in its administration, in its combined service investigative program. I just did a quick tabulation. Five of us are at the centre core of the direction of this Centre. There are five other doctors, all prominent specialists and consultants in various branches of medicine in the City of Toronto and at the University of Toronto, who act as another close circle of participants and advisers, and there are at least seven others who are participating in a fringe way and who have expressed interest in the Centre; there are about 17 such people involved.

In today's medical circles, with all of the spectacular medical programs and research programs that are going on, I think it is rather significant that this number of physicians and specialists would consider this problem a challenge and give it their priority consideration.

Perhaps I should emphasize at this point that I am very interested in the subject matter covered by Dr. Wake. As a practising health officer, I am very interested in the youngsters and the programs for them, but I must stress that when we are talking about the Smoking Withdrawal Study Centre tonight we will be talking of adults, and of adults who are smokers and have expressed a wish to give up smoking.

In the techniques that we applied to help these people to give up smoking our main tool was the health education approach. We have given health education as concentrated an effort as it is possible to give. We have used all of the devices and all of the material available to us.

When we started out with our planned program we did not try intentionally to frighten people, but very soon they were asking for this type of subject matter and presentation. There is one movie in particular, made some years ago in the United States' Centre, which we call our *Bonnie and Clyde* movie. I think

[Interprétation]

Je tiens à signaler que ce Centre est né en raison de l'intérêt public, principalement en raison de l'intérêt d'un échevin de Toronto qui a porté le problème à l'attention du service municipal de santé et lui demandant ce qu'il pouvait faire pour aider le public à arrêter de fumer. Notre ville, grâce à ces personnes, s'est intéressée au problème.

Je voudrais aussi insister sur l'intérêt professionnel qui s'est manifesté dans ce Centre, qui est unique dans son administration et son programme de recherches. Nous sommes cinq au cœur des opérations. Il y a cinq autres médecins, tous des spécialistes dans divers domaines de la médecine, à l'emploi de la ville ou de l'université de Toronto, qui participent aux travaux et agissent comme conseillers. Il y a un groupe de sept autres médecins qui participent à temps partiel et qui ont manifesté leur intérêt dans notre travail; en tout, il y a environ 17 personnes d'impliquées.

Malgré tous les programmes de recherches qui se poursuivent dans les cercles médicaux aujourd'hui, je pense qu'il est assez important de noter qu'un si grand nombre de médecins et de spécialistes considèrent ce problème comme étant d'importance et lui accordent la priorité.

Maintenant je voudrais insister sur le fait que je m'intéresse beaucoup à la question étudiée par le Dr Wake, cet après-midi. En tant que praticien hygiéniste je m'intéresse aussi beaucoup aux jeunes et aux programmes qui leur sont destinés, mais tandis que nous parlons de ce Centre des études de l'abandon du tabac, nous parlerons des adultes et des adultes qui fument et qui ont déjà exprimé le désir de cesser de fumer.

Les techniques que nous appliquons pour aider aux gens à cesser de fumer, sont plutôt un programme d'éducation dans le domaine de la santé. Il s'agit d'éducation et nous concentrons nos efforts autant que nous pouvons le faire. Nous avons utilisé tous les moyens à notre disposition, tout le matériel qui existe sur le sujet.

Lorsque nous avons commencé, nous n'avons pas essayé intentionnellement d'effrayer les gens, mais, peu de temps après, ils nous ont demandé de tracer un programme. Il y a un film, en particulier, qui a été fait, il y a quelques années, aux États-Unis, dans un centre semblable, et c'est ce que nous appe-

[Text]

it was made about 1948. The dress and the automobiles, and so on seem to be of that vintage. It shows perhaps some of the most gory details of chest surgery that I have seen.

I am using this to illustrate to you that we have spared no effort on health education. As I say, many of the volunteers who came to the Centre expressly said that they had come to be frightened. They felt that this was the only thing that was going to help them to quit.

It soon became evident, and it was in our early planning for the Centre, that there would be a socio-psychological component that would require our attention, and this was built into the Centre. We have done some personality studies, and this came up in Dr. Wake's presentation. Perhaps this is the only area in which there is some overlap.

We have attempted to find out and define the smoking personality. We are working towards, and hoping that we can develop, a test which will have some prediction value and to which we could subject a group of smokers to find those who are most likely to succeed and separate them from the others. We are not in a position, however, to report any results on this part of our effort. This lead became evident to us during the first year, we instituted it in the second year and we are continuing it now in our third year.

We have the volunteers at the Centre submit themselves to a battery of tests some of which are quite sophisticated, and we are doing rather extensive work on the heart, on

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the respiratory system and on the breathing mechanics and functions; we are doing tests to detect abnormalities in the cells lining the bronchial passages which might give us a lead to pre-cancerous lesions; and we are doing studies on the blood.

Perhaps it is not generally recognized that one of the obvious components of any product subjected to combustion is carbon monoxide. This binds with the haemoglobin of the red blood cells and, of course, the person has to get along with less oxygen. If the blood is carrying carbon monoxide it is carrying less oxygen.

We are doing a host of studies, the correlation of which we hope will give us a new insight into this matter of smoking and health.

[Interpretation]

lons notre *Bonnie and Clyde*. Je pense que le film a été fait vers 1948, d'après les modes et les voitures qu'on y voit. Il fait voir les détails les plus sanglants que j'aie jamais vus sur la chirurgie pulmonaire.

Je donne cet exemple pour vous indiquer que nous n'avons rien négligé pour éduquer le public. Comme je l'ai dit, un bon nombre de volontaires, qui sont venus au Centre, ont dit qu'ils venaient pour être effrayés et que c'était la seule façon de les aider.

Très tôt, il est devenu évident, au début de la planification du Centre, qu'il y aurait un élément socio-psychologique à considérer, et nous l'avons introduit dans le Centre. Nous avons fait des études de personnalité. Le Dr Wake en a parlé dans sa présentation. C'est peut-être le seul point de similitude entre nos deux domaines. Il y a peu de chevauchement, ici.

Nous avons essayé de définir la personnalité du fumeur. Nous travaillons et nous espérons mettre au point un test pour faire des prévisions et que nous pourrions faire passer à des groupes de fumeurs, voir ceux qui réussissent le mieux et ensuite nous pourrions les séparer des autres. Toutefois, nous ne sommes pas en mesure de faire connaître les résultats sur cette partie de notre étude. Ceci est devenu évident au cours de la première année, nous l'avons institué durant la deuxième année et nous le continuons maintenant durant notre troisième année.

Nous avons des volontaires, au Centre, qui se prêtent à différentes séries de tests. Il y en a qui sont fort complexes, et nous faisons un travail assez poussé sur le cœur, sur le système respiratoire, sur les mécanismes et les fonctions de la respiration; nous faisons aussi des tests pour découvrir les anomalies dans les cellules qui tapissent les bronches, ce qui peut nous donner des indications sur des lésions cancéreuses; et nous faisons aussi des études sur le sang.

Il n'est peut-être pas reconnu, de façon générale, que la combustion crée du monoxyde de carbone. Celui-ci se mêle aux globules rouges du sang et alors la personne doit se contenter de moins d'oxygène. Si le sang transporte du monoxyde de carbone il transporte moins d'oxygène. Nous faisons un grand nombre d'études dont la corrélation, nous espérons, nous permettra de mieux comprendre cette question de cigarettes et de la santé.

[Texte]

Relative to our success rate, my primary interest was to see a significant percentage of these people coming to the Centre give up smoking. Young and eager with a new project, here, I thought, we would have the answer. In our first year, of course, we found that only a third were able to give up the habit. I think our work in the second year will improve this figure to some extent, but I am not encouraged that we will make any major gains.

The centre is perhaps raising more questions in my mind than when we started out, particularly on why people cannot give up smoking when they are presented with facts and accept these facts and in many instances have the evidence of the effect of smoking on their health and function put before them—the results of their electrocardiograms and their breathing tests, and so on.

Although obviously my interest is continuing and I hope we can improve our success rate on those who are giving up smoking, my interest is now also focusing on the failures. We are going to have to do something for them. In other words, I think we have to recognize that cigarette-smoking will be with us for a long, long time. I do not feel that within my lifetime I will see the ashtray go the way of the spittoon—let us put it that way—in spite of some of the discussion you had with Dr. Wake that there might be a sudden change in teenagers relative to the social acceptance of the practice.

The continuing aim should be to prevent people starting smoking, and it should, of course, be directed at our young folk. An attempt should be made to reduce the consumption of tobacco, but, as I pointed out, there are those who cannot, or will not, stop in spite of all the facts being presented to them. It is this group that we must think of in terms of some protective measures. I feel that this calls for, shall we say, bold imaginative and decisive action.

I feel that the matters before this Committee are commendable, but I hope that in Canada we can go beyond attempts which have been made in other countries. I do not feel that the unrestricted and uninhibited promotion of these products can continue.

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I am treading in an area in which I obviously, cannot profess to be competent in that it relates to certain legal matters, but I hope this Committee will seriously consider the matter of some curtailment on advertising.

[Interprétation]

Notre taux de succès a été de voir un nombre important de gens qui sont venus au Centre et qui ont, par la suite, cessé de fumer. J'avais pensé que c'était la solution. Au cours de la première année, nous avons constaté que seul le tiers a pu cesser de fumer. Au cours de la deuxième année, je pense que les chiffres seront de meilleur augure, mais je ne pense pas que nous aurons un succès foudroyant, toutefois.

Le Centre me donne encore plus à réfléchir maintenant qu'à ses débuts; surtout lorsqu'on se demande pourquoi les gens ne peuvent pas cesser de fumer lorsqu'on leur fait connaître les faits, lorsqu'ils acceptent les faits. Et, dans bien des cas, ils reconnaissent les effets néfastes de la cigarette sur la santé, après avoir passé des tests de respiration et d'autres.

Je m'intéresse sans cesse à ces questions. J'espère que nous aurons plus de réussite, qu'il y en aura plus qui cesseront de fumer, mais pour l'instant, je me concentre plutôt sur le taux des échecs. Il faudra faire quelque chose pour eux. En d'autres termes, je crois qu'il faut reconnaître. Qu'il y aura des fumeurs parmi nous pendant longtemps. Je ne pense pas que d'ici la fin de mes jours je verrai la disparition des cendriers, comme on l'a vu pour les crachoirs, malgré certains entretiens que j'ai eus avec le docteur Wake, qui me dit que les jeunes pourront peut-être changer la mode et que socialement, le fait de ne plus fumer sera de rigueur.

Je pense qu'il faut poursuivre nos objectifs, qu'il faut empêcher les gens de commencer à fumer, et ceci s'adresse aux jeunes. Je pense aussi qu'il faut essayer de réduire la consommation de tabac, mais, comme je l'ai signalé, il y en a qui ne peuvent pas ou qui ne veulent pas arrêter, malgré tous les faits qu'on leur fait connaître. Et je pense que c'est à ce groupe qu'il faut songer et qu'il faut trouver une certaine mesure de sécurité ou de protection. Ceci, à mon avis, demande des plans d'action créateurs.

Je pense que le travail du Comité est excellent, mais j'espère qu'au Canada nous pourrions aller au-delà des tentatives qui ont été faites dans d'autres pays. Je ne pense pas que la publicité, sans aucune restriction, pour ces produits, peut se poursuivre.

Maintenant, je passe à un domaine que je connais moins, et il s'agit de certaines questions d'intérêt juridique, mais j'espère que le Comité va étudier sérieusement la question de réduire la publicité. La mesure dans laquelle

[Text]

The extent to which this should go is a matter which will have to be left to this Committee and I do not feel that I can involve myself further in that aspect of it. There is a need here, but how far it should go is a matter for this group.

My thinking along the lines of regulatory control is that I favour the food and drug administration. I think ways and means should be found to class tobacco as a product which would come under the Food and Drugs Act. If one thinks of tobacco, and our attention is directed at cigarettes in particular, the purpose of a cigarette is to be lighted and to create smoke that is consumed.

A cigarette is not an ornament. Its whole intention is that it be a combustible material to produce smoke which is inhaled. The by-product of cigarettes then comes into intimate contact with body tissues. Even for the person who does not inhale, who obviously holds smoke in his or her mouth, this product comes into that close intimate contact. To me it is no different than for the person who swallows food or a pill into his gastro-intestinal system. It is no different than for a person who uses a cosmetic and applies it to the skin. This is a product which is in close intimate contact with body tissue. Whether this can be rationalized in legalities or not, to me this is a product which should come under the food and Drug administration.

I justify this claim in one other respect by calling attention to one of the claims that is made in cigarette advertising: "They satisfy". I think here they are selling something which they profess will bring about contentment, something which is positive in respect to a person's mental health and well-being.

To be open-minded, one has to admit that for some people cigarette smoking has some benefit in this respect. However, if we accept this, that it makes a contribution to mental health and well-being, then I think already the industry has in a sense declared that tobacco is a substance which could come under the food and drug administration.

I favour this because within your Food and Drug Directorate you would have, as the Act is currently constituted, some measure of control over advertising content. You would have control over packaging and labelling. You would have an interest in and direct partici-

[Interpretation]

on devrait apporter cette réduction me semble relever de la décision du Comité et je ne pense pas que je puisse approfondir cet aspect de la question, moi-même. Il faudrait déterminer jusqu'où il faut aller et il appartient à votre groupe de le faire.

Mon avis au sujet de la réglementation, c'est que je suis en faveur de l'administration assurée par la Direction des aliments et drogues. Je crois qu'il faudrait trouver des moyens de classer le tabac dans les produits qui tombent sous le coup de la Loi sur les aliments et drogues. Si l'on pense au tabac, et nous nous soucions notamment de la cigarette, une cigarette est faite pour être allumée et pour créer de la fumée que l'on absorbe.

La cigarette n'est pas un ornement. Son utilité, c'est d'être une matière combustible qui produit de la fumée, fumée que l'on inhale. Les éléments constitutifs de la cigarette entrent donc en contact intime avec les tissus de l'organisme. Même chez la personne qui n'absorbe pas la fumée, mais qui la garde forcément dans la bouche, il y a ce contact intime. Pour moi, c'est exactement la même chose qu'une personne qui avale de la nourriture ou une pillule qui passe dans son système gastro-intestinal. C'est exactement la même chose qu'une personne qui utilise un produit cosmétique qu'elle applique sur la peau. C'est toujours un produit qui entre en contact intime avec les tissus de l'organisme. Je ne sais si cela peut s'expliquer en termes juridiques, mais j'estime que c'est un produit qui devrait tomber sous le coup de la Direction des aliments et drogues.

Je peux justifier cette assertion d'un autre point de vue, en attirant l'attention sur l'une des affirmations de la publicité consacrée à la cigarette: «Elle satisfait.» Je crois qu'on essaie de vendre quelque chose qui, dit-on, donne un sentiment de satisfaction, quelque chose qui ajoute réellement à la santé mentale et au bien-être de la personne.

Il faut, en toute honnêteté, reconnaître que, pour certaines personnes, l'usage de la cigarette peut présenter certains avantages à cet égard. Cependant, si nous acceptons cette idée, à savoir, que la cigarette concourt à la santé mentale et au bien-être de la personne, je crois que déjà, l'industrie a, en un certain sens, déclaré que le tabac est une substance qui pourrait relever de la Direction des aliments et drogues.

Je suis en faveur de cela, car, dans le cadre de la Direction des aliments et drogues, vous pourriez aux termes de la Loi actuelle, exercer une certaine surveillance sur la teneur de la publicité. Vous pourriez réglementer l'emballage et l'étiquetage. Vous seriez intéres-

[Texte]

pation in the whole matter of adulteration. I
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think this whole area has not been properly investigated, concerning the additives which are placed in cigarette tobacco. You would have the opportunities through test procedures and inspection to establish and see carried out standards for purity and perhaps permissible standards or levels with respect to certain impurities.

For the group in whom I am currently interested, and the persons who will continue to smoke, I think this would give a greater measure of safety.

The Vice-Chairman: Thank you, Dr. Moss. I wonder if I might get an indication of how many members would like to ask questions. Four. We have approximately one hour. I am going to limit the first round to about 10 minutes. You might find some supplementary questions, and if we have more time we will have them at the end. I will start with Mr. Osler.

Mr. Osler: Thank you, Mr. Chairman. Dr. Moss, there was a story going around some time ago that the modern processes through which tobacco goes to be cured in North America are different from the processes used in some other countries. This was offered as a possible reason why we were having disastrous physical results with cigarettes here, and why they were not in the U.S.S.R. and in Turkey. I think those were the places mentioned. Do you know anything about that? Has it been followed up? The curing process is what I am talking about.

Dr. Moss: I am afraid, sir, this is an area which, my specialized practice I am not familiar with. This is possibly an area for exploration, but I am afraid I have not information on that point.

Mr. Osler: Probably that could be best left to the tobacco companies anyway. If they are looking for a way of producing a clean product, so to speak, then they could soon find out if some countries were using an old tried method that did not give the results that are brought about by the newer ways of curing tobacco. This was the thesis that was proposed.

Dr. Moss: I think this is a matter about which a pharmacologist would perhaps have some information.

[Interprétation]

sés, à toute la question de l'adulteration des produits, et vous y prendriez une part directe. Je crois que ce secteur n'a pas fait l'objet d'enquêtes suffisamment approfondies, pour ce qui est des substances que l'on ajoute au tabac dans les cigarettes. Vous auriez l'occasion, grâce à des analyses et à des inspections, d'établir et de faire appliquer des normes de pureté, et peut-être aussi des normes ou des niveaux tolérables quant à la teneur en certaines impuretés.

Je pense que pour le groupe auquel je m'intéresse actuellement, et pour les personnes qui vont continuer à fumer, cela donnerait un plus grand degré de sécurité.

Le vice-président: Merci, docteur Moss. J'aimerais savoir combien de membres du Comité ont des questions à poser. Quatre. Il nous reste environ une heure. Je vais limiter le premier tour à 10 minutes environ. Vous aurez peut-être des questions supplémentaires, et, si nous avons encore le temps, vous pourrez les poser à la fin. Je vais commencer par M. Osler.

M. Osler: Merci, monsieur le président. Docteur Moss, il y a quelque temps, une rumeur circulait selon laquelle les procédés modernes de conditionnement du tabac utilisés en Amérique du Nord étaient différents des procédés utilisés dans d'autres pays. On disait que c'était peut-être la raison pour laquelle l'effet physique de la cigarette était désastreux sur notre continent, et ne l'était pas en Turquie et en Russie. Je crois bien que c'était de ces pays-là qu'il s'agissait. Avez-vous des renseignements à cet égard? Est-ce que l'on s'est intéressé à la question? Je veux parler du procédé de conditionnement.

M. Moss: Je suis désolé, monsieur, mais c'est un domaine que, dans ma spécialité, je connais mal. Il y aurait peut-être lieu d'explorer davantage cet aspect de la question. Mais je n'ai pas de données à ce sujet.

M. Osler: C'est sans doute aux compagnies de tabac qu'il faudrait laisser le soin d'étudier la chose, de toute façon. Si elles cherchent à produire un produit propre, pour ainsi dire, elles pourraient facilement découvrir si d'autres pays utilisent une vieille méthode éprouvée qui n'a pas les effets de procédés modernes de conditionnement du tabac. C'est là la thèse que l'on avait proposée.

M. Moss: Je crois qu'un spécialiste en pharmacologie pourrait peut-être vous donner des renseignements à ce sujet.

[Text]

Mr. Osler: Is there any indication of why approximately 33½ per cent of the people seem to be able to stop smoking and others do not? Is there any indication that this is a physical thing or a psychological thing, or what?

Dr. Moss: We are still searching for that answer. I think there are possibly different answers and different reasons for different people. We approach this on the premise that we are dealing with an habituation, not an addiction. However, I think there is a group who have a deeper dependence. With them it is not a simple habituation condition reflex.

I am thinking of a lady I was talking to last week at the centre who had been through the centre a year ago February. This was her anniversary, her follow-up. She had not been successful in giving up smoking. She had some minor, not major, abnormality which had been pointed out to her. She had accepted the information which we had presented to her in the course. She is working in an office

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in which apparently all of the men have given up smoking. In other words, people around her. These are not people who attended the centre. They have given up smoking, but she does not know why she still smokes. I think Dr. Wake has indicated if we could find the key that would unlock the door...

Mr. Osler: Would it likely reveal the same type of thing that alcoholics suffer from? We all know people who can take a drink or leave a drink, and we all know those who perhaps sometimes drink too much. And we all know of those for whom alcohol is disastrous. They seem to be in a separate category.

Dr. Moss: There may be something in this. That is why I mentioned to you that we are probing into this matter of the smoking personality.

Mr. Osler: If there were anything along that route, would it be metabolic, or psychological, or has anybody any idea?

Dr. Moss: We think it is a psychological attitude or behavioral pattern, or this type of thing. I do not think it is linked pharmaceutically or otherwise to organic tissue. This is why it is separate from an addiction. I think you get tissue and cellular change with an

[Interpretation]

M. Osler: Sait-on pourquoi 33½ p. 100 environ des gens semblent être capables de s'arrêter de fumer, et les autres n'y parviennent pas? S'agit-il d'un problème d'ordre physique, d'ordre psychologique ou quoi?

M. Moss: Nous faisons encore des recherches pour trouver la réponse à cette question. Je suppose que les réponses et les raisons sont différentes selon les personnes. Nous partons du principe que nous avons affaire à une habitude, non à un besoin. Cependant, dans le cas de certaines personnes, l'assujettissement est beaucoup plus profond. Pour elles, il ne s'agit pas simplement d'un réflexe dû à l'habitude.

Je songe, par exemple, à une femme avec laquelle je m'entretenais la semaine dernière, au Centre, et qui y avait subi un traitement il y a un an, en février. C'était le premier anniversaire du début de son traitement et son examen de vérification. Elle n'avait pas réussi à abandonner la cigarette. On lui avait signalé une légère anomalie, sans grande importance, dont elle souffrait. Elle avait accepté les renseignements que nous lui avions transmis. Elle travaille dans un bureau où, apparemment, tous les hommes ont cessé de fumer, donc, les gens de son milieu immédiat. Ce ne sont pas des gens qui ont subi le traitement dispensé à notre Centre. Ils ont abandonné la cigarette, mais elle ne sait pas pourquoi elle continue à fumer. Je crois que le Docteur Wake a laissé entendre que si nous pouvions trouver la clé du mystère...

M. Osler: Pensez-vous que l'on découvrirait le même genre de troubles que dans le cas des alcooliques? Nous connaissons tous des gens qui peuvent prendre un verre mais peuvent tout aussi bien s'en passer, et d'autres qui parfois boivent à l'excès. Et nous connaissons tous des gens pour lesquels la boisson est une habitude désastreuse. Ces gens-là semblent constituer une catégorie à part.

M. Moss: Il y a peut-être là une indication. C'est pourquoi, je vous l'ai dit, nous faisons des recherches sur la personnalité du fumeur.

M. Osler: S'il y avait là une explication, s'agirait-il d'un facteur d'ordre métabolique, ou psychologique—ou n'en sait-on rien?

M. Moss: Nous pensons que c'est surtout une attitude psychologique, ou un type de comportement humain, ou quelque chose de ce genre. Je ne pense pas que cela ait un lien, d'un point de vue pharmaceutique ou autre, avec les tissus organiques. C'est pourquoi il

[Texte]

addiction but I do not think you get this here. I think this is generally accepted.

Mr. Osler: Is there any indication that the rate of disaster caused by smoking is greater in relation to the number of cigarettes smoked now than it was 40 years ago, or is this a diagnostic thing.

My own father, for instance, who was a very heavy smoker died 24 or 25 years ago from emphysema. Today he would probably have died from smoking cigarettes. At that time he died of emphysema and the doctor said that probably was a side effect of pneumonia which he got from being in the trenches. I am wondering if this is not something that has been with us a long time and the alarming increase in numbers is really because of our diagnostic skills.

Dr. Moss: I think there is a measure of truth in that, but those who are close to the clinical and statistical field feel that there is a true increase as well. I think one has to recognize that better diagnostic methods would have contributed to this to some extent, but this is not the whole answer.

Mr. Osler: What about the incidence of these related diseases in general compared with 20 or 30 years ago? I am trying to get around one of the objections which no doubt will come before us, that pollution of the air and other things are the culprit and not tobacco. If the curve has gone up alarmingly in the last 20 or 30 years it is easier to hang hat on pollution than on other things. Has the incidence of these diseases gone up in non-smokers as well?

Dr. Moss: As I say, one has to generalize here when speaking of many conditions. You have picked one specific condition, lung cancer, and the answer is obviously no.

Mr. Osler: It has gone up?

Dr. Moss: Yes, the incidence is up. Here you get into the whole realm of different types of tissue cancer. But if I might just go back to your question, in my personal view we are dealing here with air pollution. This is personal air pollution and the most concentrated form of air pollution that exists. I made reference to carbon monoxide. You think of that in terms of car exhaust. You do not think

about it when inhaling on a cigarette. The products of combustion are quite similar whether you are burning leaves out on the

[Interprétation]

ne faut pas considérer l'usage du tabac comme une habitude invétérée, qui comporte un changement du tissu et de cellules. Ce n'est pas le cas ici. Je crois que c'est généralement accepté.

M. Osler: Est-ce que le taux des effets nocifs causés par la cigarette est plus élevé comparativement aux nombres de cigarettes consommées à l'heure actuelle qu'il y a 40 ans? Ou est-ce qu'il s'agit d'un diagnostic?

Mon propre père, par exemple, qui était un gros fumeur, est mort d'emphysème il y a maintenant 24 ou 25 ans. Selon le médecin l'emphysème était un effet secondaire d'une pneumonie contractée dans les tranchées. Aujourd'hui on dirait qu'il est mort par suite de son habitude de la cigarette. Je me demande si l'accroissement alarmant n'est pas dû à notre compétence accrue en diagnostic?

M. Moss: Dans une certaine mesure, peut-être. Mais je crois que ceux qui s'occupent des données statistiques et de médecine estiment qu'il y a aussi une augmentation réelle. Je dois admettre que les meilleures méthodes de diagnostic ont pu contribuer mais je crois que ce n'est pas la seule raison.

M. Osler: Que dire de l'incidence des maladies connexes en général par rapport à il y a 20 ou 30 ans? J'essaie de contourner l'objection qui se posera probablement, à savoir que la pollution de l'air en serait la cause et non pas le tabac. Si l'incidence a augmenté de façon anormale depuis 20 ou 30 années, est-ce qu'on ne peut pas l'attribuer à la pollution tout autant qu'à autre chose? Est-ce que l'incidence de ces maladies est plus forte chez les non-fumeurs également?

M. Moss: Il faut, bien entendu, généraliser lorsqu'on parle de diverses conditions. Vous vous placez dans le contexte d'une seule maladie, par exemple, le cancer du poumon. Évidemment, ce ne serait pas le cas.

M. Osler: Elle a augmenté?

M. Moss: L'incidence est plus élevée. Évidemment, il y a toute une gamme de cancers qui s'attaquent aux tissus. Mais pour revenir à notre question, à mon avis il s'agit ici de pollution de l'air, la pollution personnelle de l'air et, je crois, la forme la plus concentrée de pollution de l'air qui soit. Je parle du monoxyde de carbone. Vous pensez au monoxyde de carbone qui sort du tuyau d'échappement d'un automobile, mais non pas lorsque vous fumez une cigarette. Le produit de la combustion est semblable lorsqu'on

[Text]

street and creating general air pollution or you are smoking ground up tobacco. You have dirt, you have carbon particles, you have gaseous components such as carbon monoxide. Where you might differ is in the specific components, such as the very highly complex chemical compounds some of which in tobacco smoke are known carcinogenic cancer-producing substances.

Mr. Osler: Thank you.

The Vice-Chairman: Mr. Robinson.

Mr. Robinson: Thank you, Mr. Chairman. I will try to be brief, as usual.

The Vice-Chairman: That is what I am afraid of.

Mr. Thomas (Maisonneuve): That is what you say.

Mr. Robinson: Dr. Moss, in your presentation you talk about smoking withdrawal. You mention that some work was done in this regard in Sweden, Denmark, the United Kingdom and the United States but apparently the effectiveness of such work was not impressive. I am wondering in what way does your study in smoking withdrawal differ from what was carried on in these other countries, and do you hope to have learned from their experience in order to make this much more effective?

Dr. Moss: In setting up this centre we reviewed the scientific literature on what was done elsewhere. We felt that we did not necessarily want to duplicate what others were doing. We wanted to learn from their mistakes and build on their good points.

Most of the clinics overseas were clinical in the concept of, shall I say, treatment centres where various compounds, nicotine substitutes, drugs such as lobeline were used and although some were operated in health departments in the United Kingdom many were operated in conjunction with a hospital clinical setting.

When I say "results" I am thinking of the success rate in getting people to stop smoking—that is, where it is highly impressive. The one centre with which we had perhaps more closer knowledge was the Roswell Park Memorial Cancer Institute in Buffalo, New York, which had been running a centre less along the clinical lines of overseas and more in the health education type of approach.

The thing that bothered the Buffalo group of course was the failure rate over the long-term period. My comment here was directed

[Interpretation]

brûle des feuilles et lorsqu'on fume du tabac haché. Dans les deux cas, vous avez de la poussière, des particules de carbone, des éléments gazeux comme le monoxyde de carbone. Là où l'on peut établir une différence c'est dans les éléments spécifiques, comme les composés chimiques très complexes dont certains qui se trouvent dans la fumée du tabac sont des éléments cancérigènes.

M. Osler: Merci.

Le vice-président: Monsieur Robinson.

M. Robinson: Merci, monsieur le président. Je vais essayer d'être aussi bref que possible, comme d'habitude.

Le vice-président: C'est ce que je crains.

M. Thomas (Maisonneuve): C'est ce que vous dites.

M. Robinson: Docteur Moss, je constate que dans votre exposé, vous parlez de perdre l'habitude de la cigarette. Et vous avez dit que l'on a fait des travaux là-dessus en Suède, au Royaume-Uni, au Danemark et aux États-Unis. Apparemment, les résultats n'ont pas été très impressionnants. De quelle façon vos propres études diffèrent-elles des travaux qui ont été faits dans ces autres pays et dans quelle mesure comptez-vous profiter des résultats qu'ils ont obtenus pour rendre vos propres projets plus efficaces?

M. Moss: Avant de créer le Centre, nous avons étudié toute la documentation sur les travaux faits à l'étranger. Nous ne voulions pas, évidemment, répéter les efforts des autres. Nous voulions profiter de leurs erreurs et de leurs succès.

La plupart des cliniques d'outre-mer étaient des centres de traitements où l'on utilisait divers composés, des substituts de la nicotine, des drogues comme la lobeline. Au Royaume-Uni, par exemple, cette clinique relevait du Ministère de la santé, bien que, confiée à l'administration d'un hôpital.

Lorsque je parle des résultats, je songe évidemment au nombre de gens qui ont cessé de fumer, lorsqu'ils sont très impressionnants. Nous connaissons mieux la clinique de Buffalo, New York, le Roswell Park Memorial Cancer Institute qui administre un Centre qui a moins l'aspect d'une clinique que les centres d'outre-mer, mais beaucoup plus orienté vers l'éducation.

Ce qui préoccupait le groupe de Buffalo, c'était l'incidence des échecs sur une longue période. Par conséquent, nos commentaires

[Texte]

more at the success related to the percentage of participants in a particular clinical setting who gave up smoking.

One felt that if you were setting up something you wanted to set up something which would give you a better success rate than what they had found. This was our attempt.

Mr. Robinson: This brings up another area of concern, namely your intake methods of obtaining candidates or volunteers, as you term it in your presentation. Was this a question of getting people who had a chronic smoking problem or who had been, shall we say, advised by their doctor that they should quit and so they thought they would come to your clinic and get involved in your pilot project, or was this just interest groups? What kind of people are they?

Dr. Moss: During our first year most of our volunteers came from within the civic service, the city of Toronto and metropolitan Toronto. They were a handy group—you might say they were an industrial group. We were anxious to get started because there had been some delay in accumulating equipment and so forth. However, there were outside volunteers. The Centre had become known through the press and anybody who telephoned was put on the list. During the second and this, our third year, we have recruited our volunteers from the press; there has been no emphasis with respect to special need and

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anybody who wishes to give up smoking can submit their name.

Mr. Robinson: Do you have a set of tests that are given to these people when they apply first—psychological tests, physiological tests, sociological tests, pathological tests and so on?

Dr. Moss: Yes. This is our volunteer pool, if I may use that word. A group of them, between 75 and 100, come for what we call a screening night and are subjected during this evening to a comprehensive socio-psychological questionnaire. This brings up this matter of personalities of the smokers and can we differentiate these volunteers into groups and predict the ones most likely to succeed. This perhaps is one of our major components in research at the present time. Depending upon their performance on these tests they are then called subsequently into a month's course where we present the health education and the group dynamics discussion,

[Interprétation]

portaient beaucoup plus sur les succès, à savoir, le nombre de participants dans une clinique donnée qui ont abandonné l'usage de la cigarette.

On estimait que quant à organiser une clinique, il valait mieux en organiser une qui puisse obtenir de meilleurs succès.

M. Robinson: Ceci m'amène à une autre question sur les méthodes que vous employez pour obtenir des volontaires ou des «candidats», comme vous le dites dans votre exposé. S'agissait-il de trouver des gens dont l'habitude du tabac était chronique ou à qui le médecin avait déconseillé de fumer et qui sont venus à votre clinique lorsque vous avez lancé votre projet pilote, ou s'agissait-il d'un groupe de gens intéressés? De quel genre de personne s'agit-il?

M. Moss: Au cours de notre première année, la plupart de nos volontaires venaient de la Fonction publique, de la ville de Toronto. Ils formaient un groupe commode, d'un groupe du monde industriel. Nous avions hâte de nous mettre à l'œuvre, parce qu'il y avait eu des délais pour trouver le matériel et ainsi de suite. Cependant, il y avait des volontaires de l'extérieur. Le Centre était bien connu grâce aux journaux et tous ceux qui téléphonaient étaient placés sur une liste. Au cours de la deuxième et de la troisième année, nous avons recruté nos volontaires grâce à des annonces dans les journaux. Nous n'avons pas mis l'accent sur des besoins spéciaux. Quiconque voulait cesser de fumer pouvait se présenter.

M. Robinson: Appliquez-vous une série de tests aux candidats lorsqu'ils se présentent? Tests psychologiques, examens physiologiques, psychologiques, sociologiques, et ainsi de suite?

M. Moss: Oui. C'est notre groupe de volontaires. Lorsque 75 et 100 personnes se présentent pour un soirée d'examen, nous leur faisons passer un examen psychosociologique poussé sous forme de questionnaire. Ce qui nous amène à la question de la personnalité du fumeur et si nous pouvons mettre les volontaires en groupe et prédire lesquels ont le plus de chance de succès et lesquels en ont moins. C'est peut-être un des plus importants éléments de nos recherches à l'heure actuelle.

Selon leur rendement lors des examens, on les convoque par la suite pour un programme d'un mois où nous présentons des cours d'éducation et des discussions de dynamisme de

[Text]

and during this period we conduct the physical tests, some of which I have outlined.

Mr. Robinson: How do you determine their motivation for taking the course, to start with?

Dr. Moss: I think the fact that they have expressed interest and have come forward is something that we have to recognize. I think this illustrates the value of this socio-psychological screening.

Mr. Robinson: Do you get referrals from agencies, medical groups or medical doctors?

Dr. Moss: A few. We still have some connections with physicians in industrial medical practice who refer people, but they are not referred because of symptoms or illness. We have had a few people referred by specialists and from hospital clinics—individuals who definitely have problems.

Mr. Robinson: You indicated that some of the funds received were used to purchase specialized equipment of one sort or another. What kind of equipment is involved here? Is this for carrying out your tests, for instance?

Dr. Moss: Yes. By and large it is the equipment required for the physical tests. We have what we call a gas diffusion analyser, which measures the ability of the lungs to exchange gases; from air to blood and back to air. We have spirometers, which measure the vital capacity of the lungs, and so on. We have bought machines which assist us in promoting sputum, and we have many volunteers. We want to get a deep-seated sample of sputum. These are called mistometers, which produce a specific...

Mr. Robinson: Did you say you have a form of breathilizer test that you can use on people to indicate their tar and nicotine content?

Dr. Moss: No, you cannot specifically go into those areas, but we do conduct carbon monoxide determinations on these people.

Mr. Robinson: I am wondering if it is a practical area of scientific endeavour to try and present something of this nature and then qualitatively or quantitatively indicate that you should keep it below a certain level in your system.

Dr. Moss: Some of this work has been done in other centres. I think this is too highly technical and impractical for the type of centre we are operating.

[Interpretation]

groupe sur la santé et pendant cette période nous procédons aux examens physiques, dont j'ai parlé quelque peu.

M. Robinson: Comment déterminez-vous la motivation de ces candidats?

M. Moss: Je crois que le fait qu'ils s'intéressent au programme et qu'ils se sont présentés est un fait qu'il nous faut reconnaître. Et cela montre la valeur de cette élimination psychosociologique.

M. Robinson: Est-ce que certains organismes, des groupes médicaux, des médecins, vous envoient des candidats?

M. Moss: Très peu. Nous avons des rapports avec des médecins du monde de l'industrie qui nous envoient des candidats mais pas en raison de symptômes ou de maladies. Certains spécialistes et des cliniques hospitalières nous ont envoyé des personnes qui ont un véritable problème.

M. Robinson: Vous avez dit que certains des capitaux obtenus ont servi à acheter du matériel spécialisé. De quel genre de matériel voulez-vous parler? Était-il destiné à vos tests, par exemple?

M. Moss: Oui. En général, le matériel requis pour les examens physiques. Nous avons un appareil qui sert à analyser la diffusion des gaz, qui mesure l'habilité du poumon à échanger les gaz entre l'air et le sang. Nous avons des spiromètres qui mesurent la capacité du poumon. Nous avons acheté des machines qui stimulent la formation de crachats et nous avons beaucoup de volontaires. Nous désirons obtenir des échantillons de crachat du fond du poumon; ces appareils sont des mistomètres.

M. Robinson: Avez-vous dit que vous avez un genre d'ivressomètre avec lequel vous mesurez la quantité de goudron et de nicotine dans leur poumon?

M. Moss: On ne peut pas aller si loin, mais nous étudions la teneur en monoxyde de carbone.

M. Robinson: Est-ce qu'il s'agit d'un secteur pratique d'une étude scientifique pour tenter de présenter des données de ce genre afin d'établir quantitativement et qualitativement le niveau qu'il faut respecter.

M. Moss: Certains de ces examens, évidemment, sont faits dans d'autres centres. Je crois que ce travail est trop technique et compliqué pour notre Centre.

[Texte]

Mr. Robinson: You have indicated that during the lifetime of this project some 500 or 600 people will go through the intake process. What do these people have in common, apart from the fact that they smoke?

Dr. Moss: That really is the common factor.
• 2055

This is the reason for the size of the sample. Obviously we are taking both male and female. There will be many differences, really. Differences in age; differences in cigarette consumption; the age at which they started to smoke and the number of years they have smoked. There are many of these variables which will have to be taken into account in determining our results.

Mr. Robinson: I see, but for your purposes you are only concerned—

The Vice-Chairman: Remember the question you were going to ask, Mr. Robinson, and we will get around to it again. Your ten minutes are up. In fact, you may never get around to it again because the list is growing.

Mr. Robinson: I have barely started.

The Vice-Chairman: Mr. Howe?

Mr. Howe: Thank you, Mr. Chairman. I was rather interested in this particular brief and I was wondering if you, Dr. Moss, brought it to the attention of the authorities and asked them to get into it, and give you a chance to go to work on this type of thing?

Dr. Moss: Yes. I think most of this is outlined. The advisory committee to the local Board of Health in the City of Toronto suggested that we venture into a pilot project of this nature. Obviously to do all of the things that we wanted to do required facilities which you just do not generally find in a local health department, and it was shortly after the smoking and health program had been announced by Ottawa that Dr. Norman Delarue and myself—we are sort of joint directors of this project—worked out a protocol and came and presented this to the officials of the Department.

Mr. Howe: I am sure that is very commendable. After all, this is what we need in Canada today; people who are directly and personally involved in questions of this type. Are there any similar projects going on in Canada today in connection with smoking withdrawal?

Dr. Moss: Not to my knowledge.

[Interprétation]

M. Robinson: Vous avez indiqué que pendant la durée de ce projet, quelque 500 ou 600 personnes seront traitées. Qu'est-ce que ces gens ont en commun, outre le fait qu'ils fument?

M. Moss: Le fait de fumer est sans doute le dénominateur commun. C'est la raison de la taille de l'échantillon. Nous acceptons et les hommes et les femmes. Il y a beaucoup de différences entre les candidats; différences d'âges, de consommation de cigarettes, différence quant à l'âge à lequel ils ont commencé à fumer, quant au nombre d'années qu'une personne fume. Il faut tenir compte de bon nombre de ces facteurs pour analyser les résultats.

M. Robinson: Mais pour vos propres fins...

Le vice-président: Retenez votre question et vous pourrez la poser lorsque ce sera de nouveau votre tour car vos dix minutes sont écoulées, et la liste s'allonge.

M. Robinson: J'ai à peine commencé.

Le vice-président: Monsieur Howe?

M. Howe: Merci, monsieur le président. J'ai été très intéressé par votre exposé, et je me demande, docteur Moss, si vous l'avez signalé aux autorités et si vous leur avez demandé de vous fournir l'occasion d'approfondir votre travail dans ce domaine?

M. Moss: Oui. Je crois que le Comité consultatif de la Commission de contrôle sanitaire de la ville de Toronto a suggéré qu'on entreprenne un projet-pilote de ce genre. Pour faire tout ce que nous désirions entreprendre, il nous fallait évidemment des services qu'on ne trouve pas dans un service d'hygiène municipal. Peu de temps après la campagne d'information sur le tabac et la santé a été annoncée à Ottawa et le docteur Norman Delarue et moi-même qui sommes co-directeurs de ce projet avons mis au point un protocole que nous avons présenté aux fonctionnaires du ministère.

M. Howe: C'est fort bien. C'est ce qu'il nous faut au Canada, des gens qui s'intéressent aux problèmes de ce genre. Il y a d'autres projets semblables au Canada relatifs à l'abandon de la cigarette?

M. Moss: Pas à ma connaissance.

[Text]

Mr. Howe: You said there were some in other countries. Are there any others in Canada?

Dr. Moss: Not to my knowledge, of this type.

Mr. Howe: I come back to the question I asked this afternoon of Dr. Wake. The Department of Health and Welfare in Ottawa issued a bulletin and they divided smokers into two categories. I will enumerate them again:

...In one category, psycho-social factors appear to predominate, stopping smoking is relatively easy and withdrawal symptoms are slight or absent.

You have done quite a bit of work in this psycho-social area. Did you find that?

Dr. Moss: Yes. Some are successful and they can stop like this. We have all extremes. We have those who have found it easy and those who have found it extremely difficult—in fact, disturbing.

Mr. Howe: In other words, in this group you would find people that did not inhale, they would just carry a cigarette around as part of a social amenity which they figured was necessary in some cases in some places. As we were discussing this afternoon with Dr. Wake with regard to children, they start because other people do it, and in this group it is not too hard to get them to stop, there are not the withdrawal problems?

Dr. Moss: Oh yes, there is definitely a problem in what I feel is a significant proportion. I might say our criteria for admission to this centre is to have some desire to give up smoking. Initially we said you had to be smoking a pack and a half a day. We did not strictly adhere to that; that is roughly 30 cigarettes a day. It is rather curious that averaging out several hundreds of these people, approximately—this is the major group we are dealing with—the average consumption is about 30 cigarettes a day. I do not think any of them have been smoking fewer than 15, and some of them have been smoking as many as 75 cigarettes a day.

• 2100

Mr. Howe: That is a vast difference in the number of cigarettes smoked a day before you take them in. You would not bother with people who smoked about five or six?

[Interpretation]

M. Howe: Il y en a dans d'autres pays. Est-ce qu'il y en a d'autres au Canada?

M. Moss: Je ne pense pas qu'il y ait d'autres cliniques de ce genre au Canada, non.

M. Howe: Je reviens à la question que j'ai posée cet après-midi au docteur Wake. Le ministère de la Santé nationale et du Bien-être social à Ottawa a publié un bulletin dans lequel on divise les fumeurs en deux catégories.

Dans une catégorie, les facteurs psychosociaux semblent dominer il est relativement plus facile de cesser de fumer et les symptômes qui s'ensuivent sont moins sérieux ou négligeables.

Vous avez entrepris beaucoup de travaux dans ce domaine. Avez-vous constaté cela?

M. Moss: Oui. Certaines personnes peuvent cesser de fumer d'un moment à l'autre. Nous avons tous les extrêmes: ceux pour qui il est facile, d'autres pour qui il est extrêmement difficile de cesser de fumer.

M. Howe: Autrement dit, dans ce groupe vous trouvez des gens qui n'aspirent pas la fumée, qui fument parce que c'est bien vu. Nous avons discuté, cet après-midi, avec le docteur Wake, la question de l'influence sur les enfants. Dans ce groupe, il n'est pas très difficile de les amener à cesser de fumer, ils ne subissent pas les effets maladiés?

M. Moss: Mais oui. Il existe sûrement un problème qui est tout aussi considérable. Je puis ajouter qu'un de nos critères d'admission est que le candidat désire cesser de fumer, et, au début, nous obligerions le candidat à ne pas fumer plus d'un paquet et demi par jour, c'est environ 30 cigarettes par jour. Si on établit une moyenne de plusieurs centaines de ces personnes, la consommation moyenne est d'environ 30 cigarettes par jour. Je ne pense pas qu'il y en ait beaucoup qui fument moins de 15 cigarettes et certains fument jusqu'à 75 cigarettes par jour.

M. Howe: Autrement dit, par conséquent, il y a une grande différence entre le nombre de cigarettes fumées avant le traitement, ainsi vous ne vous souciez pas trop du fait que les gens en fument 5 ou six?

[Texte]

Dr. Moss: No, because one of our objectives in this research was to take a smoker at a given period of time, subject him to these tests and then, as I say, a year later, depending on whether he gave up smoking or did not give up smoking, we would repeat our tests so that we could compare the effects.

Mr. Robinson: A supplementary, Mr. Chairman.

The Chairman: No supplementaries, Mr. Robinson.

Mr. Howe: The second group I think is the important one mentioned in this article. I mentioned it this afternoon, as you probably remember, but I will repeat it. In the latter group the dependence may have a pharmacological ailment and this has to do with nicotine. Now I get to the question that Mr. Osler was speaking about. Is there any similarity between the alcoholic and the heavy smoker with regard to the drug withdrawal effects?

Dr. Moss: Again you are encroaching on an area on which I do not think I can answer with competence. I think definitely there are certain personality traits. Whether they are identical or common to the smoker and the alcoholic, I am afraid I cannot answer that, but I think other investigators have found out that there is a definite psychological component which becomes very deep-rooted in some individuals. As I say, we may have some information on this point ultimately, relating this to their basic personalities.

Mr. Howe: You do say that this should be brought under the Food and Drug Directorate to protect the consumer from the inherent dangers that you feel are incorporated in the cigarette. As you said, even the smoke of the cigarette has a disturbing effect, an unhealthy effect on people. But the point that I am trying to make is that we are not going to stop all the people from smoking.

Dr. Moss: I agree with that.

Mr. Howe: Then, do you not agree that if we can find a cigarette that is the safest one for them, this is the area in which we should be working, as well as in health programs? I felt that that was why you suggested that it be brought under the Food and Drug Directorate.

Dr. Moss: Yes, this is one of my points. We have the two groups; the one we want to prevent from taking up the habit, and we have to do something for the person who will continue to smoke; we have to minimize the

[Interprétation]

M. Moss: Non, car l'un de nos objectifs, au cours de ces recherches, était de prendre un fumeur à une période donnée de temps, de le soumettre à ces tests, et puis, une année plus tard, selon qu'il ait abandonné cette habitude ou non, nous répétons nos tests afin de pouvoir comparer les effets.

M. Robinson: Une question supplémentaire, monsieur le président.

Le vice-président: Pas de question supplémentaire.

M. Howe: Le deuxième groupe me semble le plus important de ceux mentionnés dans cet article. Je l'ai cité cet après-midi si vous vous en souvenez. Mais je vais répéter ce point: dans le deuxième groupe il peut y avoir des effets pharmacologiques dus à la nicotine; je reviens à la question de M. Osler. Y a-t-il une similitude entre l'alcoolique et le gros fumeur vis-à-vis du retrait de la drogue?

M. Moss: Encore une fois, je ne pense pas que j'aie la compétence voulue pour répondre à cette question. Je pense que définitivement il y a certains traits de personnalité, mais de là à dire qu'ils sont identiques ou communs entre les fumeurs et les alcooliques, je ne peux répondre de façon précise. Mais d'autres enquêteurs ont trouvé qu'il y a des éléments psychologiques qui sont bien ancrés chez certaines personnes et comme je vous l'ai dit, nous avons peut-être des renseignements sur ce point qui se rapportent à leur personnalité fondamentale.

M. Howe: Vous dites que la protection des consommateurs des dangers inhérents attachés à la cigarette devrait être du ressort du Directeur des Aliments et des Drogues. Comme vous l'avez dit, même la fumée a certains effets nocifs sur les individus. Je pense cependant, qu'on ne pourrait pas empêcher tous les gens de fumer.

M. Moss: Je suis d'accord.

M. Howe: Alors, reconnaissez-vous aussi qu'on peut découvrir la cigarette la plus sûre pour ces gens, je pense que c'est vers cela qu'il faut orienter nos recherches, tout autant que vers les programmes de santé, je pense que c'est pour cela que cela devrait relever de la Direction des aliments et drogues.

M. Moss: Oui, c'est l'un de mes points. Il y a deux groupes, un groupe qu'il faudrait empêcher de commencer à fumer, mais il faut aussi s'occuper du groupe de ceux qui continueront à fumer; il faut minimiser les risques

[Text]

risks. I think a lot of work will have to be done before we know what safe levels are.

Mr. Howe: I was rather interested in this break-off time of your project. You said you were not accepting anybody after a certain date in 1969. Why is this?

Dr. Moss: I think we have to stop and assess where we are. We are running a relatively specialized and sophisticated program. As a public health administrator, one of my interests in this project is to see if we can devise something which is practical for health departments perhaps anywhere in the country to operate on a continuing basis. This will give us, I think, an adequate sample to assess this project from all of the aspects we have ventured into. We have to stop at an appropriate time. Some of our results are extremely complicated. We are using the University of Toronto computer in the determination of some of the assessments of these individuals. Some of these tests are very, very complex.

Mr. Howe: You said that...

The Vice-Chairman: Thank you, Mr. Howe. I know that you have other questions. Dr. Foster.

• 2105

Dr. Foster: Dr. Moss, in one section of your brief you mentioned that there were some cellular changes in the bronchial tree. What type of changes were these?

Dr. Moss: These are perhaps hard to explain in lay terms. Dr. Thompson, Associate Professor of Pathology, University of Toronto, and Chief Pathologist of Toronto General Hospital, has the illustrations here which would be extremely helpful. These are changes from the normal, what we call columnar epithelial cells of the normal lining to the flat squamous, skin-like cells. We have found many gradations. Because this is perhaps very vital to health, and to find whether or not this process is reversible if smoking is discontinued we are following a number of our volunteers outside of the Smoking Withdrawal Study Centre itself. They are submitting to periodic examinations.

Dr. Foster: Is there any indication so far that these changes are reversible?

Dr. Moss: I think in our group it is too early to say. It has been reported that there is

[Interpretation]

et je pense qu'il faudra beaucoup travailler avant de savoir quels sont les niveaux de sécurité.

M. Howe: Je m'intéresse à ce point de votre projet, pourquoi n'acceptez-vous plus personne après une certaine date de 1969?

M. Moss: Je pense qu'il faut arrêter et faire le point maintenant et savoir où nous en sommes. Nous nous occupons d'un programme relativement complexe et spécialisé. Comme administrateur de l'hygiène publique je m'intéresse à ces questions afin de savoir si nous pouvons trouver des moyens pratiques pour le ministère de la Santé, pour tous les ministères de la Santé du pays qui pourront alors opérer de façon suivie. Cela nous donnera un bon échantillonnage de tous les aspects que nous avons découverts. Mais je pense qu'il faut nous interrompre à un certain moment. Quelques-uns de nos résultats sont des plus complexes et nous nous servons de l'ordinateur de l'université de Toronto pour connaître les résultats définitifs, certaines expériences étant fort complexes.

M. Howe: Vous avez dit...

Le vice-président: Merci, monsieur Howe, je sais que vous avez d'autres questions à poser. Monsieur Foster.

M. Foster: Docteur Moss, dans un article de votre mémoire, vous parlez de changements cellulaires soudains dans les bronches. De quel genre de changements s'agit-il?

M. Moss: Il est parfois difficile d'expliquer cela en termes simples et de vulgariser en somme. J'aimerais que le docteur Thompson, professeur associé de pathologie à l'Université de Toronto, et chef pathologique de l'Hôpital Général de Toronto, soit ici; il pourrait vous donner des renseignements des plus utiles. Ce sont des changements qui affectent les cellules dites épithéliales en bâtonnets, en cellules squameuses telles que celles qui forment la peau. Il y a plusieurs degrés parmi ces transformations. Cela étant essentiel à la santé, afin de savoir si ce processus est réversible, lorsqu'on cesse de fumer, nous avons suivi un certain nombre de volontaires qui ont cessé de fumer. Ils se soumettent à des examens périodiques.

M. Foster: Y a-t-il, à date, des indications qui démontrent que ces changements sont réversibles?

M. Moss: Dans notre groupe il est encore trop tôt pour répondre. On a relaté qu'il y a

[Texte]

some recovery mechanism, but whether it comes back to complete normalcy or not...

Dr. Foster: At what level in the bronchial tree were the samples taken? Were they taken in the trachea or down in the bronchials?

Dr. Moss: We take one that is called the natural sample. This is the morning cough the smokers might have. They are subjected to a mistometer machine at the Centre which produces a vapour which is inhaled deeply. It is irritating—not unpleasantly irritating, but it is irritating to the bronchial tree and apparently the sample is brought up from deep down at the bifurcation.

Dr. Foster: In any event it is all a case of sputum and this type of thing. You do not take small biopsies.

Dr. Moss: No, no.

Dr. Foster: I was interested in the film that you used. Is it available only at the Centre or do you have copies of it available to health groups?

Dr. Moss: No, we use a number of films at the Centre and we tap many community resources. I can perhaps get you the title of these films and let you know where they are available. Some of them are available from the Canadian Cancer Society. We use films from the Canadian Heart Foundation. A particular film I have in mind is available from a group in Oshawa. It has just slipped my mind.

Dr. Foster: It would be very interesting for the Committee to see this film.

Dr. Moss: These are widely available in the communities.

Dr. Foster: Someone asked a question about symptoms in the withdrawal and habituation problem, comparing it to alcohol, and you said that you did not feel that you wanted to comment on this. How does the figure of one third being able to kick the habit compare with the percentage in alcoholic clinics?

Dr. Moss: I am afraid I have no information on that.

Dr. Foster: I thought you might have looked into the statistics if not into the details of the problem.

[Interprétation]

un certain mécanisme de recouvrement, mais à savoir s'il s'agit d'un retour complet à l'état normal.

M. Foster: A quel niveau des bronches, à quel niveau avez-vous fait les prélèvements, au niveau de la trachée ou dans les bronches elles-mêmes?

M. Moss: Ce sont des échantillons naturels de la toux du matin, la toux des fumeurs qu'on appelle. Les patients sont soumis à un mistomètre qui produit une vapeur qui est respirée profondément et qui irrite, non pas d'une façon désagréable, mais qui irrite les voies des bronches et l'échantillon provient de la bifurcation des bronches.

M. Foster: Dans tous les cas il s'agit de prélèvements. Vous n'avez pas fait de petites biopsies.

M. Moss: Non.

M. Foster: Je m'intéresse au film que vous avez utilisé, est-il disponible seulement au Centre ou groupes peuvent-ils s'en procurer un exemplaire?

M. Moss: Non, nous utilisons un certain nombre de films au Centre et nous nous en servons dans plusieurs groupes. Je pourrais peut-être vous donner les titres des films et vous dire où vous pouvez vous les procurer, il y en a à la Société canadienne du cancer, à la Société du cœur. Je songeais à un film qui a été fait par un groupe d'Oshawa.

M. Foster: Cela nous intéresserait beaucoup de visionner ce film.

M. Moss: Ces films sont largement diffusés.

M. Foster: Oui. Quelqu'un a posé une question au sujet des symptômes, des problèmes des habitudes par exemple, comparés à l'alcool. Vous n'avez pas trop commenté cette question. Je me demande si le chiffre qui dit: «qu'un tiers peuvent se débarrasser de cette habitude», comment cela se compare-t-il vis-à-vis des chiffres concernant les cliniques d'alcooliques? Quel est le nombre d'alcooliques qui peuvent se débarrasser de cette habitude?

M. Moss: Je n'ai pas de renseignements à ce sujet.

M. Foster: Je pensais que vous auriez peut-être des statistiques sans toutefois nous donner les détails.

[Text]

• 2110

[Interpretation]

Dr. Moss: It is a question of whether the groups are strictly comparable in their personality, backgrounds, etc.

Dr. Foster: Was your group composed of all white-collar workers, or were there some labouring, blue-collar people? Could you detect any difference in them?

Dr. Moss: It was rather interesting. During the first year we had a large proportion of white-collar workers; these were the inside workers in civic administration, but we have had all groups attend the Centre.

The Vice-Chairman: Thank you, Dr. Foster. I have myself next on the list but, to show you what a sport I am, I am going to pass to Dr. Ritchie. Before I do, Dr. Moss, may I say that you seem to be rather nervous and you are fidgeting. Normally I would offer you a cigar! Instead I will just ask you to relax. We all appreciate your hesitance, but there is nothing to be nervous about with us.

Mr. Robinson: Perhaps it is smoking withdrawal!

The Vice-Chairman: Dr. Ritchie?

Mr. Ritchie: Mr. Chairman, I wish to question Dr. Moss first of all on statistics. There has been an increase in cancer of the lungs. Have you seen, or do you know of, any studies in which this has been actually correlated with age, population, and so on? How much of this lung cancer has been absolutely proven? It is fashionable to diagnose lung cancer, but it may not always be cancer of the lung. Cancer of the lung was relatively rare 25 years ago and now it is considered common. Do you think our statistics are valid?

Dr. Moss: Yes, I do. In training as a health officer we of course take courses in statistics on epidemiology. This does not, however, make me an expert in this area, and I have to accept published material, particularly the U.S. Surgeon General's report and the experts who are quoted therein—British experts such as Sir Austin Bradford Hill and Richard Doll who are internationally recognized.

Similarly, in the United States this material has been put up in the due scientific process and has been subjected to challenge from all directions. It has withstood that challenge. I think we have to accept this type of evidence

M. Moss: Cela se compare peut-être, mais je ne le sais pas.

M. Foster: Oui. S'agissait-il, par exemple, tous de collets blancs, de manœuvres, y a-t-il des différences entre les différentes classes sociales?

M. Moss: Au cours de la première année, il y a eu une plus grande proportion de collets blancs ou d'employés et d'administrateurs aussi, mais nous avons eu des représentants de tous les groupes de la société.

Le vice-président: Merci, docteur Foster. Maintenant, c'est à mon tour mais, comme je suis très aimable, je céderai mon tour de parole au docteur Ritchie. Mais auparavant, puis-je vous dire docteur Moss, que vous semblez un peu fatigué et nerveux; normalement, je vous offrirais un cigare, vu les circonstances je vous prie seulement de vous détendre. Il n'y a pas de raison d'être nerveux avec nous.

M. Robinson: Peut-être est-ce le manque de tabac!

Le vice-président: Docteur Ritchie?

M. Ritchie: Monsieur le président, je voudrais poser des questions au docteur Moss, d'abord, sur les statistiques. Il y a eu une augmentation du cancer du poulmon. Connaissez-vous des études où cela est relié à l'âge, à la population etc.? Combien des cas de cancer du poulmon ont été prouvés? Ce n'est peut-être pas toujours un cancer du poulmon, car le cancer du poulmon était relativement rare il y a 25 ans tandis que, maintenant, c'est commun. Pensez-vous que nos statistiques sont bonnes?

M. Moss: Oui, je le pense. Au cours de la période de formation d'officiers de santé nous suivons des cours de statistique et d'épidémiologie. Cela ne fait pas de moi un spécialiste de ces questions, je dois accepter les statistiques que l'on publie, notamment le rapport général des chirurgiens des États-Unis et les conclusions des spécialistes cités dans ce rapport. Les études des spécialistes britanniques, comme Sir Austin Bradford Hill et Richard Doll, qui ont une réputation internationale.

De même, aux États-Unis, ce matériel scientifique a été étudié et attaqué par tous les milieux et il a résisté aux attaques. Je pense que nous devons accepter ce genre de témoignage, car les experts internationaux

[Texte]

because international experts have developed it and it has been debated in the due scientific process.

Mr. Ritchie: Have you any information on the statistics relative to the incidence of cancer of the lung in new versus women?

Dr. Moss: Again I have to resort to published information. There is a great deal more cancer of the lung in men than there is in women. However, it has been increasing in both groups. I do not think it is clear yet that women are beginning to increase at a greater rate than men. These are areas in which future studies could give us answers.

Mr. Ritchie: Yes. From your experience would you say that a very great many people can go through life and smoke moderately seemingly without any apparent ill effects?

• 2115

Dr. Moss: This is a very deep, broad, general question. I think it is possible. As we say, the incidence of lung cancer in Canada means that approximately 4,000 persons will die annually. This is a 20 million population is roughly one in 5,000.

Other conditions, however, tend to be increasing. Perhaps chronic bronchitis is the one condition on which there is least disagreement that smoking is the major cause. The fact that emphysema is increasing is being linked, of course, to smoking, as well.

It is difficult to say. There must be an individual who has smoked for the greater part of his life and has died of some other natural cause. Who is to say, on the surface, whether or not smoking did have any adverse effect on his system? I do not think anyone is claiming that cigarette smoking will adversely affect the health of every person who smokes.

Mr. Ritchie: Is it your observation that certain people seem to have an addiction to smoking, presumably to one of the products of smoking?

Dr. Moss: We do not believe so. We feel that it is psychological.

Mr. Ritchie: You mentioned that some steps have to be taken to protect the consumer of cigarettes. In your opinion, what form should such regulations take?

Dr. Moss: I feel we should progress in two areas. One is in the matter of control over advertising. As I said in my opening remarks, I do not feel it is within my scope to comment on exactly how this should be done, but

[Interprétation]

l'ont mis au point et il a été soumis à toutes sortes d'enquêtes scientifiques.

M. Ritchie: Dans les statistiques que vous connaissez, y a-t-il plus d'hommes que de femmes victimes du cancer du poulmon?

M. Moss: Encore une fois, je dois m'en tenir aux renseignements publiés. Il y a beaucoup plus d'hommes victimes de cancers du poulmon que de femmes. Toutefois, l'incidence de cancer augmente pour les deux groupes. Je ne pense pas que l'on sache précisément maintenant si le taux augmente plus rapidement chez les femmes que chez les hommes. Les études futures nous le diront peut-être.

M. Ritchie: D'après votre expérience, pensez-vous que beaucoup de gens peuvent fumer modérément toute leur vie sans que cela ait d'effets néfastes?

M. Moss: C'est une question très générale. Je pense que c'est possible. Le cancer du poulmon, comme je l'ai dit, tuera 4,000 personnes cette année; pour une population de 20 millions c'est en gros 1 sur 5,000. Il y a d'autres maladies qui augmentent. La bronchite chronique est peut-être la maladie pour laquelle tout le monde admet que la cigarette en est la raison principale. L'augmentation des cas d'emphysème est également liée à l'habitude de fumer.

C'est difficile à dire. Un individu, par exemple, peut avoir fumé pendant une grande partie de sa vie, et mourir d'une autre maladie naturelle. Qui peut dire, de l'extérieur, si la cigarette a eu des effets néfastes sur lui. Personne ne prétend, je pense, que le fait de fumer la cigarette affectera la santé de tous ceux qui fument.

M. Ritchie: Pensez-vous qu'il y a des gens pour qui le fait de fumer, ou l'influence d'un des produits engendrés provoque la naissance d'un besoin physiologique.

M. Moss: Nous ne le pensons pas; nous pensons que c'est psychologique.

M. Ritchie: Vous avez aussi mentionné qu'il faut prendre des mesures pour protéger le consommateur de cigarettes. À votre avis, quel genre de mesures faudrait-il prendre?

M. Moss: Je pense qu'il faudrait progresser dans deux domaines. D'abord, contrôler la publicité; comme je l'ai déjà mentionné dans mes observations préliminaires, il ne m'appartient pas de définir ce qui doit être fait,

[Text]

I feel strongly that tobacco should be included as a product under the Food and Drugs Act.

Mr. Ritchie: Is the number of young people entering into smoking increasing or decreasing? Considering population and so on is there a higher percentage of say 18-year-old people smoking than used to, or is it the other way around?

Dr. Moss: This is an area which our centre has not investigated. Dr. Wake made some comment on this, and some studies have been done in other cities in this country, which to me—I am trying to find a word here...

The Vice-Chairman: It is his time you are taking up; it is all right!

Dr. Moss: ...are inconclusive, in my opinion; but I may be contested on that point. Whether we are making headway or not, I just do now know.

The Vice-Chairman: Dr. Yewchuk?

Mr. Yewchuk: Dr. Moss, I am interested in the psychological aspects of this. What particular psychological traits have you noticed to be most prominent amongst smokers, first, among those who tend to begin, and, second, amongst those who seem to be unable to quit?

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Dr. Moss: I am afraid, sir, that I cannot answer that question at this time. We have in this centre Mr. Ross who is the neuropsychologist at Sunnybrook Hospital in Toronto. He is directing this phase. For study purposes, particularly relating to this study of ours of smoking personality and predictability, this has been kept secret from the other investigators in the Centre. Only Mr. Ross knows, because if we do have success in this, it is important that it not be prejudged.

Mr. Yewchuk: That sounds like an answer from a Minister. Everything is secret.

What kind of psychological tests do you do? Do you carry out special psychological tests? Do they have interviews with a psychiatrist?

Dr. Moss: No, this is a group test. It has been specially put together by Mr. Ross to analyse and determine these personality traits and of course, incorporated in this is quite a bit that is related to their attitudes and also their tobacco habits.

Mr. Yewchuk: Is there anything from the psychological point of view in the original instructions you give these people, or is it

[Interpretation]

mais je pense fortement que le tabac devrait être inclus dans la liste de produits qui relèvent de la Loi des aliments et drogues.

M. Ritchie: Est-ce que l'habitude de fumer augmente ou diminue chez les jeunes? En tenant compte des variations de population est-ce que le pourcentage des jeunes de 18 ans qui fument, est plus élevé ou moins élevé qu'il ne l'était?

M. Moss: C'est une question que nous n'avons pas étudiée au Centre. Le docteur Wake a fait des commentaires sur la question. Des études aussi ont été faites dans d'autres villes du pays et, à mon avis, j'essaie de trouver le mot que je cherche...

Le vice-président: C'est son temps que vous prenez; mais ça va!

M. Moss: ...les études ne sont pas concluantes. Certains pourront dire le contraire. Que nous progressions ou non, je n'en sais rien.

Le vice-président: Docteur Yewchuk?

M. Yewchuk: Docteur Moss, je m'intéresse aux aspects psychologiques de la question. Quels sont les traits psychologiques dominants des fumeurs, d'abord de ceux qui commencent et ensuite de ceux qui ne peuvent cesser de fumer?

M. Moss: Je crains de ne pouvoir répondre à cette question pour le moment. A notre Centre, nous avons M. Ross, qui est neuropsychologue, à l'Hôpital Sunnybrook de Toronto. Il s'occupe particulièrement de cet aspect. Pour les besoins de l'étude, cet aspect est caché aux autres enquêteurs du Centre. Seul le docteur Ross est au courant, parce que si nous réussissons nous ne voulons pas préjuger des résultats...

M. Yewchuk: Ceci ressemble à la réponse d'un ministre. Tout est secret. Quel genre de tests psychologiques leur faites-vous subir? S'agit-il de tests spéciaux? Est-ce que les fumeurs ont des entrevues avec un psychiatre?

M. Moss: Non, il s'agit d'un test collectif qui a été préparé spécialement par M. Ross pour analyser et déterminer les traits de la personnalité. Il y a évidemment beaucoup d'éléments touchant l'attitude des fumeurs et leurs habitudes.

M. Yewchuk: Le point de vue psychologique entre-t-il en ligne de compte dans les premières directives que vous donnez à ces

[Texte]

strictly about the physical changes that occur or physical diseases that occur? You mentioned in this brief that for the first month they attend night lectures or something like that.

Mr. Moss: Yes, you are getting into another area of the Centre now. We do a complete physical, functional questionnaire of the health and bodily functions. This is separate from the social-psychological investigation.

Mr. Yewchuk: I was under the impression that you had some education that was directed at them in the initial stages. I thought I saw that here somewhere.

Dr. Moss: Yes, this is a major component of the course. Every night they have either illustrated lectures or movies. We also have printed material.

Mr. Yewchuk: What are these lectures orientated towards? Is it mainly to the physical damage that may occur, or is it to try to illustrate psychological factors involved in smoking? What is the orientation of these lectures and movies?

Dr. Moss: The lectures are orientated towards the effect of smoking on health insofar as the physical and functional effect is concerned. But I do want to emphasize at this time that in the psychology component within the Centre, the persons performing the work are students who are working for their Ph.D. in behavioural psychology at the University of Toronto. They take our volunteer subjects into small intimate psychological group dynamic discussion sessions.

Mr. Yewchuk: And is this part of the follow-up as well, this kind of group dynamic discussion?

Dr. Moss: No, this is part of the concentrated month's course.

Mr. Yewchuk: What do you do during the follow-up?

Dr. Moss: The follow-up period is largely health education, more factual information on the matter of smoking and health. Each unit has a physician in charge and the members of the group are able, in the follow-up period, to discuss their particular problems with him.

Mr. Yewchuk: Have you found any differences in the difficulty in quitting among age groups or sexes?

Dr. Moss: I am afraid we have not. That data is not complete and has not been

[Interprétation]

personnes ou est-ce que ces directives portent uniquement sur les maladies physiques qui peuvent être causées par l'habitude de fumer? Vous mentionnez, dans votre exposé, qu'au cours du premier mois, ils assistent à des cours du soir.

M. Moss: Oui, vous entrez maintenant dans un autre service. Nous avons des questionnaires complets sur la santé et les fonctions du corps humain. Cela est tout à fait distinct de l'enquête sociopsychologique.

M. Yewchuk: Je croyais que vous les soumettiez à certains cours au début. J'avais cru trouver quelque chose en ce sens dans ce document.

M. Moss: Oui, tous les soirs, nous leur présentons des conférences illustrées ou des films. Il y a également de la documentation écrite.

M. Yewchuk: Vers quoi sont orientées ces causeries? Vers le danger qui peut en découler pour la santé ou pour illustrer les facteurs psychologiques qui entrent en jeu?

M. Moss: Ces causeries traitent de l'effet de la cigarette sur la santé et le fonctionnement organique. Permettez-moi de préciser qu'au point de vue psychologique, le travail, au Centre, est effectué par des étudiants qui tentent d'obtenir leur doctorat en psychologie de l'Université de Toronto. Ils divisent les candidats en petits groupes et utilisent la dynamique de discussion de groupes.

M. Yewchuk: Ceci fait également partie de vos sessions complémentaires?

M. Moss: Non, il s'agit du cours concentré d'un mois.

M. Yewchuk: Que faites-vous au cours des sessions complémentaires?

M. Moss: Au cours de cette période, nous mettons l'accent sur l'éducation de la santé, sur la santé et le tabac. Chaque groupe est dirigé par un médecin et les membres de ce groupe peuvent discuter de leurs problèmes particuliers avec le médecin.

M. Yewchuk: Avez-vous constaté des différences dans la difficulté d'abandonner la cigarette entre les groupes ou les sexes?

M. Moss: Je crains que ces données ne soient pas complètes et n'aient pas été analy-

[Text]

analysed. There are some impressions, but I really do not want to comment on them.

Mr. Yewchuk: Are you considering other factors with regard to the problems that originate with smoking, other factors relating to the person that may be contributing to pulmonary disease? Or are you looking at it strictly from the smoking point of view?

Dr. Moss: This is taken into account in the complete physical analysis they get. Chest x-ray is included in this. It is a highly specialized examination of their respiratory system which would take into account other causes.

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Mr. Yewchuk: There was mention made that drugs are of no value in helping to quit. What drugs were used?

Dr. Moss: In this connection I was referring particularly to the European experiment in which a drug called lobeline, which pharmacologically is really a nicotine substitute, was used. I think that was quite clearly proven to be of no value in this group setting. I am not denying that on a one-to-one basis—I am thinking here of a doctor in practice dealing with a patient—some drugs in this category might be used to help a person along. But this could not be used in the type of centre we are operating, which is dealing more with a group.

Mr. Yewchuk: What information do you have on the drug which is supposed to cause nausea if you smoke? Bantron is the trade name of one I can think of. Have you any experience to report with that particular type of drug?

Dr. Moss: This, I think, is along the line that I was mentioning in the European experience.

Mr. Yewchuk: Oh, I see. There is a mention here of electrocardiogram changes occurring. What sort of changes are these, and in follow-ups have they been found to be reversible for those who have quit?

Dr. Moss: Again, I can speak only in generalities. This aspect of the studies is in charge of Dr. Roy Shepherd who is professor of applied physiology at the University of Toronto. The changes are primarily in the S-T segment. I presume you are a physician.

Mr. Yewchuk: Yes.

[Interpretation]

sées. Nous avons, évidemment, des impressions, mais elle ne sont pas définitives et je préférerais n'en pas parler.

M. Yewchuk: Songez-vous à d'autres facteurs, au sujet de ces problèmes causés par la cigarette, à d'autres facteurs qui pourraient contribuer, par exemple, aux maladies pulmonaires? Ou, est-ce que vous n'étudiez que la question de l'usage du tabac?

M. Moss: Non, nous tenons compte aussi des autres causes au cours de l'analyse physique complète que nous leur faisons subir, et qui inclut la radiographie pulmonaire. Il s'agit d'un examen très poussé du système respiratoire qui tient compte de tous les autres facteurs.

M. Yewchuk: Vous dites que les drogues ne peuvent être utiles à qui veut cesser de fumer. Quelles drogues ont été utilisées?

M. Moss: Je songe à l'expérience européenne au cours de laquelle on a utilisé la lobeline qui, pharmaceutiquement, est un substitut à la nicotine. On a prouvé que cela n'avait aucune valeur dans un groupe. Je ne nie pas que, dans le cas d'un médecin qui traite un patient, certaines drogues de ce genre puissent être utiles. Elles ne peuvent toutefois être utilisées dans un Centre comme le nôtre où nous nous occupons plutôt de groupes.

M. Yewchuk: Que savez-vous de ces drogues qui provoquent la nausée quand on fume? Avez-vous quelque expérience que vous pourriez nous faire connaître quand à l'emploi de cette drogue?

M. Moss: Je crois que ceci s'apparente à cette expérience européenne dont je viens de parler.

M. Yewchuk: Je vois. Vous mentionnez les changements que vous constatez dans les électrocardiogrammes. Quels sont ces changements? Y a-t-il eu tendance inverse chez ceux qui ont cessé de fumer?

M. Moss: Je ne peux, évidemment, que formuler des généralités. Cet aspect de l'étude tombe sous la compétence du docteur Roy Shepherd, un professeur de psychologie appliquée à l'Université de Toronto. Les changements manifestés se manifestent surtout dans le segment ST. Vous êtes médecin?

M. Yewchuk: Oui.

[Texte]

Dr. Moss: And I might say that our subjects are pushed physically. We introduce an element of physical stress in obtaining these cardiograms. We are looking for anoxia, a lack of oxygen in the heart muscle. Dr. Shepherd does classify these individuals as coronary prone or not, and the figures I mentioned in this submission are related to that basis.

In the one-year follow-up period, as far as spectacular episodes affecting health are concerned, among a number of volunteers who had been through the Centre, several have had coronaries. One person dies from a coronary, and the coronary-prone pattern was evident.

Mr. Yewchuk: So far you cannot state that improvement occurred after they quit smoking.

Mr. Moss: No. This has not been analysed completely yet.

Mr. Yewchuk: Thank you.

The vice-chairman: If the Committee will permit, I would like to ask one question before we get to the second round.

Mrs. MacInnis (Vancouver-Kingsway): I have a few more questions that deal with the first round.

The Vice-Chairman: Dr. Moss, you spoke of different methods used to try to get people to withdraw. Have you ever considered what Dr. Wake has been talking about, that is, leadership in withdrawal, either directly or indirectly? I am speaking of personal experience. Not that I have stopped smoking, but in many of the corporation structures with which I have had dealings, where the president has stopped smoking—as you know there is nothing more obnoxious than a reformed smoker—invariably at meetings no one smokes. And in this situation the ambitious young man's success or destiny seems to be fairly well dependent upon how successful he is in quitting smoking.

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In other words, I take it from my own observations that when leadership is given in a group, it is followed. Has that been considered in your study at all?

Dr. Moss: Not in that direct sense. Obviously within our small groups, and I think our psychologist takes advantage of this, we hope that the person who can quickly give up smoking during the month course—some can give up smoking within the first two or three

[Interprétation]

M. Moss: Nos sujets sont soumis à une certaine pression lorsque nous prenons ces électrocardiogrammes. Nous tentons de savoir s'il y a un manque d'oxygène dans le muscle cardiaque. Le docteur Shepherd classe les individus selon qu'ils sont ou non prédisposés aux crises cardiaques et les chiffres mentionnés dans ce document se basent sur cette distinction.

Au cours de l'année qui a suivi leur venue au Centre, en ce qui concerne les événements spectaculaires qui sont venus affecter la santé de nos sujets, plusieurs ont subi des thromboses coronaires. L'un d'entre eux est mort, chez qui on avait décelé cette prédisposition aux crises cardiaques.

M. Yewchuk: Vous ne pouvez pas dire, pour l'instant, qu'il y a eu de l'amélioration après qu'ils eurent cessé de fumer?

M. Moss: Non, ces résultats n'ont pas encore été analysés de façon complète.

M. Yewchuk: Merci.

Le vice-président: J'aimerais poser une question avant que nous en venions à la deuxième manche de questions, si vous le voulez bien.

Mme MacInnis (Vancouver-Kingsway): J'ai quelques questions que j'aimerais poser sur cette première partie.

Le vice-président: Vous avez parlé, Docteur Moss des diverses méthodes utilisées pour essayer de faire cesser les gens de fumer. Avez-vous songé à celle qu'a mentionnée le docteur Wake? Je parle de cette influence directe ou indirecte. Voici une expérience personnelle. Je n'ai pas arrêté de fumer, mais dans bon nombre de sociétés ou de compagnies avec lesquelles j'ai eu à traiter et dont le président avait cessé de fumer, (vous savez qu'il n'y a rien de pire qu'un fumeur qui s'est corrigé) personne ne fumait au cours des réunions. Et, le succès de la carrière d'un jeune homme ambitieux semble être tributaire du fait qu'il fume ou non, ou du succès qu'il a eu lorsqu'il a voulu arrêter de fumer.

J'ai personnellement l'impression que lorsque l'exemple est donné à un groupe, que cet exemple est suivi. Est-ce que votre étude a porté sur cet aspect?

M. Moss: Non, pas directement. Il est évident qu'à l'intérieur de nos petits groupes, et je crois que nos psychologues en profitent, nous espérons que l'individu qui peut rapidement cesser de fumer durant ce cours d'un mois (certains peuvent arrêter en quelques

[Text]

days, others drag on—can be used as an example to the others. This is all interwoven, but it is difficult in our setting to do it as you have illustrated.

The Vice-Chairman: What I had in mind by concentrating on people who have a certain command, as the first instance of trying to get them to quit smoking, you might have a better success.

How many members still want to ask questions? Mr. Thomas, Mr. Robinson, Mrs. MacInnis. We have 15 minutes left; let us make it 5 minutes each.

M. Thomas (Maisonneuve): Dans la langue de Molière, monsieur le président.

Docteur Moss, est-ce que le docteur Wake fait partie du même comité consultatif que vous?

Dr. Moss: I am not sure to which advisory committee you are referring. The one in my report is a special committee established by the Board of Health of the City of Toronto, and he is not a member of that.

M. Thomas (Maisonneuve): La raison pour laquelle je vous demande cela, docteur Moss, c'est que je n'ai pas eu le temps, cet après-midi, de demander au docteur Wake, qui est un psychologue, s'il est un psychologue clinique, industriel, ou bien un conseiller en orientation. Quel genre de psychologue est-il?

Dr. Moss: I do not know the specific answer to that question. Dr. Wake is a professor of psychology. Obviously he is doing research; whether he has interest in the clinical field, I do not know.

M. Thomas (Maisonneuve): D'accord. Plusieurs de mes questions ont été répondues par vous, ce soir.

Vous avez parlé du monoxyde de carbone qui est transporté dans le sang. Nous sommes donc dans le domaine des globules rouges.

Dans vos études, avez-vous découvert s'il y a une naissance ou multiplication des globules blancs, et s'il y a un épaississement du sang?

Dr. Moss: No, we have not ventured into that area of research. Our research has been purely in the carbon monoxide combining with the haemoglobin and its depriving effect on the oxygen-carrying power of the blood. This is being equated and translated into the function of the human body.

M. Thomas (Maisonneuve): J'ai encore une petite question.

[Interpretation]

jours) puisse servir d'exemple aux autres. Il est difficile, chez nous, d'agir de la façon dont vous avez parlé.

Le vice-président: Ce que je voulais dire c'est que en vous concentrant sur ceux qui ont une certaine volonté, vous aurez plus de succès, dans votre tentative pour les empêcher de fumer. Combien veulent encore poser des questions? Monsieur Thomas, monsieur Robinson, M^{me} MacInnis. Il nous reste quinze minutes, mettons cinq minutes chacun.

Mr. Thomas (Maisonneuve): In French, Mr. Chairman.

Dr. Moss, is Dr. Wake a member of the same advisory committee of which you are a member yourself?

M. Moss: J'ignore de quel comité consultatif vous parlez en ce moment. Celui que je mentionne dans le rapport, est un comité spécial établi par le Service de la santé publique de la ville de Toronto. Il n'en fait sûrement pas partie.

Mr. Thomas (Maisonneuve): The reason why I am asking you this, Dr. Moss, is because I did not have time this afternoon to ask Dr. Wake, who is a psychologist, whether he is a clinical or industrial psychologist, or a guidance counsellor. Do you know what his field is in psychology?

M. Moss: Je crains que je ne connaisse pas la réponse précise à cette question. Le docteur Wake est professeur de psychologie. Il fait évidemment des recherches, mais j'ignore s'il s'intéresse à l'aspect clinique.

Mr. Thomas (Maisonneuve): All right. Many of my questions have been answered by you, this evening.

You have mentioned carbon monoxide, which is carried in the blood. We are therefore dealing with red cells. In your studies, have you discovered whether white cells are created or multiplied, and whether there is thickening of the blood?

M. Moss: Non, nous ne nous sommes pas aventurés dans ce domaine de recherche. Nos recherches se sont limitées à la combinaison de l'hémoglobine et de l'oxyde de carbone et à ses effets sur la capacité de transport d'oxygène du sang. Cela est traduit sous forme fonctionnelle.

Mr. Thomas (Maisonneuve): One last little question. Were there any studies made by

[Texte]

Est-ce que votre comité a fait des études sur l'efficacité des pilules dont on parle et qui peuvent aider à discontinuer ou à perdre l'habitude de fumer?

Dr. Moss: No, we have not used any medication at all in our centre.

M. Thomas (Maisonneuve): Je vous remercie, docteur Moss.

Mrs. MacInnis (Vancouver-Kingsway): The thing that I have been noticing in the questioning is the way in which the parallel has been brought up between difficulties in connection with alcohol and cigarette smoking. I am wondering whether or not your clinic has considered or had anything to do with the methods which have worked pretty well in Alcoholics Anonymous—I am pretty well familiar with the principles—where the whole group works together to reinforce each other in overcoming the habit. Has that been tried out, or is that within the purview of experience?

Dr. Moss: Yes, in one sense we are doing that in our small discussion groups under the leadership of the post-graduate Ph.D. psychology students. It is not being done in the identical fashion, but there is an opportunity for them to exchange experiences—I am thinking here of the volunteers—and of course the purpose of the trained discussion leader is to relate one to the other.

Mrs. MacInnis (Vancouver-Kingsway): However, there is no attempt, as in AA, to have them live certain facets of their life in close contact with each other, where they live sort of in an area or a district, more or less, and reinforce each other, through such things as social events where they come together for support. You do not do that, do you?

Dr. Moss: No, this has not been possible: geographic boundaries have precluded that.

Mrs. MacInnis (Vancouver-Kingsway): I was just interested in this method because I have known one or two AA groups rather well and I know that this has worked in a large number of cases. I did not know whether or not you had tried it to any extent.

Dr. Moss: A few volunteers have come together; they are friends and they have asked to come at the same time and they do work together, but it has not been possible to apply it to the whole group.

Mrs. MacInnis (Vancouver-Kingsway): The other question is this. I want to come back to the paragraph on page six where you say,

[Interprétation]

your Committee on the efficiency of those pills which have been mentioned and which can help to abandon the habit of smoking?

M. Moss: Non, nous n'avons utilisé aucun médicament à notre Centre.

Mr. Thomas (Maisonneuve): Thank you Dr. Moss.

Mme MacInnis (Vancouver-Kingsway): J'ai remarqué au cours de la discussion, le parallèle que vous avez établi entre l'alcoolisme et l'habitude de fumer. Je me demande si votre clinique a étudié les méthodes qui ont donné d'assez bons résultats chez les Alcooliques Anonymes, j'en connais assez bien les principes, où l'on travaille en groupe et on utilise l'influence réciproque pour surmonter l'habitude. Est-ce que cette méthode a été essayée?

M. Moss: En un sens, oui. Nous le faisons dans nos petits groupes dirigés chez les étudiants en psychologie. On ne le fait pas de façon identique, mais on peut échanger des expériences, je parle de volontaires, et bien entendu, le but du chef de groupe est de faire les comparaisons entre les expériences individuelles.

Mme MacInnis (Vancouver-Kingsway): Cependant, vous n'avez pas essayé de leur faire vivre certains aspects de leur vie en contact étroit avec d'autres, comme chez les AA, où ils vivent en quelque sorte dans un quartier ou dans un secteur donné, et où ils renforcent leur volonté par le contact social et l'aide d'autrui. Ce n'est pas la façon dont vous procédez.

M. Moss: Non, cela n'a pas été possible pour des raisons d'ordre géographique surtout.

Mme MacInnis (Vancouver-Kingsway): Je m'intéressais à cette méthode car je connais assez bien un ou deux groupes de l'association des alcooliques anonymes et que je voulais savoir si vous aviez essayé leurs méthodes qui semblent efficaces.

M. Moss: Quelques volontaires se sont groupés, ce sont des amis qui travaillent ensemble, mais il n'a pas été possible d'appliquer cela à tout un groupe.

Mme MacInnis (Vancouver-Kingsway): L'autre question, la voici, j'aimerais revenir au paragraphe de la page 6 de votre exposé où vous dites,

[Text]

The promotion and support of health education programs are commendable, but these should now be reinforced through regulatory control.

Have you had in mind measures other than the control of advertising, which you have mentioned, and bringing the thing under Food and Drug. Have you other measures of regulatory control in mind, or is that it?

Dr. Moss: These are the two that are paramount in my mind. I have not really considered others. I was reading over the material before the committee, the Tobacco Restraint Act. I cannot see those measures being of any value at all.

Mrs. MacInnis (Vancouver-Kingsway): You think that these are the two major ones?

Dr. Moss: Yes.

Mr. Benjamin: May I ask a supplementary, please?

The Vice-Chairman: Yes, Mr. Benjamin.

Mr. Benjamin: Do you see any value in the measures being taken in the U.S. of putting a health warning on the packages?

Dr. Moss: Yes, I support that.

The Vice-Chairman: Mr. Robinson?

Mr. Robinson: Thank you, Mr. Chairman. Page 3 of your statement, near the bottom reads

As it was obvious that the habitual use of tobacco is very closely related to psychological and social drives,...

What are these psychological and social drives that you are referring to here?

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Dr. Moss: These are, I think, some of the things which the advertising takes advantage of. In relation to social success—I think people feel that to be a success one has to indulge—the sort of aggressive drive, the get-ahead type of drive. These are some of the ones which are in my mind. I have to say I am not a psychologist.

Mr. Robinson: I will move over to page five. In the middle of this page you indicate that

The Centre was set up in the expectation that certain physiological and pathologi-

[Interpretation]

La promotion et le soutien des programmes d'éducation sont nécessaires, mais cela devrait être entrepris par un contrôle légal.

je me demande si vous songez à autre chose qu'au contrôle de la publicité, que vous avez mentionné, et à la Loi sur les aliments et les drogues. Avez-vous d'autres mesures de contrôle, de réglementation à proposer?

M. Moss: Ce sont, à mon sens, les deux principales mesures qui s'imposent. Je n'en ai pas considéré d'autres. Je lisais la documentation qui a été présentée au comité, la Loi sur la limitation du tabac, il ne me semble que ces mesures soient de quelque utilité que ce soit.

Mme MacInnis (Vancouver-Kingsway): Vous pensez que ce sont les deux principales.

M. Moss: Oui.

M. Benjamin: Puis-je poser une question supplémentaire, s'il vous plaît?

Le vice-président: Oui monsieur Benjamin.

M. Benjamin: Est-ce que les mesures adoptées aux États-Unis, au sujet de l'étiquetage des paquets de cigarettes, sur ces paquets, vous semble de quelque utilité?

M. Moss: Oui, j'y souscris.

Le vice-président: Monsieur Robinson?

M. Robinson: A la page 3 de votre exposé, presque au bas de la page, vous dites:

Il est manifeste que l'habitude du tabac est très étroitement liée à des facteurs sociaux et psychologiques,...

De quels facteurs sociaux et psychologiques s'agit-il en l'occurrence?

M. Moss: Ce sont là, je crois, les facteurs dont profite la réclame notamment dans le domaine des succès sociaux. Certains, finissent par croire que pour bien réussir il faut se conduire de façon agressive. Ce sont, je crois, là, certains des facteurs auxquels je songeais. Il faut dire que je ne suis pas psychologue.

M. Robinson: A la page 5, vers le milieu de la page, vous indiquez que

Le Centre a été institué parce qu'on pensait qu'on allait pouvoir dépister des

[Texte]

cal processes which have come to be identified with smoking would be encountered.

You go on to indicate that this was the case. Then at the bottom of that paragraph you say,

One would hope that when the subject stops smoking a favourable reversal of these findings will become evident.

So far this program has been in effect for a couple of years. Have you seen any reversal of this? Do you have any evidence at all at this time?

Dr. Moss: Again, I am unable to answer this with any specificity because of the stage we are at. We have done one year's group on a follow-up. I will just have to quote some few illustrative examples.

Some of the individuals who has changes in their cellular bronchial tree during the first year are still being followed; this is two years. Some other observers have found that it takes virtually a year for some of the cardiogram changes to come back to normality but we are not in a position to report the details

Mr. Robinson: Can I assume that at the end of the three-year period there will be a complete evaluation of these findings?

Dr. Moss: Yes, definitely.

Mr. Robinson: You indicate on page 6 that there can be some strong motivation. I am wondering what motivation you are aware of now that would motivate people to stop smoking.

Dr. Moss: I am thinking here of certain individuals who have come forward at the Centre. Obviously, I think, all of our candidates are motivated to give up smoking; this was really one of the prerequisites for enrolment in the Centre. Some have tried desperately to give up smoking on their own or through suggestions of their friends and are coming to us, shall I say, desperately anxious to give up smoking. The motivation of some is increased after they attend the Centre by certain of these abnormal findings which are presented to them. They see a reason for giving up smoking and, as I point out, they still are unable to do so.

Mr. Robinson: I notice you say on the same page:

There will be those who want to give up smoking and who are unable to succeed

[Interprétation]

comportements physiologiques et pathologiques anormaux.

et vous dites que ce fut le cas, ensuite à la fin du paragraphe, vous dites

On pourrait penser que lorsque les gens cessent de fumer, le renversement de ces facteurs devrait se manifester.

Votre programme se poursuit depuis environ deux ans, avez-vous jusqu'ici des preuves montrant qu'il y a eu renversement des tendances?

M. Moss: Je ne puis pas donner de réponse précise à cette question, car nous n'avons pas atteint ce stade. Je ne puis pas donner de réponse précise en raison de l'état d'avancement de nos travaux. Nous n'avons fait qu'un groupe, avec une année de relance. Il va falloir que je cite quelques exemples.

Certaines personnes qui ont subi des changements dans les cellules du système bronchial durant la première année, sont encore suivies. Certains observateurs se sont rendus compte qu'il faut au moins un an pour que les changements dans les cardiogrammes reviennent à la normale, mais nous ne sommes pas en mesure de donner les détails.

M. Robinson: Puis-je supposer qu'après trois ans, il y aura une évaluation de tous vos résultats?

M. Moss: Oui.

M. Robinson: Vous indiquez à la page six, qu'il peut y avoir des motivations très sérieuses. Quelles sont les motivations que vous connaissez maintenant pour faire cesser les gens de fumer?

M. Moss: Je songe, ici, à certaines personnes qui sont venues au Centre. Je pense, évidemment, que tous les candidats sont motivés et veulent cesser de fumer; c'est une des conditions préalables à l'enrôlement à notre Centre. Certains ont essayé désespérément de cesser de fumer par eux-mêmes ou en suivant les suggestions de leurs amis, et désirent presque désespérément cesser de fumer. La motivation de certains augmente lorsqu'on leur fait connaître au Centre les résultats anormaux. Et ils se rendent compte qu'il faut cesser de fumer, mais d'autres ne peuvent cesser.

M. Robinson: Vous dites aussi à la même page:

«Il y aura ceux qui veulent cesser de fumer mais n'y réussissent pas, ou en

[Text]

or, to put it another way, are unable to help themselves.

From this I assume there are some people who are so completely addicted to smoking that they have no strengths within themselves by which they can overcome this habit. It would seem to me, then, using social work terms, that they must be helped in some way to the point where they have enough strength or stamina of their own to overcome this habit. Would that be so?

Dr. Moss: Yes. We prefer the term «a grave dependence» rather than «addiction». As I say, we have done almost everything within our power but have not been able to bring them to the point where they have succeeded.

Mr. Robinson: When you speak of “regulatory control” as mentioned in the next paragraph, are you thinking in terms of regulating the tar and nicotine content of the cigarette?

Dr. Moss: I think serious consideration has to be given to this. I think we are in an area which is still somewhat cloudy scientifically but I think rationally it makes sense that if you can reduce the amount or the strength of the contaminant you are lessening the risk. I do not think you are eliminating the risk but I think you can lessen it.

● 2145

Mr. Robinson: I have one final question, Mr. Chairman. Would you propose some form of chemotherapy in assisting people to withdraw?

Dr. Moss: I do not think there is anything that can be used on a group basis. I mentioned, I think, to one of the other individuals that there are possibly some people on a one-to-one basis—a doctor-patient basis—who might be helped with some of their supplementary problems. I am thinking here in terms of tranquilizers and mental health.

Mr. Robinson: Thank you.

The Vice-Chairman: Dr. Moss, I cannot understand why people find it so difficult to give up smoking; I have done it many times. However, on behalf of the Committee I want to thank you very much for coming here and answering our questions. You have been most helpful. I hope in due time, if the Committee is still functioning, that you will be able to come back and give us some further results of your studies. Thank you again.

The meeting is adjourned.

[Interpretation]

d'autres termes n'arrivent pas à s'imposer cette discipline.»

Alors, je suppose qu'il y a des gens chez qui l'habitude de fumer est si forte, qu'ils n'ont pas le ressort moral pour surmonter cette mauvaise habitude. Et, je pense, pour me servir de termes de sociologues, qu'ils doivent être aidés, d'une certaine façon, jusqu'à ce qu'ils puissent trouver les ressources nécessaires en eux-mêmes pour surmonter cette mauvaise habitude. Est-ce vrai?

M. Moss: Oui. Nous préférons le terme de «grande dépendance» au lieu «d'addiction». Comme je l'ai dit, nous avons tout fait, mais nous n'avons pas été capables de les amener à ce point.

M. Robinson: Lorsque vous parlez de contrôle et réglementations, au paragraphe suivant, songez-vous à réglementer le contenu en nicotine et en goudron des cigarettes?

M. Moss: Il faut songer sérieusement à cette question. A notre époque, au point de vue scientifique, c'est encore un peu nébuleux ou nuageux, mais, rationnellement, il est censé d'essayer de réduire le nombre des cigarettes, ou plutôt de réduire les quantités de substances nocives qui existent dans les cigarettes. On n'élimine pas le risque, tout à fait, mais on le diminue.

M. Robinson: Une dernière question, s'il vous plaît, monsieur le président. Proposez-vous certains genres de chimiothérapie, pour aider les gens à cesser de fumer?

M. Moss: Je ne pense pas qu'on ait fait des essais sur des groupes. Il y a certaines personnes, certains individus, qui peuvent être aidés par les médecins, lorsqu'ils ont, par exemple, des problèmes supplémentaires. On leur donne des tranquillisants ou autres.

M. Robinson: Merci.

Le vice-président: Je ne sais pas pourquoi les gens trouvent ça si difficile de cesser de fumer; je l'ai fait souvent. Toutefois, au nom des membres du Comité, je tiens à vous remercier d'être venu ici, d'avoir répondu à nos questions. Vous nous avez été des plus utiles. J'espère qu'en temps et lieu vous pourrez revenir et nous faire part des résultats de vos études. Merci, encore une fois.

La séance est levée.

OFFICIAL BILINGUAL ISSUE

HOUSE OF COMMONS

First Session

Twenty-eighth Parliament, 1968-69

FASCICULE BILINGUE OFFICIEL

CHAMBRE DES COMMUNES

Première session de la

vingt-huitième législature, 1968-1969

STANDING COMMITTEE

ON

HEALTH, WELFARE AND
SOCIAL AFFAIRS

Chairman

M. Gaston Isabelle

COMITÉ PERMANENT

DE LA

SANTÉ, DU BIEN-ÊTRE SOCIAL
ET DES AFFAIRES SOCIALES

Président

MINUTES OF PROCEEDINGS

AND EVIDENCE

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No. 19

PROCÈS-VERBAUX ET

TÉMOIGNAGES

TUESDAY, FEBRUARY 25, 1969

LE MARDI 25 FÉVRIER 1969

Respecting the subject-matter of

Bill C-39, An Act to amend the Broadcasting Act (cigarette advertising).

Bill C-45, An Act to restrain the use of Tobacco.

Bill C-53, An Act to amend the Food and Drugs Act.

Bill C-134, An Act to amend the Tobacco Restraint Act.

Bill C-137, An Act to amend the Broadcasting Act (Prohibition of cigarette advertising).

Bill C-147, An Act to control the tar content and nicotine level of cigarettes.

Concernant la question de fond des

Bill C-39, Loi modifiant la Loi sur la radio-diffusion (Annonces de cigarettes).

Bill C-45, Loi visant à restreindre l'usage du tabac.

Bill C-53, Loi modifiant la Loi des aliments et drogues.

Bill C-134, Loi modifiant la Loi sur la répression de l'usage du tabac chez les adolescents.

Bill C-137, Loi modifiant la Loi sur la radio-diffusion (Interdiction de réclames de cigarettes).

Bill C-147, Loi ayant pour objet de contrôler la teneur en goudron et en nicotine des cigarettes.

WITNESSES—TÉMOINS

(See Minutes of Proceedings)

(Voir Procès-verbaux)

THE QUEEN'S PRINTER, OTTAWA, 1969
L'IMPRIMEUR DE LA REINE, OTTAWA, 1969

STANDING COMMITTEE ON
HEALTH, WELFARE AND
SOCIAL AFFAIRS

COMITÉ PERMANENT DE
LA SANTÉ, DU BIEN-ÊTRE SOCIAL
ET DES AFFAIRES SOCIALES

Chairman
Vice-Chairman

M. Gaston Isabelle

Mr. Steve Otto

and Messrs.
et Messieurs

Président
Vice-président

Forget,
Fortin,
Foster,
Godin,
Guilbault,
Haidasz,

Howe,
Mrs. MacInnis (M^{me}),
McBride,
¹ Mather,
Monteith,
Osler,

Ritchie,
Robinson,
Rochon,
Rynard,
Thomas (*Maisonneuve*),
Yewchuk—(20).

(Quorum 11)

La secrétaire du Comité:
Gabrielle Savard
Clerk of the Committee.

Pursuant to S.O. 65(4)(b)

Conformément à l'article 65(4)b) du
Règlement

¹ Replaced Mr. Benjamin on February
24

¹ Remplace M. Benjamin le 24 février

(Text)

MINUTES OF PROCEEDINGS

TUESDAY, February 25, 1969.

(23)

The Standing Committee on Health, Welfare and Social Affairs met this day at 11.20 o'clock a.m. The Chairman, Mr. Gaston Isabelle, presided.

Members present: Mrs. MacInnis, and Messrs. Forget, Foster, Guilbault, Haidasz, Howe, Isabelle, Mather, McBride, Monteith, Osler, Otto, Rochon, Rynard, Yewchuk—(15).

Witnesses: Dr. D. W. Thompson, M.D., Department of Pathology of the Toronto General Hospital; Mr. R. A. Switzer, Dominion Fire Commissioner, Department of Public Works.

The Committee resumed consideration of the subject-matter of Bills C-39, C-45, C-53, C-134, C-137, and C-147.

The Chairman introduced the witnesses.

Dr. Thompson illustrated his presentation by slides and was questioned thereon.

On behalf of the Committee the Chairman thanked the witness.

Mr. Switzer made a statement and was questioned.

Agreed,—That the Report entitled "Fires Caused by Smoking" and Tables annexed, be printed as an appendix to this day's proceedings. (See Appendix G)

The Chairman thanked Mr. Switzer on behalf of the Committee.

At 1.15 o'clock p.m. the Committee adjourned to 11.00 o'clock a.m. Thursday, February 27, 1969.

(Texte)

PROCÈS-VERBAL

Le MARDI 25 février 1969

(23)

Le Comité permanent de la santé, du bien-être social et des affaires sociales se réunit aujourd'hui à 11 h. 20 de l'avant-midi sous la présidence de M. Gaston Isabelle.

Présents: M^{me} MacInnis, MM. Forget, Foster, Guilbault, Haidasz, Howe, Isabelle, Mather, McBride, Monteith, Osler, Otto, Rochon, Rynard, Yewchuk—(15).

Témoins: D^r D. W. Thompson, M.D., département de pathologie, Hôpital général de Toronto; M. R. A. Switzer, Commissaire fédéral des incendies, ministère des travaux publics.

Le Comité reprend l'étude de la teneur des Bills C-39, C-45, C-53, C-134, C-137, et C-147.

Le président présente les témoins.

Au moyen de diapositives, le D^r Thompson explique les dangers de la cigarette. Il est interrogé.

Au nom du Comité, le président remercie le témoin.

M. Switzer fait un exposé et est interrogé.

Il est convenu,—Que le rapport intitulé «Fumer, cause d'incendie» et les tableaux annexés soient imprimés en appendice au compte rendu (voir appendice G).

Le président remercie M. Switzer au nom du Comité, et à 1 h. 15 de l'après-midi le Comité s'ajourne à 11 heures du matin le jeudi 27 février.

*La secrétaire du Comité,
Gabrielle Savard,
Clerk of the Committee.*

[Texte]

EVIDENCE

(Recorded by electronic apparatus)

Tuesday, February 25, 1969

• 1120

The Chairman: It is my pleasure to welcome today Dr. D. W. Thompson of the Department of Pathology of the Toronto General Hospital. Also we have Mr. R. A. Switzer, Dominion Fire Commissioner, Department of Public Works.

I understand that Dr. Thompson has some slides he will show us as the meeting proceeds. Dr. Thompson?

Dr. D. W. Thompson, (Department of Pathology, Toronto General Hospital): Mr. Chairman, members of the Committee, and others. This morning it is my intention to discuss something that we have been using as a method of informing high school students, the lay public, and other physicians who are interested in dealing with the public, in discussing the problem of what actually happens in the lungs with cigarette smoking.

What we have prepared is a series of slides which is the product really of three separate studies over the years. The first is a long-term study of the autopsy findings in lungs of heavy smokers of cigarettes versus non-smokers. This has been going on in many departments for many years. That is one basic feature.

The second component is a close examination of the tissues around the lung in cases of lung cancer. We used what was found in depth surgery or autopsy in comparing these lung tissues with the lung tissues of non-smokers.

The third component is a product of many studies in which we are now examining what is coughed up from the lungs, that is, the actual sputum material, examining it on microscopic slides, and again making distinctions between what we find in smokers and non-smokers, and also different age groups, different types of exposure, and so on. This has many ramifications, of course, but it is one way in which we feel we are getting direct evidence as to what is actually happening and how these changes progress over the years.

[Interprétation]

TÉMOIGNAGES

(Enregistrement électronique)

Le mardi 25 février 1969

Le président: J'ai le plaisir de souhaiter la bienvenue, au docteur Thompson du département de pathologie de l'hôpital de Toronto. Nous avons également M. R. A. Switzer, Commissaire fédéral des incendies du ministère des Travaux publics.

Je crois que monsieur Thompson a des diapositives qu'il nous montrera au cours de la réunion. Monsieur Thompson.

M. D. W. Thompson (Département de pathologie de l'hôpital général de Toronto): Monsieur le président, messieurs les membres du Comité, j'ai l'intention ce matin de parler d'une méthode que nous avons utilisée pour informer les étudiants, le public en général, et les médecins intéressés des effets de la cigarette sur le poumon.

Nous avons préparé une série de diapositives à la suite de trois études entreprises depuis plusieurs années. La première est une étude à long terme fondée sur les résultats d'autopsies effectuées sur les poumons de gros fumeurs et de non-fumeurs. Cette étude se poursuit depuis plusieurs années dans de nombreux départements; elle est fondamentale.

La deuxième étude consiste en l'examen minutieux des tissus qui entourent les poumons dans les cas de cancer des poumons. Les opérations chirurgicales et les autopsies nous ont permis de comparer ces tissus avec ceux de personnes qui ne fumaient pas.

Notre troisième étude est le fruit de plusieurs expériences. Nous examinons les particules rejetées lors des accès de toux, c'est-à-dire le mucus, et nous les examinons au microscope, en distinguant les fumeurs des non-fumeurs, en prenant différentes classes d'âge et en tenant compte du temps durant lequel on a fait usage de tabac. Les combinaisons sont donc nombreuses, mais nous pouvons ainsi déterminer directement les symptômes et l'évolution qui se dessine d'année en année.

[Text]

As a result, we have put together a series of slides which are not really so very technical. I think they do illustrate in a fairly clear manner exactly what we have seen and what we have found to be the actual facts in the matter.

If it is satisfactory now, we might proceed to look at some of these slides, and I think you can understand the problem best by just following along from slide to slide.

Can you all hear?

Again I assure you that this really will not be as technical and difficult as it may appear at first glance. This is a sample as we see it under the microscope of the lining of your normal lung passage, that is, the bronchial air passageway. This is magnified many times and it is a very thin section which is stained in a special way, but it shows the two basic functions of the lung tissue in the normal state.

This lining which you see here is a membrane which, when magnified, has these two components. It has these brush-like structures on the surface and it has these individual cellular structures which make up the membrane. The first important function of this tissue is to remove the debris that normally accumulates in any air that we breathe.

I suppose if we were on the top of a mountain somewhere we might find relatively pure air, but anywhere really there is some contamination in the air that we breathe and nature's way of removing this after it settles out in the air sacs and in the passageways is for these brush-like structures constantly to move it upwards so that it is cleared in your throat. Actually when you are clearing your throat you do not realize it, but you are removing this phlegm material which accumulates and this is then swallowed and you do not notice this going on at all. It is a continuous process whether you are smoking or not smoking, and the phlegm that actually traps this material on the surface is the second function of these cells, which produces this phlegm-like material which is a bit sticky. It coats the membrane, keeps it moist and then these moving brush-like structures constantly move it upwards and keep the lung clean from this normal exposure to impurities. This, then, is the basic function of this tissue in the lung.

• 1125

The next slide just shows the phlegm that is in these cells which is squeezed out constantly like bits of material from a toothpaste tube. It is squeezed out on the surface. It coats the membrane, traps this debris that is

[Interpretation]

Nous avons donc constitué une série de diapositives qui ne sont pas trop techniques et qui donnent une idée assez claire de ce que nous avons constaté.

Si cela vous convient, nous pouvons maintenant projeter ces diapositives; il suffit de suivre la série pour comprendre. Est-ce que tout le monde entend?

Je vous assure que cela ne sera pas aussi technique ni aussi difficile que cela peut sembler de prime abord. Il s'agit d'un échantillon, vu au microscope, de la paroi des bronches. C'est une section très mince, grossie plusieurs fois, et qui indique les deux fonctions fondamentales du tissu pulmonaire.

La paroi que l'on voit ici est une membrane formée de deux parties: on voit les petites brosses à la surface, et les cellules qui constituent la membrane. La première fonction fondamentale de ces tissus est d'enlever les débris qui s'accumulent lorsque nous respirons.

Par exemple, au sommet d'une montagne, on trouve un air très pur, mais ailleurs, il y a un peu de contamination dans l'air que nous respirons; la nature a prévu cette membrane qui a justement pour fonction de purifier l'air lorsqu'il passe par les bronches au moyen de ce genre de petites brosses qui vont constamment de bas en haut et nettoient ainsi la gorge. On ne s'en rend pas compte mais lorsqu'on s'éclaircit la voix, on enlève les débris qui s'accumulent et qu'on avale sans s'en apercevoir. Il s'agit d'un processus continu, que vous fumiez ou non, et la pituite qui arrête cette matière à la surface remplit la deuxième fonction de ces cellules qui consiste à maintenir humide cette membrane de façon à ce que les poumons restent propres. C'est un processus continu; les petites brosses nettoient constamment la paroi des impuretés qui peuvent s'y loger. C'est là la fonction fondamentale du tissu du poulmon.

Cette diapositive montre la pituite qui se trouve dans ces cellules et qui est constamment éjectée comme s'il s'agissait d'un tube de dentifrice qu'on presse. La matière est projetée à la surface. Puis elle recouvre la

[Texte]

breathed in and moves it upwards with the action of these brush-like structures.

The next slide shows that if you cough up sputum material and we spread it out on a slide and look at it under a microscope we see normally, in the nonsmoker, the cells that are the product of that membrane which are constantly being replenished as any tissue in the body is being replenished.

These cells are constantly turning over. They have a limited life expectancy. They serve their function, die off and are replaced by others of the same type. As a result, a few of these might be found normally in this material that we cough up under normal circumstances, but let us compare this with the next slide which shows what we see in the lung of a cigarette smoker when this material is coughed up. This is a fairly striking finding which is easy to correlate with the heavy cigarette smoker.

In this material we now have a different type of cell population, you might say. There are many, many more cells in this sputum material and this is regarded as a secondary line of defence, you might say. These are what we call scavenger cells that are produced in response to irritation from the particles as they settle into the tissues in the lung.

These are stimulated by a chemical action—I will not go into all the technical details—and these are then produced in the tissues, migrate into the air sacs and as scavengers they gobble up or take up this material. You cannot see it in very much detail here, but this is the tarry material and the material which actually you breathe in as smoke particles. It is obvious this has to go somewhere you can see it. It is particulate matter and it is deposited in these air sacs and then these cells, as an additional line of defence, try to remove this.

When I say irritation today, irritation of these tissues, what I mean might be better understood by imagining that if someone stood about two inches in front of your eyeballs and breathed pure smoke into your eyeballs when they are wide open, you know that is irritating. There is a chemical irritation involved, a physical irritation. The lung does not respond the same way as your eyeballs because the lung does not have a rich supply of nerve endings that let you know this. The lung, in other words, is a dumb animal. It does not have the sensitivity to let you know that it is being irritated the way your eyeballs do under those circumstances, but there

[Interprétation]

membrane, arrête les détritits qu'on avale et les déplace de bas en haut à l'aide des petites brosses.

Ici, nous voyons cette substance qui est éjectée, si l'on tousse. Si on l'examine au microscope, on voit, chez un non-fumeur, les cellules produites par cette membrane et qui se renouvellent constamment, tout comme les autres tissus du corps humain.

Ces cellules se retournent constamment. Leur durée est assez limitée. Elles remplissent leur fonction, meurent, et sont remplacées par d'autres du même genre. En conséquence, on peut en trouver quelques-unes dans cette matière que nous rejetons en toussant, dans des circonstances normales, mais comparons cela avec la diapositive suivante qui montre ce que l'on trouve dans le poulmon d'un fumeur de cigarettes lorsqu'il crache. C'est une découverte assez frappante et qu'on peut facilement mettre en corrélation avec le gros fumeur de cigarettes.

Dans cette matière, nous avons maintenant un type différent de cellule, si l'on peut dire. Il y a beaucoup plus de cellules dans ce crachat et on considère cela comme une deuxième ligne de défense, si vous voulez. C'est ce que nous appelons des cellules nécrophages, qui sont produites par suite de l'irritation causée par les particules de fumée qui se logent dans les tissus des poulmons.

Elles sont stimulées par une réaction chimique—je n'entrerai pas dans les détails techniques—et ces petites cellules s'accumulent à l'intérieur des tissus, passent dans les poulmons et dévorent cette matière. On ne peut pas tout voir en détail, mais il s'agit ici de la matière goudronneuse qui entre dans la composition des particules de fumée qu'on avale en fumant. Cela doit aller quelque part; on peut le voir ici. Ces particules vont se déposer dans les poulmons, puis les cellules, par réaction de défense, essaient de les enlever.

Peut-être serait-il plus facile de comprendre ce que je veux dire par irritation en vous donnant cet exemple: essayons d'imaginer quelqu'un qui se place à deux pouces de vous et vous souffle de la fumée dans les yeux. Vous voyez que cela produit de l'irritation. Il y a là une substance chimique qui cause de l'irritation. Le poulmon ne réagit pas de la même façon, car il n'a pas autant de nerfs que l'œil, qui vous fait savoir qu'il y a de l'irritation. Autrement dit, le poulmon n'a pas la sensibilité voulue pour vous dire qu'il y a irritation, contrairement à l'œil. Mais, de toute façon, cette substance chimique provoque l'irritation.

[Text]

is, however, this chemical irritation which induces this response nevertheless.

The next slide shows a lung from an adult male in Toronto who had this lung removed for other reasons. He was a nonsmoker. The reason I show this is that he was an adult male and lived all his life in Toronto and so was exposed to the normal Toronto atmosphere, which is not the best in the world by any means, but it is not the worst in the world either.

In any case, you can see the colour of his lung tissue when it was removed. Now, I am sure you have seen this many times before under other circumstances. This is the favourite play of those who talking about this problem, but the next slide does show quite realistically the colour of the lung tissue in the heavy smoker, a similar-aged male who had been a heavy cigarette smoker for many years. When I show these slides to lay groups, the smoking withdrawal clinics and so on, I often get the response after finishing the discussion that the progress through this series is much like Oscar Wilde's *The Picture of Dorian Gray*

In any case, you do not realize that this is going on, but it is constantly being deposited because the first normal mechanism that I showed and then the secondary mechanism are not sufficient to remove this material and there is such a tremendous over-exposure that nature never really intended the lung to cope with, you might say, that it cannot possibly remove all of this and much of it is deposited in a slow and insidious fashion into the tissues. It becomes impregnated into the walls of the air sacs and the basic framework of the lung and this is the appearance of the lung, then, after several years.

● 1130

Let us follow through the next slide in a slightly more technical way, just for a moment, what actually happens when one starts smoking in high school. He is exposed to this constant irritation from the smoke day after day, month after month and year after year.

First this lung membrane responds by trying to become a hardier, more resistant type of membrane, more resistant to this constant irritation that it cannot escape, you might say. In doing this it is stimulated to become thicker. There are many, many more layers of cells present. The cells at the surface are

[Interpretation]

La prochaine diapositive montre le poumon d'un Torontois adulte qui s'est fait enlever ce poumon pour d'autres raisons. C'était un non-fumeur. Cet homme a vécu toute sa vie à Toronto; il était donc exposé à la pollution normale de l'air de Toronto, qui n'est sûrement pas l'air le plus pur du monde, mais qui n'est pas non plus le pire.

Quoiqu'il en soit, vous pouvez voir la couleur du tissu pulmonaire qu'on a prélevé. Je suis sûr que vous avez vu cela à bien des reprises, en bien des circonstances. La prochaine diapositive vous montre bien la couleur des tissus pulmonaires chez un gros fumeur: un homme d'à peu près le même âge, qui a beaucoup fumé, et pendant de nombreuses années. De fait, lorsque nous montrons ces diapositives à des profanes, ou à des connaisseurs, après avoir terminé la discussion, on me dit que cela ressemble beaucoup au *Portrait de Dorian Gray*, d'Oscar Wilde.

Vous ne vous en rendez pas compte, mais ces dépôts s'accumulent constamment, car le premier mécanisme naturel, que j'ai montré, de même que le mécanisme secondaire, ne suffisent pas à éliminer ces substances toxiques, et il y a tellement de surexposition que la nature n'avait pas prévue, qu'on ne peut éliminer tous ces déchets; et bon nombre de ces substances s'imprègnent dans les tissus, dans les parois de la cage thoracique, et le long du revêtement des poumons. Et voici l'aspect du poumon après plusieurs années. Suivons maintenant, de façon plus technique, pendant un instant, ce qui se passe lorsqu'on commence à fumer à l'école secondaire. On est exposé à cette irritation constante, jour après jour, mois après mois, et année après année.

Tout d'abord, cette membrane des poumons répond en essayant de s'endurcir, en essayant de mieux résister à cette irritation constante; et ce faisant, elle tend à devenir plus épaisse: il y a donc beaucoup plus de couches de cellules. À la surface, les cellules sont endommagées, de même que les structures des petites bronches. Les cellules muqueuses qui produisent la pituite sont détruites, et, par conséquent, la membrane se dessèche et devient de plus en plus dure. D'après nos études des échantillons de crachats, nous avons constaté que cela commence au cours des dernières années du cours secondaire, et se poursuit

[Texte]

damaged. The cilia, or these brush-like structures, are lost from the surface. The mucous-secreting cells, those that produce the phlegm that traps the debris, are lost so the membrane become dryer and this becomes a more leathery type of membrane gradually and our evidence indicates from these sputum studies again that this starts in the late high school years. It starts very early and goes on for years and becomes more extensive. It starts in the central areas of the lung, gradually progresses outwards as there is more and more exposure over a longer period of time.

The next slide shows this in a more complete stage. After more exposure this becomes definitely a leathery membrane that is now much like your skin, actually, and it is quite different from the original slide that I showed you of a normal membrane in the lung.

I say here that other conditions, other chronic irritating conditions such as repeated chronic infection and other types of exposure can produce this, but we find it so characteristic and the almost inevitable result of heavy smoking at this stage of change which we are discussing now which we might call the first stage. It is so frequently found in smokers in our studies that it has a direct correlation which is almost inevitable in anyone who has smoked several years. As I mentioned, other chronic irritations can do the same thing, but what we are going to show later on is more and more characteristic of the heavy smoker.

On the next slide the next stage is that instead of a benign membrane we just saw which is leathery, it is definitely abnormal for the lung and has now lost its basic function of removing debris. So at this time the debris that is inhaled goes into a segment which rather static and if there are irritants in that smoke after a period of time the cycle speeds up because this material is then deposited beyond this segment which can no longer function properly. You see it has lost this movement upwards and so the material that is inhaled tends to become stagnant in the more distal areas and is chronically irritating and it is usually at this time, then, that a third mechanism develops, the so-called smokers' cough, which is an attempt to cough up by accessory activity, if you like, the material which is so irritating and which cannot be removed now by the normal means because this central membrane is all destroyed and converted to this dry leathery type.

The next change that occurs is illustrated here and I think you can appreciate it even

[Interprétation]

pendant des années et devient de plus en plus étendu. Cela commence vers le centre du poumon et s'étend graduellement vers l'extérieur.

La prochaine diapositive montre une coupe transversale plus complète de la membrane, après plus d'exposition; la membrane ressemble à du cuir. Cela diffère beaucoup de la membrane normale que je vous ai montrée.

D'autres conditions d'irritation, comme des infections chroniques répétées, d'autres genres d'expositions, peuvent produire cela, mais nous constatons que cette membrane est tellement caractéristique qu'elle est presque le résultat inévitable de l'usage poussé de la cigarette. C'est la première étape qu'on trouve fréquemment chez les fumeurs. D'après nos études, il y a une corrélation directe qui est presque inévitable chez ceux qui ont fumé pendant plusieurs années. Quiconque a fumé pendant plusieurs années a une membrane de ce genre. D'autres irritations chroniques peuvent avoir les mêmes résultats, mais ce que nous allons vous montrer plus tard, ce sont les caractéristiques qu'on trouve chez les gros fumeurs.

Voici maintenant l'étape suivante: au lieu d'avoir une membrane mince, on a une membrane plus épaisse qui ressemble à du cuir et qui est anormale pour les poumons, et qui a donc maintenant perdu sa fonction fondamentale qui est d'éliminer les débris ou les déchets. Les impuretés qui sont aspirées vont donc s'insérer dans un segment qui est plutôt statique. Et par conséquent, après une certaine période, le cycle s'accélère, car ces déchets sont déposés en dehors de ce segment qui ne peut plus fonctionner convenablement. On perd ces mouvements vers le haut et, ensuite, les déchets qui sont aspirés deviennent stagnants et provoquent une irritation constante. Et c'est à ce moment qu'un troisième mécanisme se développe, soit la toux constante des fumeurs qui essayent d'éliminer les déchets qui causent l'irritation et qui ne peuvent plus être éliminés par les moyens normaux, car la membrane centrale est avariée et est devenue épaisse et dure.

Le prochain changement qui se produit est illustré ici. Même si vous n'avez pas l'habi-

[Text]

though you are not accustomed to looking at these slides. The genesis or the beginning of cancer really may be due to different causes in different circumstances, but the basic component in all cancers is that something happens to the individual cells where they go berserk, you might say; they become very bizarre in character and they no longer look normal. These cells that are becoming cancerous here obviously look different from the benign cells over here that are quite regular in makeup.

In addition, these cells function abnormally; their metabolism becomes abnormal, something has happened. It is a response to this chronic repeated irritation. Over the years these cells have been turning over much more rapidly than the normal cells because they are constantly being damaged by this irritating noxious material that is inhaled. So, after generations of repairing themselves something finally goes wrong with their metabolism and this is what eventually results, and we actually see this microscopically long before it becomes visible as an actual tumor. However, there is no sign of this on the X-ray, so one should not expect a chest X-ray to pick it up at this stage at all. That is a foolish hope.

• 1135

The next slide, please. What really happens is that this change just becomes more extensive in that area where it has finally reached that point. We call this *in situ* cancer, which has really not yet progressed to become a visible mass. Nevertheless, it is cancerous epithelium in that area.

The next slide, please. You cannot really see it, but this is a comparison with the normal membrane that we saw in the very first slide and it shows how the cancerous membrane appears in comparison. I think the next two slides—may we have the next one, please—again show the normal cells that might be coughed up in the sputum as compared with what we see in the stages we have just seen when the epithelium has become cancerous in a local area in the lung.

The next slide, please. This shows how different these cells appear. They are obviously bizarre; they are different they look quite abnormal. As you can see here, they now have no resemblance whatever to normal functioning cells in this area.

The next slide, please. The next few slides will show the stages that a cancer progresses through. This is the open bronchial passageway lined by what would apparently be a smooth, regular membrane, but this is actually now the leathery membrane that we showed

[Interpretation]

tude de regarder des diapositives de ce genre, vous pouvez voir ce qui s'est passé. La genèse du cancer peut être attribuable à plusieurs causes et à plusieurs circonstances, mais les composants fondamentaux, c'est que les cellules individuelles sont avariées, elles ont des caractères bizarres, elles n'ont plus l'air normal, elles sont devenues cancéreuses ici, elles ont un aspect différent.

Outre cela, ces cellules fonctionnent anormalement, le métabolisme devient anormal, quelque chose est survenu. C'est la réponse à cette irritation chronique constante. Au cours des années, ces cellules se reforment beaucoup plus rapidement que les cellules normales, car elles sont avariées sans cesse par cette substance nocive qui est aspirée. Et après des générations de changement de cellules quelque chose dans le métabolisme se rupture et voilà la résultante, nous pouvons le voir au microscope longtemps avant que cela devienne visible comme tumeur. Cependant, il n'y a pas de signe de cela sur les rayons-X, les rayons-X pulmonaires n'indiquent pas ce changement de cellules. Voici ce qui se passe.

La diapositive suivante, s'il vous plaît. Ce changement devient de plus en plus poussé dans cette région, jusqu'à ce point-ci. C'est le cancer à l'état établi, qui n'a pas réellement encore atteint l'état de masse visible. Toutefois, il s'agit d'un épithélium cancéreux dans cette région.

La diapositive suivante, s'il vous plaît. On la voit mal, mais il s'agit d'une comparaison entre les membranes normales que nous avons eues dans la première diapositive, on montre comment les membranes cancéreuses font leur apparition. Dans les deux diapositives suivantes, (la diapositive suivante, s.v.p.), on voit les cellules normales qui peuvent être rejetées par la toux, lorsqu'on se râcle la gorge et qu'on ne puisse plus le faire lorsque l'épithélium est devenu cancéreux dans une région du poulmon.

Dans les diapositives suivantes, vous voyez l'aspect différent de ces cellules, des formes bizarres qui sont, et qui ne ressemblent plus aux cellules normales de cette région.

Les quelques prochaines diapositives montrent les étapes de progression du cancer, voilà le passage bronchial ouvert, où il y a une des membranes qui devrait être douce et normale et c'est maintenant une membrane coriace par suite des années d'exposition. Cependant, en plus, il y a un changement

[Texte]

and which is a product of years of exposure in this central area. However, we now have this additional change which is the early cancerous growth which is starting here and it is about the size of a dime. I will not tell you how we discovered this one because I do not want to get off on a tangent; nevertheless we were fortunate enough to find one in this early stage.

The next slide, please. This shows that even on a microscopic section this had now become a tumor which was starting to invade. There is no longer normal control of growth of this tissue, and that again is what cancer is all about. It is a growth of tissue which is no longer under normal control of mechanisms in the body and it starts to invade and destroy adjacent tissue. You can see these pincerlike structures. Here is a little blood vessel with red cells in it. This is actually the problem in the lung because what is the purpose of the lung in the body? The lung is the organ by which we transfer oxygen that we breathe to the red cells in the blood stream, and the lung is really a transfer tissue in which this is accomplished. Obviously, then, to accomplish this transfer to the red blood cells from the air sacs, so when a tumor the lung is richly supplied with blood vessels starts to invade the lung it then very quickly penetrates these tissues and will quickly invade blood vessels. You can see it is almost invading this one, it has practically surrounded it. Then little bits break off and spread to other parts of the body. It then becomes, of course, incurable.

I think this illustrates very well, for those of you who perhaps may not be familiar with it, how cancer got its name and how the word originated. In the earlier days when they started using the microscope they, of course, looked at things in water, the usual schoolboy techniques, and they looked at odds and ends that they could not see with the naked eye. They then started examining the tissues of the body to see what the body was made of. In addition, they eventually got around to looking at abnormal tissues under the microscope and staining them in special ways.

The first time they saw cancer they were impressed by these odd claw-like structures of penetration invading other tissues. This reminded them of the signs of the Zodiac, with which they were so familiar in those days because astrology was quite popular and the cancer month—I believe it is the end of June and part of July—had a sign on the Zodiac of the crab, the Latin name for which is cancer. These areas of penetration reminded them of the claws of the crab on the sign of the Zodiac and this is how cancer got its name. I think it is quite well illustrated here.

[Interprétation]

additionnel qui est le début du cancer, qui commence, c'est à peu près de la grosseur d'un dix cents. Je ne vous dirai pas comment nous avons découvert ce symptôme, je ne veux pas m'écarter du sujet; mais nous avons été chanceux de pouvoir constater, de pouvoir en trouver un échantillon à ses débuts même.

L'autre diapositive, s.v.p. C'est maintenant une tumeur qui commence à envahir le milieu. Il n'y a pas de contrôle de la croissance de ces tissus, le cancer, c'est justement la croissance d'un tissu qui dépasse le mécanisme de contrôle du corps et qui commence à envahir et à détruire les tissus adjacents. Vous pouvez voir ces petits vaisseaux sanguins ici. C'est là le problème des poumons, car le but des poumons, le poumon c'est l'organe en vertu duquel nous transférons l'oxygène aux cellules rouges dans l'écoulement du sang, c'est vraiment un tissu des transferts et également le poumon n'a plus maintenant le tissu qui accomplit cette fonction, ainsi jusqu'à ce que la tumeur commence à faire une invention du poumon et pénètre très rapidement ces tissus et rapidement va envahir le vaisseau sanguin, il l'a presque entouré ici. Puis des petits morceaux s'infiltrèrent dans d'autres parties du corps et, bien entendu, cela devient incurable.

Je crois que cela illustre très bien pour ceux d'entre vous qui ignorez peut-être comment le mot cancer a obtenu son nom. Au début lorsqu'on a commencé à utiliser un microscope, on regardait les échantillons dans l'eau, selon les techniques de l'écolier, et ce que l'on ne pouvait pas voir à l'œil nu. On a alors recommencé à examiner les tissus du corps pour voir de quoi se composait le corps et éventuellement on en est venu à savoir ce qui composait le corps.

La première fois qu'on a vu du cancer on a été impressionné par ces espèces de structures bizarres, spectaculaires qui s'infiltraient dans d'autres tissus. Cela rappelle les signes du zodiaque, l'astrologie étant populaire à cette époque, et je crois que c'est en juin ou à la fin de juillet on avait le signe du crabe, dont le nom en latin est cancer et lorsque, l'un deux, par conséquent, a reconnu cette forme du zodiaque, c'est ainsi qu'on a donné à cette anomalie le nom de cancer.

[Text]

• 1140

The next slide, please. The next two or three slides will just show the progress of this type of tumor. I will quickly go through the next few stages. The tumor then starts to enlarge, but it is still not visible on the X-ray because unless it forms a mass which has extended beyond the wall of the air passageway we usually do not see it on the X-ray. But here it is still growing and it is forming a mass and we do not really know it is there, because at this stage it is not usually causing symptoms.

The next slide, please. This shows that it is now partially blocking the bronchial passageway and eventually it will be completely blocked by this growth of tumor and it will also start to invade the tissues around it to form a mass in the lung, but we find that until that stage it usually does not cause much in the way of symptoms. It may occasionally bleed a little but other conditions in the lung might cause some bleeding, so it is really not diagnostic. However, I think this slide illustrates one very important key point.

This is something that I do not think is really appreciated generally in a discussion on the effects of smoke. Where does the cancer develop? The cancer develops where we have this maximum, continued, chronic exposure to the irritation of the smoke. It is probably a physical and chemical irritation combined, and it is not developing in an area like this. What is this black structure that we see here? This is the accumulation of this black carbon and tarry material which is deposited in the lung, and some of it has leached into the tissue and is deposited in these lymph nodes or way stations, you might say, in the lymph flow where impurities are normally caught up and trapped and sort of neutralized in a way, but the cancer does not develop where these materials become concentrated and where the chemical irritation is probably the strongest. The tumor develops where we have this constant irritation from a physical and chemical irritation in the actual membrane. For this reason I wonder, as long as there is smoke there and regardless of the type of filter we are using, how successful filter mechanisms might be, because as long as there is the physical irritation of the smoke perhaps this is as much a factor as anything else.

The next slide, please. Eventually this becomes completely blocked off, as we see here. The next slide, please. This shows that at the time it finally blocks off the passageway—here is a bronchial passageway plugged up by a tumor—and because these secretions

[Interpretation]

Donc, les prochaines diapositives vous montreront la progression de ce genre de tumeur. La prochaine diapositive; nous allons passer rapidement aux prochaines étapes. La tumeur commence à augmenter, à grossir, elle n'est pas encore visible sur les rayons-X, sauf, nous ne la voyons plus lorsqu'elle est devenue une masse qui bloque le passage, et nous ne savons pas ce qui est là, car cela ne cause pas de symptômes encore à cette étape-ci.

La diapositive suivante; on a dit que cela bloque partiellement le passage des bronches et éventuellement qu'elles seront complètement bloquées par cette tumeur qui commencera à envahir les tissus fondamentaux des poumons jusqu'à ce qu'elle frappe, cela ne cause pas tellement de symptômes. Il peut y avoir des saignements dans le poumon, mais d'autres causes peuvent causer des saignements et cela ne devrait pas être très symptomatique.

Mais elle a ceci contre elle, une chose qu'on ne reconnaît pas généralement dans la disposition des effets d'une tache de tabac, où le cancer se développe et se développe lorsqu'il y a exposition chronique à l'irritation de la fumée. C'est une irritation chimique et physique qui ne se développe pas dans un secteur comme celui-ci. Quelle est cette structure noire que nous voyons ici? C'est une accumulation d'une substance goudronneuse et chimique qui imprègne les tissus, qui sont déposés dans l'écoulement lymphatique et qui neutralisent le passage, mais le cancer ne se développe pas là où ces substances chimiques deviennent plus fortes. Nous avons cette irritation constante dans le passage des bronches, la membrane des bronches. Je me demande donc pour autant où, au niveau de la fumée, indépendamment du filtre que nous utilisons, je me demande à quel point le mécanisme du filtre pourra être réussi pour autant qu'il y a l'irritation physique causée par la fumée, c'est peut-être là, tout autant un facteur que n'importe quoi d'autre.

Diapositive suivante s'il vous plaît. Éventuellement cela devient complètement bloqué. Diapositive suivante s'il vous plaît. On voit ici, qu'au moment où il y a blocage complet du passage des bronches par la tumeur, comme les sécrétions deviennent saignantes,

[Texte]

beyond it become so stagnant, we get an ideal environment for pneumonia to develop, that is, infection of the lung. The stagnant secretions and the bacteria that are breathed in the air provide an ideal environment, and it is at this stage then that we might finally get symptoms because of the presence of the tumor.

The next slide, please. Unfortunately with lung cancer it is usually at this stage that we develop the symptoms, which in the average case is definitely too late. It is at this stage that it is diagnosable on an X-ray but it is too late. When it is visible on the X-ray basically about 90 per cent of the time it is too late. I think that is a simple fact that has now been well established, so one should not put faith in X-ray surveys to pick up early lung cancer in a more curable state. The benefit is extremely marginal.

The next slide, please. This is the way an X-ray appears when the mass becomes visible. We might well ask why does cancer not show symptoms before this stage?

Fortunately in the lung we have a very large reserve capacity, unless we are talking about an athlete who is at the peak of his activity or endeavour at any particular time, and none of us really very often use the full capacity of our lung tissues, so there is usually an extensive reserve capacity there. Granted, this is gradually depleted by the heavy smoker, who is causing emphysematous changes and other basic damage in his lung tissue which is depleting his reserve, so that in the forties and fifties it finally begins to show up. Nevertheless, in the average case we have a reserve capacity, so we can destroy a certain amount of lung tissue and it does not really affect our reserve.

The other point is that because again there is not a rich supply of nerves it is not a painful condition, and the tumour grows off into this soft tissue without impediment. It does not cause pressure symptoms, and so on, so unfortunately it really does not cause symptoms until it is too late and it has got into the blood vessels.

• 1145

The next slide, please. I am not going to basically deal in statistics this morning, but there is one point I would like to bring out. As I mentioned at the outset, we have been using this with high school students in an attempt to explain to them directly what is actually happening in their lungs when they start smoking. We also use it for lay clinic groups, those who wish to stop smoking and

[Interprétation]

nous avons un milieu idéal pour une pneumonie qui est une infection du poumon. Les bactéries qu'on respire dans l'air, ont un milieu absolument idéal. C'est ainsi que nous pouvons avoir un des meilleurs symptômes dans les zones de la présence du tumeur.

La diapositive suivante, s.v.p. Malheureusement avec le cancer du poumon, c'est habituellement à cette étape-ci que les symptômes se développent et il est définitivement trop tard dans un cas moyen. C'est à cette étape que cela peut être diagnostiqué sur un rayon-X, mais il est trop tard. Lorsque le symptôme est visible sur le rayon-X, dans 90 p. 100 des cas, il est trop tard. C'est un fait qui est bien établi, il ne faudrait pas tellement avoir confiance dans le rayon-X pour pouvoir dépister le cancer à une étape précoce, les chances sont très marginales.

Diapositive suivante s'il vous plaît. Voici le rayon-X maintenant et la masse devient visible. Nous pourrions fort bien nous demander pourquoi le cancer ne montre aucun symptôme avant ce stage?

Heureusement, nos poumons renferment d'importantes réserves, sauf dans le cas d'un athlète qui est au sommet de son activité, et personne d'entre nous n'utilise très souvent cette capacité maximum des tissus pulmonaires.

Ces réserves diminuent chez les gros fumeurs qui endommagent leurs tissus pulmonaires, de sorte que les signes commencent à apparaître vers les 40 ou 50 ans. Nous avons une capacité de réserve, de sorte que certaines cellules peuvent être avariées sans que cela ne touche réellement nos réserves.

Parce qu'il n'y a pas tellement de nerfs non plus, ce n'est donc pas une condition douloureuse, et la tumeur peut s'étendre sans entrave. Il n'y a pas de symptômes d'oppression, il n'y a vraiment pas de symptômes jusqu'à ce que, malheureusement, il soit trop tard et que la tumeur ait envahi les vaisseaux sanguins.

Je ne vais pas parler de statistiques ce matin, mais permettez-moi de signaler ce point. Nous utilisons ceci auprès des étudiants d'écoles secondaires pour leur expliquer ce qui se passe dans leurs poumons lorsqu'ils commencent à fumer. Nous l'utilisons également pour les groupes qui veulent arrêter de fumer, et qui veulent savoir ce qui se produit dans leurs tissus pulmonaires.

[Text]

who wish to understand what is happening and has happened in their lung tissues.

One of the points that we often find of impact, and which might interest some of you here—I am sure most of you are familiar with it already—is this point that the British survey showed and which is really confirmed by the American studies and others, that one-third of heavy smokers in their thirties will be dead by age 65 which, of course, is the date upon which they might normally expect to receive their first pension cheque. Obviously, then, on the basis of these figures, one in three smokers is never going to collect his first pension cheque. Certainly if I were a smoker I would not want a stacked pension. In addition, I would probably prefer to spend my money while I had it.

The next slide, please. By the way, another point that high school students have also brought up—and perhaps I will not get into this too deeply—is the question of how parental influence in the home affects their likelihood of smoking and what is the heritage, you might say, of the smoking parent for the child from the point of view of statistics. This is just something that I think is important to correlate factually what we have actually been showing in a technical way this morning.

We have done various studies in Toronto, and one of these studies has indicated an interesting finding which we want to follow up more extensively. We decided to sort out the difference between less than 10 to 20 cigarettes per day and more than 20 per day in the effects on these changes that we saw in the early stages in the lung tissue as examined in the sputum and as we saw it under the microscope. We found that there was not really any significant change. One may be a susceptible type individual, and this was another interesting finding. Obviously not everyone is going to go through this series of changes, that is quite basic and everyone realizes that.

However, there are certain family lines that are more likely to do it than others. There are certain people who with less exposure will develop it faster than others who require longer and greater exposure, and so on. Very obviously there are individual differences but we thought we would take a mixed group and see if there was any significant difference in these levels, and we found that there was not really that much difference. These early changes were being produced in all categories if they were going to be present, and a third of them did show them.

[Interpretation]

Un point qui pourrait vous intéresser, si vous n'êtes pas déjà au courant, c'est que l'enquête britannique a démontré, et d'autres enquêtes le confirment, qu'un tiers des personnes qui sont dans la trentaine et qui fument beaucoup sont mortes avant d'atteindre leurs 65 ans, soit l'âge où ils pourraient espérer recevoir leur premier chèque de pension. Il est évident, en se basant sur ces chiffres, qu'une personne sur trois ne touchera même pas son premier chèque de pension. Personnellement, si je fumais, je préférerais probablement dépenser mon argent pendant que j'en ai encore la chance.

La diapositive suivante. Les étudiants d'écoles secondaires se demandent également comment l'influence de leurs parents, à la maison, peut les amener à fumer et quel est, si je puis dire, l'héritage que les parents qui fument laissent à leurs enfants. Je crois qu'il est important de donner des faits à ce sujet afin d'établir une relation avec ce que nous venons de voir.

Nous avons entrepris plusieurs études à Toronto, et l'une d'elles nous a permis d'en arriver à une constatation intéressante que nous allons approfondir. Nous avons décidé d'établir la différence entre ces personnes qui fument moins de 10 à 20 cigarettes par jour et celles qui en fument plus de 20 en ce qui regarde les effets de ces changements, survenus au départ, sur les tissus pulmonaires, ce que nous avons pu voir grâce au microscope. Nous avons constaté qu'il n'y avait pas de changements considérables. Il est évident que tous ces changements ne se produiront pas chez tous les individus.

Toutefois, ils peuvent se produire davantage dans une famille que dans une autre. Il y a des personnes qui, moins exposées que d'autres, développeront ces symptômes plus rapidement que d'autres qui y auront été exposées plus longtemps. Il y a des différences individuelles. Nous avons tenté l'expérience avec un groupe pour voir s'il y avait des différences considérables, mais nous avons constaté qu'il n'y en avait pas tellement. Ces premiers changements se manifestaient dans toutes les catégories, si un changement devait se manifester. Nous les avons retracés dans un tiers des cas.

[Texte]

The next slide shows another interesting feature that correlates well. We did this as a blind study. We were interested in finding out the relation between years of smoking and these abnormal changes in the lining of the lung that we showed you earlier. We found of those people who has smoked for less than 20 years that about a quarter of them had already shown these significant changes, whereas with the nonsmokers we found only the mildest change in a very, very few individuals.

Of course, as I mentioned, this was a blind study and we did not know what we were dealing with until someone else sorted out our assessment of these particular samples. From 20 to 40 years this is what one might theoretically expect and this is exactly what was found. There was a greater increase with more prolonged exposure. From 40 to 60 years almost half of them showed these significant changes in the lung, as picked up in the analysis of their sputum. So, we think this is quite useful and factual information which is hard to deny. I do not think you can really interpret it any other way. There is a direct correlation on something that we wanted to get in a factual manner, and it certainly turned out that way in this particular study and in others that we have since completed.

The next slide, please. This is simply to illustrate one other aspect that we have been working on. What about those people who did not know the risks before? Should we try to redouble our efforts to attempt to catch them in the early stages by the use of this sputology or smear material from the sputum of people who were heavy smokers and who really, perhaps, did not realize the hazards before and that we should try to catch these tumors that start developing in the thirties and forties and are now coming into full bloom, you might say.

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We have found in a combined group that if we use this type of approach intensively in the high risk group we can pick up these very early cancers that I showed you by the use of this smear technique in examining their sputum, and then localizing them with special instruments and removing them in the early and curable stage. Obviously there is a high percentage of cure there compared with those that are picked up at the earliest possible stage by X-ray, and there is really no significant difference from the over-all cure rate if we take all patients with lung cancer at all stages.

However, this is quite impractical. We would have almost half the population checking the other half, because it is so difficult to do. We need highly skilled personnel. It is

[Interprétation]

Voici une autre caractéristique intéressante. Il s'agit là d'une étude au hasard. Nous voulions simplement établir les rapports entre les années d'usage de la cigarette et ces changements anormaux que nous vous avons fait voir plus tôt. Nous avons constaté chez les personnes qui fumaient depuis moins de 20 ans, qu'environ le quart étaient touchés par ces changements d'importance alors que chez les non-fumeurs nous n'avons observé que quelques légers changements chez quelques individus.

Il s'agissait évidemment d'une étude faite au hasard. Nous ignorions quelles seraient les résultats tant que notre évaluation ne fut pas soumise à quelqu'un d'autre. Entre 20 et 40 ans, on peut s'attendre à ceci, et c'est ce que nous avons trouvé. L'augmentation était plus marquée en raison de l'exposition plus longue à la cigarette. Chez les personnes de 40 à 60 ans, environ la moitié étaient touchées par ces changements d'importance dans les poumons. Nous croyons ces renseignements très utiles et difficiles à nier. Je ne pense pas qu'on peut interpréter cela d'autre façon. Il y a corrélation directe. C'est ce que nous voulions prouver par cette étude et c'est ce que nous avons fait.

La diapositive suivante s'il vous plaît.

Voici un autre aspect. Que dire de ceux qui ne connaissent pas les risques auparavant? Devrions-nous essayer de redoubler d'efforts pour essayer de les empêcher de fumer dès le départ, en utilisant, comme exemple, ces gros fumeurs qui ne connaissent peut-être pas les dangers auxquels ils s'exposaient, et essayer d'arrêter la marche de ces tumeurs chez les personnes de 30 ou 40 ans avant qu'il ne soit trop tard?

Nous avons constaté dans un groupe combiné que si nous utilisons ce genre de méthodes intensément, nous pouvions trouver ces cancers précoces en utilisant la technique de l'analyse de l'expectoration, localiser la tumeur avec des instruments spécialisés et l'éliminer dès le départ. Il y a un gros pourcentage de guérisons comparativement à ceux que l'on trouve par rayons-X, mais il n'y a pas tellement de différences dans le pourcentage de guérisons si on tient compte de tous les cas de cancer du poulmon, quel qu'ait été le moment où ils ont été localisés.

Ceci n'est pas très pratique car une moitié de la population devrait vérifier l'autre moitié. Il nous faut un personnel très spécialisé. Il faudra entraîner beaucoup de

[Text]

going to require many, many people to train and produce such personnel. It takes many samples to get a representative sampling from the lung and it is an extremely difficult and time-consuming procedure to try to get these tumours in the early stage.

The next slide, please. This is just another point which I think brings into focus, you might say, the impact on the economy of the cancer of the lung problem. If we take 500 adult women who are walking about, or whom you might find in any public congregation, on the average two of those women will have an unsuspected early cancer of the cervix, and yet they are constantly exhorted by cancer societies, TV ads and other programs to go to their doctor's office to have a Paps smear taken. This Paps smear that you hear about is the same thing we are talking about in examining the sputum of the lung. You will find that condition in one out of every 250 or so of these women. Everyone seems to think that this is an economic approach, that it is worthwhile doing because the removal of these women from society prematurely with cancer of the cervix is a significant problem, and therefore we feel it is useful to make efforts to attempt to catch them with this Paps test in the very early and curable stages.

Nevertheless, if we take 500 adult men over the age of 40 who are cigarette smokers this is the number, according to the U.S. and British figures, that would develop cancer of the lung, and in comparison this is the impact over a ten-year period. Only one or two of these men would survive more than two years. The balance would all be dead within a two-year period of discovery of the actual lesion.

So you can see that if these people are removed prematurely by several years it is obviously going to have an impact on the economy of these people who are at the peak of their endeavours, the peak of their productivity, the peak of their family responsibility, and so on. If this is then all lost to society, or thrown as an additional burden on society, I think you can see it will have a major impact, and if this is significant why not this?

The next slide, please. This is a schematic presentation which brings into focus two or three of the problems. If you will look at the early stage over here I will just summarize what I have been saying. If this is the negative state, you might say, or the starting point, then this is the change that starts appearing on the average in the high school years, in the early years of smoking. We then start to get some of the leathery change, the

[Interpretation]

gens pour en arriver à former ce personnel. Il faut beaucoup d'échantillonnages du poulmon. Cela prend énormément de temps pour pouvoir dépister la tumeur, à ses débuts.

Diapositive suivante. Je crois que ce point montre l'importance que le problème causé par le cancer du poulmon a pour l'économie. D'un groupe de 500 femmes que vous pouvez trouver ici ou là, au moins deux souffrent, sans s'en douter, d'un cancer du col utérin. Pourtant la publicité les exhorte à se rendre chez le médecin pour y subir le test de Paps. Ce test s'apparente à celui dont nous parlions tout à l'heure. Une femme sur 250 environ, est atteinte de ce cancer. Tous semblent croire qu'il s'agit d'un problème économique, qu'il vaut la peine de s'y attaquer parce que le retrait prématuré de la société de ces femmes atteintes du cancer du col utérin est un problème d'importance. C'est pourquoi nous croyons utile d'essayer de dépister ces cancers le plus tôt possible.

Si nous prenons cinq cents hommes adultes de plus de 40 ans qui sont des fumeurs, tel est le nombre, selon les relevés américains et britanniques, de ceux qui seront atteints du cancer du poulmon, voyez quelle en serait la répercussion sur une période de dix ans. Un ou deux de ces hommes, seulement, vivra plus de deux ans. Les autres seraient tous morts dans une période de deux ans après la découverte de la lésion.

Par conséquent, si on élimine ces personnes prématurément, cela va sûrement avoir des répercussions sur l'économie, notamment dans le cas de ces individus qui sont vraiment au maximum de leur productivité, de leurs responsabilités familiales. Si la société perd tout ceci ou s'il s'en suit pour elle un fardeau additionnel vous pouvez facilement en voir les répercussions.

Voilà une présentation schématique qui montre deux ou trois des problèmes. Jetez un coup d'œil aux premières étapes pendant que je résume ce que je viens de dire. Si nous situons ici, le point de départ, voici le premier changement, qui survient généralement durant les années d'école secondaire. Puis les changements s'intensifient jusqu'à ce qu'ils prennent une importance plus considérable encore pour se transformer en cancer. Le can-

[Texte]

early cellular changes. We then get the change that is more significant, which we feel is starting to show the earliest changes toward cancer. Then we get cancer that is there but is not yet visible on an X-ray or it is not causing symptoms, and finally the usual stage at which it appears.

What we are interested in finding out from other studies now is what is the turning point, or is there one? Is there a point of reversibility or is there a point of no return, so to speak, in exposure? We feel that once it gets to this stage there is certainly no return. It is like adding a match to the fire that has already started. You do not need to keep adding a match from this point on because the fire continues by itself from that point. But up until this point we feel that what actually happens with cessation of this chronic irritation is that we reach a point of stagnation and perhaps there is a slight reversal.

Our studies are continuing and we are still not sure exactly how much reversal occurs or how much improvement there is. We know the black colour usually remains to a large degree; we know that the leathery change usually remains, but we do not know yet all of the answers. We have to find out more answers in this area.

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We do know that some people with average exposure will go through these changes rather quickly. Other family lines, because of genetic differences, will not go through these changes at all. Of course, the majority will still not go through these changes, as those of you who are aware of the fact know. It is just that those who do, create a very significant number in the population, from a medical point of view. So, we think it is a major problem nevertheless.

There are several situations related to this about which we cannot give all the facts at the moment. We are trying to find more of the answers, and what I have shown you this morning, I hope, will perhaps bring into focus in your own minds exactly what is happening in the individual lung in this type of exposure which results from chronic cigarette smoking. Thank you very much.

The Chairman: Thank you, Dr. Thompson. Are there any questions of Dr. Thompson? Mr. Osler.

Mr. Osler: Dr. Thompson, I will use my wife as a specific example to illustrate my question. Normally we live in Winnipeg, which has a dry climate in the winter time. My wife is a heavy smoker, and invariably gets a cough and it sounds just dreadful in the mornings all winter long. If she goes

[Interprétation]

cer y est mais il ne peut être décelé par les Rayons-X et n'entraîne aucun symptôme, puis il se manifeste.

Nous désirons savoir maintenant où se situe le point tournant, s'il y en a un. Y a-t-il un point où on peut revenir en arrière ou y a-t-il un point irrécupérable par suite de l'exposition? Nous estimons qu'à partir de cette étape, il n'y a plus de retour. C'est comme si nous ajoutions une autre allumette alors que le feu est déjà pris. A partir de cette étape-ci, peu importe, le feu continue tout seul. Mais à venir jusqu'à cette étape, nous croyons que ce qui se produit, avec la cessation de cette irritation chronique, c'est qu'il y a arrêt et peut-être même un léger recul.

Nos études se poursuivent, et nous ne sommes pas sûrs combien il peut y avoir eu amélioration. Nous savons que le noir demeure en grande partie et que le durcissement va demeurer, mais nous ne connaissons pas encore toutes les réponses. Il nous faut en connaître plus dans ce domaine.

Nous savons que certaines gens qui sont exposées normalement vont traverser toutes ces étapes rapidement. En raison des facteurs génétiques, d'autres n'auront pas du tout à subir ces changements. La majorité, de toute façon, devra passer par ces changements, comme vous le savez. Mais, ceux qui traversent ces changements sont une proportion considérable de la population, au point de vue médicale. Nous pensons donc qu'il s'agit là d'un problème essentiel.

Il y a donc plusieurs conjectures dont nous ne connaissons pas tous les faits pour l'instant. Mais nous essayons de les trouver. Et, ce que je vous ai montré ce matin a pu vous indiquer ce qui se passe dans le poumon lorsqu'il est exposé à l'usage chronique de la cigarette. Merci beaucoup.

Le président: Avez-vous des questions à poser au docteur Thompson? M. Osler.

M. Osler: Je vais utiliser un exemple précis pour illustrer ma question, celui de ma femme. Nous habitons Winnipeg où le climat est très sec en hiver. Ma femme fume beaucoup et, invariablement, elle attrape une toux qui semble épouvantable les matins d'hiver. Si elle va dans un climat humide ou sur la

[Text]

away to the coast or to a moist climate, it clears up almost 100 per cent. Living in Ottawa it is only about 50 per cent of what it was while living in Winnipeg. Are there other factors that cause these coughs? I have known people who have had dreadful coughs who seemed to get rid of them the moment they stopped smoking or very shortly thereafter.

Dr. Thompson: Obviously, there are other irritations which will produce coughing. There are many infectious diseases and many temporary situations which will produce an irritation which will result in coughing. If, however, as your wife indicates, she has a basic underlying damage which makes her more susceptible to the dry air that normally does not produce this in other people, then that is enough to tip her over the balance and cause these symptoms. Then if she gets better air or moister air she is just on the other side of the borderline, but it is just that she has a later years recognize that they are more susceptible. I think most heavy smokers in the later years recognize that very are more susceptible which do not resist as well any other can normally tolerate and they are more susceptible to any infection that is going around. They have more disability because of this because they have basically damaged tissues which do not resist as well any other factor that is added. Does that explain the situation?

Mr. Osler: Yes. One more question, Mr. Chairman. Have you any statistics on pipes and cigars or do they appear to be relatively harmless, and, if so, is it because you do not smoke them as much or because there is something different about them?

Dr. Thompson: Is this is not something that was covered by other evidence? I did not review all these figures. Our own studies have been concerned primarily with cigarette smokers. I am not prepared really to comment on the others at the moment because I would like to stick to the factual evidence that I have personally available.

Mrs. MacInnis (Vancouver-Kingsway): I am interested in your reference, Dr. Thompson, to parents who smoke and the resulting influence on children with regard to their smoking habits. Could you give us some more information on this?

Dr. Thompson: We use this type of approach: we thought that we were underestimating the intelligence of school children basically in a lot of the material that was

[Interpretation]

côte, sa toux cesse. A Ottawa, par exemple, c'est environ à moitié moins grave qu'à Winnipeg. Y-a-t-il d'autres facteurs qui causent cette toux? Je connais des gens qui avaient une toux épouvantable et qui ont réussi à s'en débarrasser en cessant de fumer.

M. Thompson: Il y a d'autres irritations, bien sûr, qui produisent la toux. Il y a même des maladies infectueuses et des situations temporaires qui peuvent provoquer une irritation et donc la toux. Si, dans le cas de votre femme, évidemment elle souffre de difficultés qui font qu'elle tousse dans un climat sec, ce qui n'est pas le cas pour d'autres. Ce facteur suffit à déduire son équilibre qu'elle retrouve dans un climat plus humide. Elle a une condition de base qui la rend plus sensible à la toux. La plupart des gros fumeurs admettent qu'ils sont plus sensibles aux petites variations qui n'affectent pas les autres et plus sujets à contracter les infections qui passent, parce que, fondamentalement, leurs tissus sont détériorés, ce qui s'ajoutent à d'autres facteurs. Ceci, je pense, explique la situation.

M. Osler: Une autre question, monsieur le président. Avez-vous des données statistiques au sujet de la pipe et du cigare, ou est-ce qu'on considère qu'ils sont plus sains? Dans ce cas, est-ce que c'est parce qu'on fume moins le cigare et la pipe ou qu'ils sont différents?

M. Thompson: Je pense que ceci a été traité par d'autres témoignages. Je n'ai pas eu tous les chiffres. Notre étude est centrée sur la cigarette. Je ne voudrais pas parler d'autre chose pour l'instant parce que je voudrais m'en tenir uniquement aux données que j'ai pu obtenir personnellement.

Mme MacInnis (Vancouver-Kingsway): Vous avez parlé, docteur Thompson, des parents qui fument et de l'influence sur les enfants. Pouvez-vous nous donner plus de renseignements à ce sujet?

M. Thompson: Oui. Nous avons utilisé cette façon d'aborder le sujet. Nous considérons que nous sous-estimons le degré d'intelligence des écoliers, dans la documentation que nous

[Texte]

being given to them, so we thought we would try, as a sampling, using this type of material to explain to them in a factual way what was actually happening. We got quite an interested response on the part of the school children. They ask very many intelligent questions when we do it for them personally. One of the comments that one of the children raised, and I had not thought of it before in this way, was that if they come from a home where there are smoking parents, there is often a dilemma when they go home with this information.

The parents can take one of two attitudes: they can say, "That is true and we believe it, but do not do as we do; do as we say",

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which is perhaps an unfortunate attitude in some respects because one does whatever is convenient and believes what one wants to believe.

The other approach has a similar effect in that just for convenience they say, "We do not believe that. You cannot believe that: it is not scientifically proven", and so on. They do not want to believe it and they say to their children "You cannot believe it. Do not believe everything you hear." We try to present only the evidence that is reasonably factual. So, if they take that attitude then, it is one of persuading their children that perhaps it is better to believe only those things that are convenient to believe and so on.

One of the children actually approached us and raised the question at one time that if statistically, as has been shown in so many studies, the children from homes where parents smoke are more susceptible to smoking, then there is an automatic heritage, you might say, from the parents to those children in that home. At least this is the way this high school student analysed it, that they automatically inherit from their parents, because of this activity or attitude, a decrease in their own life expectancy statistically of eight to ten years, which is an interesting way of looking at it. This is a "gift" from the parents to those children in a sense. If, however, these days children never do what their parents do or say, then perhaps the reverse might be true. I do not know.

Mrs. MacInnis (Vancouver-Kingsway): May I ask if tissue caused by smoking, such as we have seen, can be passed on to the children?

Dr. Thompson: No. The type of genetic structure that an individual family line has is passed on and some family lines are a little

[Interprétation]

leur distribuions. Nous avons donc établi un échantillon pour leur expliquer, au moyen de cette documentation, ce qui se passait. Et, nous avons eu des réactions intéressantes de la part des écoliers, des questions intelligentes lorsqu'on s'adresse à eux personnellement. Un des commentaires des enfants est que, si les parents fument à la maison, il y a souvent un dilemme lorsqu'ils retournent avec ces renseignements.

Il peut y avoir deux attitudes de la part des parents. Ils peuvent dire: «c'est vrai, mais ne faites pas ce qu'on fait: faites plutôt ce qu'on vous dit.» Cette attitude est peut-être désolante à certains égards mais chacun fait ce qu'il considère convenable et croit ce qu'il veut croire.

Une autre attitude, c'est celle de ceux qui, pour s'en sortir, disent: «Nous n'y croyons pas du tout. Ce n'est pas scientifiquement prouvé.» Ils ne veulent pas y croire, ils ne peuvent pas y croire. Nous essayons de présenter les preuves qui sont tout à fait établies sur les faits et évidentes. En prenant cette attitude ils essaient de persuader les enfants que c'est peut-être mieux de croire les choses qui nous conviennent.

En fait, un des enfants a soulevé la question, que si on démontre statistiquement que les enfants dont les parents fument sont plus portés à fumer, il y a donc un héritage automatique. En tout cas, c'est ce que l'étudiant du cours secondaire a conclu, qu'ils héritent de leurs parents, à cause de cette attitude, une espérance de vie statistique de huit ou dix ans plus courte. C'est un point de vue intéressant. En fait, c'est un espèce d'héritage légué aux enfants par leurs parents. Mais, si de nos jours, les enfants ne font jamais ce que les parents disent, alors le contraire est peut-être vrai. Je n'en sais rien.

Mme MacInnis (Vancouver-Kingsway): Au point de vue des tissus, est-ce que les dégâts causés par l'usage du tabac peuvent être transmis aux enfants?

M. Thompson: Non, la structure génétique d'une famille en particulier est transmise et celle de certaines familles sont plus sensibles

[Text]

more susceptible to the same degree of exposure than are others. This difference is passed on, but the changes that have actually occurred in the parents are not passed on. The child is born with a normal type of lung tissue.

Mrs. MacInnis (Vancouver-Kingsway): We had a witness here the other day from the Toronto Smoking Withdrawal Study Centre who indicated that from their findings there was quite a large number of people who apparently were unable to stop smoking—I think about a third of those they had dealt with. Obviously, the only answer that seems to be particularly relevant is that people should stop smoking altogether. Do you find from your own studies that it is impossible for people to really stop smoking? Are there people who cannot do it?

Dr. Thompson: Yes, I think in a practical sense there are. There are those who try very hard but just cannot seem to make it.

Mrs. MacInnis (Vancouver-Kingsway): Are there any chemicals or other compounds which will assist?

Dr. Thompson: This is a very involved subject. There are others who have had much more experience with this aspect than I have had myself. I would prefer not to get into that. There are some that claim some benefits. It is largely an individual thing. Individuals vary so much psychologically and in their dependancies and so on, that different programs have different effects on different individuals.

Mrs. MacInnis (Vancouver-Kingsway): I have just one more thing, and as a matter of fact my colleague may be intending to suggest it, but in case he does not, he was wondering if there would be any possibility, Mr. Chairman, of showing this to the House of Commons as a whole? Eventually, whatever we recommend will have to go into the House, and it seems to me that this is much more persuasive than statistics.

An hon. Member: Maybe in the Railway Committee Room.

The Chairman: Movie night in the House of Commons!

Mrs. MacInnis (Vancouver-Kingsway): Thank you very much.

Mr. Rynard: Mr. Chairman I would like to ask if any relationship has been proven between cigarette smoking and allergies?

Dr. Thompson: One of the reasons why I do not like smoking, apart from all the factual

[Interpretation]

au même degré d'exposition que d'autres, mais les dégâts causés chez les parents ne sont pas transmis. Les enfants naissent évidemment avec des tissus pulmonaires normaux.

Mme MacInnis (Vancouver-Kingsway): Un témoin du Centre de Toronto nous a dit l'autre jour que, d'après leurs constatations, un bon nombre de personnes, apparemment, ne peuvent pas cesser de fumer, le tiers de leurs patients, je crois. De toute évidence, la seule réponse qui semble pertinente c'est que les gens cesse purement et simplement de fumer. Mais, avez-vous constaté, d'après vos études, qu'il est impossible de vraiment cesser de fumer? Y-a-t-il des gens qui ne peuvent pas le faire?

M. Thompson: Oui. Je pense que, en pratique, il y a des gens qui ont vraiment essayer de cesser et qui n'ont pas pu.

Mme MacInnis (Vancouver-Kingsway): Y a-t-il des moyens chimiques ou autres qui puissent aider?

M. Thompson: C'est une question très compliquée. Il y en a d'autres qui ont beaucoup plus d'expérience que moi dans ce domaine. Je ne voudrais pas entrer dans les détails, ici. Certains prétendent qu'ils ont obtenu certains résultats. Ça dépend de l'individu, en général. Il y a des différences psychologiques entre chaque individu et différents besoins, de sorte que les résultats sont différents pour chacune des personnes.

Mme MacInnis (Vancouver-Kingsway): Je me demande s'il serait possible de montrer cela à la Chambre des communes? Ce que nous recommandons, évidemment, sera présenté à la Chambre. Et, je pense que cela est beaucoup plus persuasif que des statistiques.

Une voix: Peut-être dans la salle du Comité des chemins de fer.

Le président: Une soirée de projection à la Chambre des communes!

Mme MacInnis (Vancouver-Kingsway): Merci.

Mr. Rynard: Monsieur le président, je voudrais demander s'il y a un rapport entre l'usage du tabac et certaines allergies.

M. Thompson: Une des raisons pour lesquelles je n'aime pas fumer, en plus de ce

[Texte]

evidence, is that I, personally, am allergic to cigarette ashes and start sneezing and wheezing every time I get near them. There are people who are allergic to cigarette ashes, and it is a problem, but I do not think there is a relationship between the allergy and cancer. There is no relationship established in that direction.

Mr. Rynard: In other words, you do not believe that the person that is allergic or mildly allergic may be in the group that do deteriorate with cigarette smoking and develop cancer of the lung.

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Dr. Thompson: This is something we might eventually study along with the other things, but we do not really know the answer to your question.

Mr. Rynard: What I am getting at is that if you have an allergy you have a sensitivity.

Dr. Thompson: Yes.

Mr. Rynard: As I read that screen, what you were saying was that certain people did respond in a certain way to cigarette smoking and other people did not.

Dr. Thompson: No, I think there is a difference between sensitivity and susceptibility. I think there is still a difference there. I was talking more about susceptibility to develop certain changes, not a sensitivity or a reaction to them as soon as they occurred—which is an allergy. There are many smokers though who are allergic to the smoke. Actually you notice it in looking at them. They have the puffy eyes, they have the running eyes, there is stagnation of secretions in their nose and so on, and they feel much better when they do stop smoking. There are many of these in the clinic who feel immensely better when they have stopped smoking, and they did not realize some of the conditions they actually had were related to their smoking.

Mr. Rynard: That is the point that I was bringing up: there are people that do smoke who are allergic, they are allergic to the very thing they are using, and therefore I am asking whether those people that do respond in an allergic way would be improved and cleared up by stopping smoking.

Dr. Thompson: This we do not really know.

Mr. Rynard: The other thing I was wondering in your number 4 figure on the screen here, where you had the ones that were irreversible, has there been anything done

[Interprétation]

que j'ai dit, c'est que je suis allergique à la cigarette et je commence à éternuer et à respirer difficilement dès que je m'en approche.

Il y a des gens qui sont allergiques aux cendres de cigarette, mais je ne pense pas qu'il y ait de rapport entre cette allergie et le cancer; aucun rapport n'a été établi en ce sens.

M. Rynard: Autrement dit, vous ne croyez pas qu'une personne allergique ou légèrement allergique puisse être parmi ceux qui sont affectés par l'usage du tabac et qui sont atteints de cancer au poulmon?

M. Thompson: C'est une question que nous pourrions éventuellement étudier, car nous ne sommes pas encore fixés là-dessus.

M. Rynard: Mais si l'on est allergique, c'est qu'on est sensible à quelque chose.

M. Thompson: Oui.

M. Rynard: Vous avez dit que certaines personnes réagissaient d'une certaine façon et que d'autres ne réagissaient pas de cette façon-là.

M. Thompson: Non, je crois qu'il y a une différence entre sensibilité et susceptibilité. Je parlais plutôt de personnes qui étaient susceptibles de subir certains changements, même si elles réagissaient pas immédiatement à leur contact, ce qui serait une allergie. Il y a bien des fumeurs qui sont allergiques à la fumée; on le voit tout de suite rien qu'à les regarder; leurs yeux sont gonflés et larmoyants, leur nez sec, etc. et ils se sentent beaucoup mieux quand ils cessent de fumer. Bon nombre de nos patients en clinique se sentent beaucoup mieux quand ils arrêtent de fumer; ils ne se doutaient pas que certaines de leurs indispositions étaient imputables au tabac.

M. Rynard: C'est ce que je voulais dire: il y a des gens qui fument et qui sont allergiques au produit même qu'ils utilisent, et je voulais savoir si les gens qui réagissent de cette manière pouvaient se rétablir en arrêtant de fumer.

M. Thompson: Nous ne le savons pas vraiment.

M. Rynard: A propos de la quatrième diapositive, où l'on parlait de l'inéversibilité du phénomène chez certains, je voudrais savoir s'il a déjà été question de se servir d'un

[Text]

in this field in the use of a serum or vaccine where there are bacterial infections?

Dr. Thompson: No not yet.

Mr. Rynard: Do you feel that bacterial infections do play a part as a secondary invader and if they were treated could they be made reversible?

Dr. Thompson: We have had no evidence to indicate that yet but that is an interesting point that perhaps we should explore again.

Mr. Rynard: I was wondering when you were doing those smears if you were picking up the bacterial end of it, which would indicate the amount of infection, and have antibiotics been used.

Dr. Thompson: No we are not.

Mr. Rynard: Perhaps this is a field that could be investigated.

Dr. Thompson: You better join our staff.

Mr. Rynard: Thank you very much. I do not think I would be that big a help.

Is there anything to indicate the effect of cigarette smoking on the fetus—mentally or physically?

Dr. Thompson: I thought I had heard every type of question from these high-school students, but one sweet young sixteen year old stood up after one session and said, "If you are sixteen and you are pregnant and you are smoking cigarettes, does that mean that the baby is born with a craving for cigarettes". I assured her that there was no evidence to indicate that. She was pretty brave to ask the question, I suppose.

Mr. Rynard: There was an article that appeared in one of the American journals, I believe, that did say that the fetus from cigarette smoking mothers was smaller.

Dr. Thompson: Yes.

Mr. Rynard: I am wondering if there is any effect on the size of the brain, because if they are physically not developing then the brain is not developing fully either. I am wondering if there has been any research done on that?

Dr. Thompson: I do not know of any myself.

Mr. Rynard: Mrs. MacInnis asked if there was any way you could help these people. Has there been any work done on tranquilizers in an attempt to replace the cigarette?

[Interpretation]

sérum ou d'un vaccin contre les infections bactériennes.

M. Thompson: Non, pas encore.

M. Rynard: Ne croyez-vous pas que l'infection bactérienne est secondaire et que par un traitement on peut la rendre réversible?

M. Thompson: Nous n'avons pas de preuve pour dire cela, mais il serait intéressant de réexaminer la question.

M. Rynard: Quand vous examinez vos frottis, la quantité de bactéries vous permet-elle de déceler le degré d'infection et de prescrire des antibiotiques?

M. Thompson: Non.

M. Rynard: C'est une question à étudier.

M. Thompson: Voulez-vous faire partie de notre personnel?

M. Rynard: Non merci. Je ne crois pas que je servirais à grand chose. Est-ce qu'il y a quelque chose pour indiquer qu'il y a un effet mental ou physique de la fumée de cigarette sur le fœtus?

M. Thompson: Je pense que j'ai eu toute sorte de type de questions de ces jeunes filles, mais une jeune fille de seize ans m'a posé une question. «Si vous avez seize ans et que vous attendez un enfant, et que vous fumez, est-ce que votre bébé deviendra un fumeur?» Je lui ai dit qu'il n'y avait pas de preuves pour montrer que la cigarette avait un effet sur le fœtus.

M. Rynard: Je me demandais si une mère qui fume peut causer une espèce de manque de développement du cerveau, si l'on veut, chez l'enfant.

M. Thompson: Oui.

M. Rynard: Est-ce qu'il y a des recherches quelconques qui ont été faites à ce sujet?

M. Thompson: Je n'en connais aucune.

M. Rynard: M^{me} MacInnis a demandé tout à l'heure s'il y avait un moyen d'aider ces personnes. A-t-on étudié certains tranquillisants qui remplaceraient la cigarette?

[Texte]

Dr. Thompson: Yes, but they use so many different approaches that, again, I think that the family physician is best able to assess his own patient sometimes in this respect—especially those who have extreme difficulty. We have not explored that in detail in the smoking withdrawal clinic, because this becomes quite involved. I cannot really answer that.

Mr. Yewchuk: About three months ago I saw an article in a British journal which indicated that there was a higher incidence of mental retardation of most mothers who were heavy smokers during pregnancy. Have you any information on that?

Dr. Thompson: No. Again, these points are getting just a little bit out of the line where I feel perfectly at home. I do not really know.

Mr. Yewchuk: Would you care to make a comment?

Dr. Thompson: I think it is possible but I do not really know.

Mr. Foster: Dr. Thompson, I was interested in your slides which showed that cancer often occurs very close to the bronchial rather than

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out in the lung tissue. Someone suggested at one of our previous meetings that perhaps cancer was caused partially by the gases rather than the carbon particles—the tars. Do you think that the gases may be more important than the carbon—because the fact of carbon in the tissue does not necessarily mean actual cancer?

Dr. Thompson: We are not in a position yet to separate the components. What we are looking at is, more or less the various stages in progress. We are not in a position to correlate these with any specific component or any specific factor. We have only noticed where they occur characteristically, how they occur, in what sequence they occur, and this would certainly indicate that it is a combination probably of physical and chemical irritation because it is greatest right at those points. It is in the central areas of the lung where you get most of this change in the membrane.

Mr. Foster: And it is always adjacent to the bronchial?

Dr. Thompson: Yes. It is in the lining, actually, the air passageways. Most of these cancers do develop in the lining of the air passageways.

Mr. Foster: You mentioned that 33 per cent of persons who are heavy smokers at 35

[Interprétation]

M. Thompson: Oui, mais ils utilisent des moyens tellement différents. Il me semble encore que c'est le médecin de famille qui peut traiter le problème. Surtout dans les cas aigus. Nous n'avons pas étudié ces cas dans notre clinique, ceci devenant trop complexe. Je ne peux pas vraiment répondre.

M. Yewchuk: Il y a trois mois environ, j'ai lu un article dans une revue britannique qui indiquait qu'il y avait une plus haute incidence de l'arriération mentale chez les enfants nés de mères qui ont fumé durant leur grossesse. Avez-vous des commentaires?

M. Thompson: Je pense que ceci sort de mon domaine ou des faits que j'ai voulu exposer ici. Je ne sais pas vraiment.

M. Yewchuk: Voulez-vous faire un commentaire?

M. Thompson: Je ne le sais vraiment pas.

M. Foster: J'étais intéressé à vos diapositives qui nous ont montré que le cancer attaque plutôt les bronches plutôt que les tissus pulmonaires. Quelqu'un a avancé auparavant que le cancer serait causé par les gaz plutôt que par les particules de carbone, le goudron. Croyez-vous que le gaz peut être plus nocif que le carbone, parce que ce carbone dans le tissu n'est peut-être pas la cause du cancer?

M. Thompson: Nous ne sommes pas en mesure de séparer les éléments. Nous cherchons simplement à voir les diverses étapes. Nous ne sommes pas en mesure d'établir des relations entre les divers éléments, les divers secteurs. Nous savons où se produit l'effet, comment il se produit, dans quel ordre, et il y a évidemment probablement une combinaison physique et chimique de tous ces éléments dans la région centrale des poumons, et il y a une réaction en chaîne probablement.

M. Foster: Est-ce toujours adjacent aux bronches?

M. Thompson: Oui, c'est dans la membrane que l'on trouve le plus de cancer, dans les passages empruntés par l'air.

M. Foster: Une autre question: vous avez dit que 33 p. 100 des gens qui sont de gros

[Text]

would be dead by the time they are 65. What percentage of those that did not smoke would you normally expect would be dead.

Dr. Thompson: I think that was shown on the same graph. I have forgotten the figure.

Mr. Foster: Is it correct that the percentage of lung cancer in people that smoked was something like 90 per cent?

Dr. Thompson: Yes.

Mr. Foster: Now of the other 10 per cent, what percentage would be secondary?

Dr. Thompson: No, these are, again, primary cancers that will develop in lung tissues. Now I think it is important to understand two points. These are often confused. Those cancers of the lung that develop in non-smokers are usually a particular type which you will recognize in any group of individuals—smokers and non-smokers mixed in any sort of population. This is probably the basic type of cancer that would develop if no one ever smoked, and you would still have a certain proportion of cancers in the lung just as you get them in the skin, in the stomach, as you get them in the bowel and everywhere else. Every organ is susceptible to a certain number of cancers, and the lung is no exception.

It is this type which has a particular microscopic makeup that we see, and we recognize it can occur in both men and women who are non-smokers, but it is only a small proportion of the total. However, on the other hand, to indicate the relationship the other way around, the types that we do see develop only after these changes in this epithelium or lining membrane that I mentioned, when it is converted to a completely different type, and we never see this type of cancer in the non-smoker. It is always the type that we see in the smoker, and it is a type that we see, as I say, in 90 per cent of all these cancers. So that both ways that we look at it indicate that there is a group that will occur in non-smokers, but we do not get the type that does occur in smokers generally in the non-smokers.

Mr. Foster: In other words, the 10 per cent in respect of non-smokers are all primary.

Dr. Thompson: Yes. Now we are excluding secondary cancer. That obviously occurs but we are excluding that.

Mr. Foster: Yes. Do you have any indication that cancer of the lung may be associated with a virus?

[Interpretation]

fumeurs à 35 ans mourraient à l'âge de 65 ans. Quel serait le pourcentage de mortalité chez les gens qui ne fument pas?

M. Thompson: Ceci était indiqué, je pense, sur le même graphique. Je ne me souviens pas exactement.

M. Foster: Le pourcentage des gens qui sont atteints du cancer du poumon, est de 90 p. 100?

M. Thompson: Oui.

M. Foster: Quelles sont les causes du 10 p. 100 restant?

M. Thompson: Il s'agit du cancer dans les tissus pulmonaire. Il faut distinguer que ces cancers qui, chez les non fumeurs, sont des cancers d'un type particulier qu'on peut reconnaître chez chaque individus, fumeurs ou non. Il s'agit d'un type de cancer qui est le type fondamental, même si la personne n'a jamais fumé. C'est un type de cancer qu'on retrouve dans l'estomac, dans l'intestin, la peau, de toute personne qui est susceptible d'avoir ce cancer, et le poumon, évidemment, ne fait pas exception.

Évidemment, nous reconnaissons que ce genre de cancer peut se produire chez les femmes qui ne fument pas. Mais seulement c'est une petite proportion du total. Alors que d'autre part, nous avons indiqué une relation qui apparaît seulement quand se produit cette espèce de modification du tissu de la membrane, et nous ne voyons jamais ce type de cancer chez le non-fumeur, mais seulement chez le gros fumeur dans une proportion de 90 p. 100, en tout cas de tous ces cancers-là. Quelle que soit la façon d'envisager la question, il y a un groupe de cancers qui apparaîtra chez le gros fumeur et non chez la personne qui ne fume pas.

M. Foster: En d'autres mots le 10 p. 100 des non-fumeurs est atteint d'un cancer primaire.

M. Thompson: Nous excluons évidemment le cancer secondaire, il s'agit toujours d'un cancer primaire.

M. Foster: Avez-vous un certain nombre d'indications pouvant démontrer que le cancer du poumon peut être dû à un virus?

[Texte]

Dr. Thompson: There is one type, experimentally on animals, that has been produced in various tissues which can be induced by a virus, but again it is an odd type and bears no relationship to the type that we are discussing here. We feel that there is no evidence in what we are talking about today to indicate that a virus is involved.

Mr. Foster: In connection with this very graphic illustration, this comparison between two out of five hundred women who could expect cancer of the cervix as compared to 21, it seemed to me you qualified the statement about the 21. Was it 21 men out of a

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group of 500 over the age of 40 that would show up over a 10-year period or just at any one given time.

Dr. Thompson: This is an average figure that you might relate this way by using the British and the U.S. public health figures. I think anyone can produce that figure if he really analyzes the figures that were produced. As a matter of fact I think that is a bit conservative. I do not want to get involved in all the detailed statistics today but we worked this out on the basis that over a 10-year period this is the number that we would expect in the group over 40 were cigarette smokers who would develop cancer of the lung. It does not mean that they would all die of cancer of the lung in this period but that we could recognize that they had cancerous tissue in their lungs one way or another in that 10-year stage.

Mr. Foster: Just to compare it with cancer of the cervix, would these two women show up over a 10-year period or would this be in any group?

Dr. Thompson: No, that is in any group walking around but the reason that we talk about it that way is that we find that it takes about 10 years for the type that is in the woman to pass from that stage to the next stage, so that over a 10-year period these two women would be walking around in the same way, you might say.

Mr. Foster: Oh, I see.

Mr. Mather: Mr. Chairman, like many others here I was very much impressed by the Doctor's presentation; it was a very graphic one. I have in mind your information as to the inability of x-rays to come through early enough to be of service to people who may be

[Interprétation]

M. Thompson: Il y a eu un type d'expériences qui montraient des tissus. C'est un type assez bizarre qui peut laisser croire qu'il peut-être déclenché par un virus. Mais nous croyons qu'il n'y a pas de preuve pour indiquer qu'un virus est en cause ici.

M. Foster: Une autre question au sujet de cette illustration très graphique. Cette comparaison entre les 2 femmes sur 500 susceptibles d'être victime du cancer du cervix et les 21, il me semble que vous avez qualifié les 21. Était-ce 21 hommes d'un groupe de 500 de plus de 40 ans qui seraient dépistés au cours d'une période de 10 ans, ou simplement à n'importe quel moment.

M. Thompson: C'est une moyenne qu'on peut relier de cette façon en utilisant les statistiques des ministères de la Santé britanniques et américains. Je pense que n'importe qui peut fournir ce chiffre s'il analyse les données fournies. En fait, je pense que c'est un peu conservateur. Je ne veux pas entrer dans tous les détails de ces statistiques aujourd'hui mais pour nos travaux, nous avons admis que sur une période de 10 ans, c'était le chiffre auquel on pouvait s'attendre dans le groupe des fumeurs de cigarettes de plus de 40 ans qui seraient victimes du cancer. Cela ne signifie pas que toutes ces personnes mourraient de cancer du poumon au cours de cette période, mais que nous pourrions reconnaître chez eux la présence de tissus cancéreux dans leurs poumons d'une façon ou d'une autre au cours de ces dix ans.

M. Foster: A titre de comparaison avec le cancer du cervix, ces deux femmes seraient-elles dépistées au cours d'une période de 10 ans et cela serait-il dans n'importe quel groupe?

M. Thompson: Non, ce serait dans n'importe quel groupe, la raison pour laquelle nous en parlons ainsi, c'est parce qu'il faut environ 10 ans pour que l'évolution passe d'un stade au suivant.

M. Foster: Ah, je vois.

M. Mather: Monsieur le président, comme bien d'autres ici, j'ai été impressionné par la présentation du docteur Thompson, et tous ses graphiques. Je songe maintenant à votre déclaration sur l'inutilité des rayons-X pour arriver à dépister à temps les personnes qui

[Text]

developing or going through this change in regard to lung cancer development. You say that people who go and get an x-ray perhaps come away reassured and that it may not be too realistic a situation in regard to their health because the x-ray, at the early stages at least, is not able to show what is developing.

Dr. Thompson: They have the reassurance that they do not have an obvious cancer mass there. That is about the only reassurance they have. They certainly have no assurance that they do not have an early stage.

I did not go into the details here but the best project is one that was undertaken by Dr. Boucot in Philadelphia. They actually took a TB chest x-ray survey and they found that they were getting so many lung cancers, so many more than they were new cases of TB, that they decided to convert the survey and turn it into a lung cancer survey. They took all the men over the age of 40 who were heavy cigarette smokers and x-rayed them every three months if possible, and at the worst every six months, to try to detect it in the earliest possible stages.

In the preliminary report they found 26 new cases this way that had been negative on one x-ray but where the next x-ray in the sequence had shown something suspicious, so that the earliest possible detection is by radiologic means. They found that out of that group of 20-odd cases, despite the fact that they were all treated in the earliest possible stages that way, only two of them survived two years; so it is right back to the normal level—to the usual level, I should say. They carried this on for several more years and the figures remained in exactly the same ratio. I do not have the final figures but they certainly felt that x-ray screening, if you like, for curable lung cancer was of very, very marginal benefit.

Mr. Mather: I think you said something to the effect that the microscopic and the smear treatment would be very difficult to utilize among a large number of people.

Dr. Thompson: It is very useful for the cervix in the women. This is because the cervix is a small area. It is easily accessible using a speculum. A gynaecologist can easily see all of the cervix. He can take an adequate sampling of that and we know what we are dealing with. If it is negative, it is negative. If it is positive, it is positive and we know that it relates to what is in that woman.

If we have to deal with sputum we do not know whether a sample that is coughed up one morning comes mainly from here, here,

[Interpretation]

pourraient être dans le stade d'évolution vers le cancer du poumon. Vous avez dit que les gens qui passent un examen aux rayons-X ressortent peut-être rassurés mais qu'évidemment ce n'est pas très réaliste au sujet de leur santé, puisque les rayons-X, au début en tout cas, ne permettent pas de détecter s'il y a un cancer ou non.

M. Thompson: La seule certitude qu'ils aient c'est de ne pas avoir un cancer déjà avancé. C'est à peu près leur seule certitude. Peut-être sont-ils dans un premier stade?

Mais je ne suis pas allé dans les détails ici, le meilleur projet c'est celui entrepris par un médecin de Philadelphie, le Dr Boucot. Son service radiographique faisait une étude des tuberculoses pulmonaires, mais ils ont dépisté tant de cancer du poumon, tellement plus que de tuberculose qu'il l'on convertie en une étude sur le cancer du poumon. Ils ont radiographié tous les trois mois, au pire tous les six mois, tous les grands fumeurs de plus de 40 ans, pour essayer de détecter le cancer à son stade le plus précoce.

Le rapport préliminaire montre que 26 cas, négatifs au premier examen indiquaient quelque chose au deuxième. Ceci indique donc que les rayons-X permettent le dépistage le plus précoce. Ils constatèrent que dans cette vingtaine de cas qui avaient été dépistés, deux seulement survécurent deux ans en dépit du traitement très précoce; ceci nous ramène donc au niveau normal, je devrais dire au niveau habituel. Ils continuèrent cette étude pendant plusieurs années et les chiffres restèrent dans les mêmes proportions. Je n'ai pas les résultats définitifs, mais ils ont sans doute conclu que les rayons-X ne donnaient que très, très peu de résultats, pour le dépistage du cancer du poumon à un stade curable.

M. Mather: Vous avez dit que le dépistage par étude microscopique de frottis serait très difficile à utiliser sur une grande échelle.

M. Thompson: Il est très utile dans le cas du cancer du cervix chez la femme, car il ne s'agit que d'une petite surface accessible au moyen d'un spéculum. Un gynécologue peut aisément voir tout le cervix. Il peut prendre des échantillons probants et ensuite nous savons ce que nous analysons. Si c'est négatif, c'est négatif. Si c'est positif, c'est positif et nous savons à quoi cela se rapporte.

Par contre, lorsqu'il s'agit d'expectoration, on ne sait pas d'où vient l'échantillon craché le matin. Il peut venir de n'importe où, généré,

[Texte]

or here, or wherever it is. It may be a mixture, as it usually is. We find that as a minimum we have to take about five samples to get even a representative sampling that is reasonable. Then we have to take three or

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four slides from each sample to get a representative sampling of that. The technician has to prepare all these and screen them all, so it is extremely time-consuming and very, very costly to try to detect all these cases this way.

If we take the very highest risk cases with borderline suggestions and symptoms and try to pick up evidence that they do have an early lesion, they can then probe a little more extensively with a special instrument with a little light on the end of it and see if there is one developing and find where it is after we tell them there might be one there. This is what we are trying to do in those very early cases but it is very, very involved. You also produce a new group of individuals such as we did in one survey where we told them that they did have signs of early cancer and, of course, they became extremely spastic and nervous, although I must say that this was a critical point because every one of them stopped smoking.

Relating it to the individual certainly had an impact but then they started to worry, and worried and worried because they could not find where it was. It was so early that it had not even shown up in that growth stage. It was not even the size of a dime. This created a new group that we had to keep following and rechecking, so it is a rather unsatisfactory program all round. It is very, very expensive and difficult.

Mr. Mather: Having that in mind and considering the difficulty of detection using either x-ray or the other method you have, and also the rather depressing record of cures of people who have been caught in time to effect a cure from lung cancer, do we not come back so far to the old idea that basically prevention rather than cure is the thing that we should be looking for?

Dr. Thompson: I think that is the obvious conclusion, Mr. Mather, as it is so difficult getting at the other end. If we can do something at the first end that is much more productive.

Mr. Mather: Showing your slides to high schools and to students is part of an educational or preventive program.

[Interprétation]

ralement c'est un mélange. Nous avons constaté qu'il fallait prendre au moins cinq échantillons pour avoir un bon échantillonnage. Ensuite, il faut faire trois ou quatre diapositives de chaque échantillon pour avoir une représentation raisonnable. Le technicien doit préparer tout ceci et étudier tous les résultats, tout ça est donc très long et très, très coûteux. D'où la difficulté de ce genre de dépistage.

Si nous nous limitons aux cas les plus probables, présentant des symptômes on peut utiliser un instrument spécial avec une petite lumière au bout qui permet de voir s'il y a une lésion et où elle se situe. C'est ce que nous essayons de faire dans ces cas pris tôt mais c'est ennuyeux pour le patient. On produit un nouveau groupe d'individus, comme nous avons fait dans une étude, nous leur avons dit qu'ils avaient des symptômes de cancer, ces personnes-là devinrent très nerveuses et sujettes à des spasmes, bien que je doive dire que c'était un point critique, car toutes cessèrent de fumer.

Évidemment dire cela à un individu a une influence, mais ensuite il commence à se faire du souci, à se faire du souci parce qu'il ne pouvait pas prouver où c'était. C'était tellement tôt qu'il n'avait pas commencé à apparaître au stade de croissance. Il n'était même pas de la grosseur d'une pièce de dix sous. Cela créa un nouveau groupe qu'il fallut suivre et vérifier, c'est donc un programme qui donne peu de satisfaction. C'est très très difficile et coûteux.

M. Mather: Ceci en tête, et considérant la difficulté de la détection, soit par les rayons-X, soit d'une autre façon, et également le peu de résultat des traitements des cas qui ont été pris à temps pour soigner le cancer du poulmon, n'en revient-on pas à la vieille idée qu'il vaut mieux prévenir que guérir?

M. Thompson: De toute évidence, monsieur Mather, c'est si difficile de traiter que si nous pouvons faire quelque chose pour prévenir ce sera beaucoup plus productif.

M. Mather: Lorsque vous montrez vos diapositives dans les écoles et aux étudiants, c'est dans le cadre d'un programme d'éducation ou de prévention.

[Text]

Dr. Thompson: Yes. We are not trying to force anything on anyone; we are just trying to present the facts to them. We are trying to give them information that is not otherwise available. Certainly TV ads do not allude to this at all.

Mr. Mather: No.

Dr. Thompson: We are just trying to give them information that is not otherwise available in a very small way and then they can make up their own minds. If they want to take certain hazards in today's life that is up to them—as long as they know what they are and as long as they have information on which they can make a valid decision at a time before they are overwhelmed by impressions that they get from others around them.

Mr. Mather: Thank you. There is just one other point. Mrs. MacInnis and I, and I am sure perhaps other members, found the slides on the United Kingdom facts and figures very arresting and tangible. I do not know if this or similar information is contained in the world conference book that we have. If not, could those figures be left with the Committee or made available to us—the ones in the slide about the percentages?

Dr. Thompson: Yes, I think those are included in all these surveys.

Mr. Mather: Thank you, Doctor.

The Chairman: Mr. McBride.

Mr. McBride: Mr. Chairman, on the basis of the evidence of previous witnesses, one of the great mysteries to me is the fact that cancer is caused by cigarette smoking but that the people who smoke pipes and cigars apparently have an even better longevity record than do non-smokers. Would there be any connection between this fact and the evidence that was new this morning—to me at least—that cancer does not originate down in the extremities of the bronchial tree but rather up in the trunk section of the main air passages, and would this therefore mean that pipe and cigar smokers would deposit as much substance—I hesitate to use the name because I am sure it is a complex name—let us just say carbonic substances, down in the tissue as with cigarette smokers?

In other words, in a post mortem if you took the lungs of a heavy pipe smoker like Mr. Osler here and a cigarette smoker, you would have lungs that roughly looked the same. Tissue would be as black in one as in

[Interpretation]

M. Thompson: Oui. Nous ne cherchons pas à forcer qui que ce soit; nous essayons seulement de leur présenter les faits. Nous essayons de leur donner des renseignements qui ne sont pas disponibles d'une autre façon. Les annonces de télévision ne font sûrement par allusion à cela.

M. Mather: Non.

M. Thompson: Nous cherchons à leur donner des renseignements qui ne sont pas disponibles autrement et nous les laissons se décider. S'ils veulent risquer, eh bien, cela les regarde, du moins savent-ils ce qu'ils risquent. C'est ce qu'il faut, leur donner les renseignements avant qu'ils ne soient complètement dominés par les impressions des autres.

M. Mather: Merci. Juste une autre question. Madame MacInnis et moi-même, d'autres députés aussi sans doute, avons trouvé les diapositives sur les faits et les chiffres du Royaume-Uni très frappantes et très tangibles. Je ne sais pas si ces renseignements, ou des similaires, se trouvent dans le livre sur la conférence mondiale que nous avons. S'ils n'y sont pas, pouvons-nous vous demander de remettre ces chiffres au Comité? Ceux qui se trouvent sur la diapositive avec les pourcentages?

M. Thompson: Oui, je pense qu'ils sont inclus dans ces études.

M. Mather: Merci beaucoup.

Le président: Monsieur McBride.

Mr. McBride: Compte tenu des témoignages antérieurs que nous avons eus, un des grands mystères à mon sens, c'est que le cancer soit dû à la cigarette, mais que les gens qui fument la pipe ou le cigare, apparemment, ont une longévité supérieure à celle des non-fumeurs. Je me demande s'il y a rapport entre ce fait et celui que nous avons appris ce matin, à savoir que le cancer ne commence pas dans l'extrémité de l'arbre des bronches, mais plutôt dans le couloir principal du passage de l'air, et est-ce que cela voudrait dire que les fumeurs de pipe et de cigare déposeraient autant de substance, je n'aime pas dire le nom parce qu'il est, j'en suis sûr, complexe, disons carbonnées dans les tissus que les fumeurs de cigarettes.

Autrement dit, si, à l'autopsie, vous analysez les poumons d'un gros fumeur de pipe, comme M. Osler, et ceux d'un gros fumeur de cigarettes, vous auriez à peu près les mêmes résultats. Les tissus pulmonaires seraient

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[Interpretation]

the other but in fact statistics now suggest that so long as Mr. Osler smokes a pipe he is not in danger of lung cancer. Is the reason for it that it has something to do with the quality of the smoke that goes through the main air passage that is basically different in cigarettes? Is that the answer, or what is it?

Dr. Thompson: Yes, they are starting to get facts before I comment on these things. We do not have enough information in our own studies on cigar and pipe smokers yet. One thing we know so far is that they are not by any means immune to these early stages. There is some irritation there.

Mr. McBride: This leathery condition.

Dr. Thompson: Yes, they are starting to get some of that. The factor that is involved here is the amount of inhalation multiplied over and over, time after time, day after day and year after year. It is quite different on the average in pipe smokers and in cigarette smokers; the temperature of the smoke, the type of materials in the smoke, the chemical makeup, and so on. There are several variables which over the years have been used to explain these differences. I am not involved in a direct assessment of these differences yet. We are getting into this more though, and I think a few years from now we might have more pertinent answers, but personally I do not think they are entirely immune to changes. Theoretically it is unreasonable and our findings so far indicate that they are not.

Mr. McBride: There is still a big question mark here because is it not obvious that the amount of inhalation by a pipe smoker would be greater than that of a non-smoker? This is nonsensical, and yet the statistics to date suggest that pipe and cigar smokers are as well off as non-smokers.

Dr. Thompson: This is a statistic which I think requires a great deal more analysis.

Mr. McBride: To be sure I have it correctly, there is an equal amount of discolouration in the lungs of a pipe or cigar smoker as there is in the lungs of a cigarette smoker. Is that correct?

Dr. Thompson: It does not take long to produce black, and after that it is really a question of adding black to black. So, with a

aussi noirs dans les deux cas. Mais les statistiques semblent montrer que, tant que M. Osler fume la pipe, il n'a pas à craindre le cancer du poulmon. Est-ce que cela a quelque chose à voir avec la nature de la fumée qui traverse les bronches?

M. Thompson: J'aimerais avoir des faits très précis avant de faire des commentaires sur ce sujet. Nous n'avons pas assez de renseignements sur les fumeurs de pipe ou de cigares. Une chose que nous savons cependant c'est qu'ils ne sont pas immunisés contre les premiers stades. Ils montrent également des signes d'irritation.

M. McBride: Ce durcissement des tissus.

M. Thompson: Oui, ils y sont sujets également. Le facteur en cause ici, c'est la quantité inhalée jour après jour, mois après mois, année après année. C'est assez différent dans le cas des fumeurs de pipe et dans le cas des fumeurs de cigarettes. La température de la fumée, les genres de substances qu'il y a dans la fumée, la composition chimique, etc., sont différents. Il y a plusieurs variables qui ont été utilisées au cours des années pour expliquer ces différences. Je ne m'occupe pas directement de l'étude de ces différences. Nous commençons de plus en plus à les étudier et je pense que dans quelques années, nous aurons peut-être des réponses plus concrètes. Je ne pense pas que les fumeurs de pipe soient totalement immunisés aux changements. Théoriquement, c'est illogique et les constatations faites jusqu'ici indiquent que ce n'est pas le cas.

M. McBride: Il y a encore un gros point d'interrogation ici, car, n'est-il pas évident que la quantité de fumée inhalée par un fumeur de pipe est plus grande que celle inhalée par un non-fumeur? Cela paraît illogique, et pourtant les statistiques indiquent, à ce jour, que les fumeurs de pipe et de cigares sont aussi bien portants que les non-fumeurs.

M. Thompson: Il s'agit là d'une donnée statistique qui a besoin de beaucoup plus d'analyse.

M. McBride: Voyons si j'ai bien compris. Il y a une décoloration égale du poulmon des fumeurs de pipe et de cigares et du poulmon des fumeurs de cigarettes. Exact?

M. Thompson: Il ne faut pas tellement de temps avant de trouver la couleur noire; après cela, ce n'est plus qu'une addi-

[Text]

certain amount of exposure, no matter which way you get it, you can get a black lung. It is just that the cigarette lung has many, many more layers, you might say, of black added. You can reach black fairly soon.

By the way, there are other things that will produce black lungs as well. You realize that miners, and particularly coal miners—anyone working in a very sooty atmosphere—will also have black lungs. It is just that any condition in which there is a tremendous exposure to carbon material that is going to be breathed into the lung will be deposited there, so it is natural to expect it in cigarette smokers—or any smoker, for that matter—and it does occur. There is nothing strange about it. It is a reasonable expectation.

Mr. McBride: Therefore this Committee should conclude that we ought to be very skeptical of the statistics which state that cigar and pipe smokers get off scot-free. Should we not have conclusive evidence in this area?

Dr. Thompson: I think even in that area you have very confusing statistics so far. They are not all on the side that you mentioned.

Mr. Howe: Mr. Chairman, I was rather interested in Dr. Thompson's comment about filters. You maintain that most of the problem is from irritation.

Dr. Thompson: Yes. I am not prepared to answer how much of that irritation is chemical and how much is a physical type of irritation from the smoke.

Mr. Howe: I was wondering if the content in the smoke—whether there is more tar or nicotine—increased the irritation. Have you found that to be so?

Dr. Thompson: No, it is a very minor and separate issue within this major issue that we want to explore. We have not developed enough yet. Obviously there are several other things we can do as further ramifications of these studies, although we have not tackled that particular problem.

Mr. Howe: In your studies on withdrawal with respect to people that you are trying to assist, have you made an examination of the contents of the cigarette smoke to find out whether or not it is actually the nicotine that develops the drug addiction type of habit?

Dr. Thompson: No. Dr. Wynder and several other people in other countries have done a

[Interpretation]

tion de noir sur noir, de sorte, qu'après un certain temps d'exposition, par n'importe quel moyen, vous avez un poumon noir. On pourrait dire, que dans le cas du fumeur de cigarettes, c'est seulement qu'il a beaucoup plus de couches de noir.

Remarquons en passant que d'autres choses peuvent produire des poumons noirs. Vous réalisez que les mineurs, et notamment les mineurs de houillère, et tous ceux qui travaillent dans une atmosphère chargée de matières carbonées auront des poumons noirs. Dans tous les cas où l'individu devra inhaler un air chargé de matières carbonées, un dépôt se produira dans ses poumons, c'est le cas des fumeurs de cigarettes comme de n'importe quel fumeur cela n'a rien de drôle, c'est là une hypothèse raisonnable.

M. McBride: Par conséquent, notre Comité devrait conclure que nous devrions être quelque peu sceptiques au sujet des statistiques qui déclarent que les fumeurs de pipe et de cigares s'en tirent indemnes. Même dans ce domaine, n'avons-nous aucune preuve définitive?

M. Thompson: Je pense que même en ce domaine, les statistiques peuvent être très variables. Elles ne corroborent pas toutes le point de vue que vous avez mentionné.

M. Howe: Monsieur le président, j'ai été très intéressé par les commentaires du docteur Thompson au sujet des filtres. Vous maintenez que l'essentiel du problème résulte de l'irritation.

M. Thompson: Oui. Je ne suis pas prêt à dire quelle proportion de l'irritation est chimique et quelle proportion est une irritation physique due à la fumée.

M. Howe: Je me demandais si la teneur de la fumée en goudron ou nicotine augmentait l'irritation. Avez-vous constaté cela?

M. Thompson: Non, il s'agit d'une question secondaire et indépendante, à l'intérieur de la question principale que nous voulons étudier. Nous ne sommes pas encore assez avancés. Il y a évidemment d'autres questions que nous pourrions étudier. Cependant nous n'avons pas encore abordé ce problème particulier.

M. Howe: Au cours de vos études sur l'habitude de fumer, qui vous ont conduit à aider les gens désireux de cesser, avez-vous examiné les composants chimiques de la fumée pour savoir si c'était la nicotine ou non qui créait le besoin de fumer?

M. Thompson: Non, le docteur Winder et plusieurs autres dans d'autres pays ont fait

[Texte]

lot of this work and their evidence is available. It is very, very involved, though.

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Mr. Howe: I was rather interested in the hearings that have been held in the United States. This one is for the year 1967. They make the rather interesting comment here that reduction of the nicotine content may well produce the very result we are trying to avoid; the smoker may increase his cigarette consumption in a search for nicotine satisfaction. I thought it was rather an interesting comment to make, that the more nicotine in the cigarette the more satisfying it is to the smoker, so if a filter takes out more of the nicotine it may not reduce cigarette consumption.

Dr. Thompson: My theory is that as long as there is smoke there, which obviously has some physical irritants in it, there is still going to be some problem and if you remove all the smoke, then it is really no longer worthwhile. I feel it is an important distinction to make; that it is not just a single chemical irritant that is deposited in the tissues that we are most concerned about.

Mr. Howe: Yes. These comments are quite interesting. They even go into the fact that the ingredients that are used in pesticides get into the tobacco plant and may contain some of the components which are injurious. Do you know if there are any particular studies going on in Canada with regard to this at the present time?

Dr. Thompson: I am not aware of any.

Mr. Howe: Thank you very much.

Mr. Haidasz: Mr. Chairman, for further clarification of the members of our Committee, I would like to ask if our witness this morning can tell us, first of all, if cigarette smoking is primarily associated only in causing bronchogenic carcinoma, and whether there are other sites of carcinoma which are attributable to cigarette smoking.

Dr. Thompson: There are two situations which are obvious. One is the point of impact of this initial irritation, which is obviously the lining of the lungs, where most of these cancers develop. Certainly that is true, this is what we have been discussing. The other is where else could these materials possibly concentrate in the body? Those that are leached away as irritants, that are dissolved in the tissues and get into the fluids, and so on, and

[Interprétation]

des travaux là-dessus. Les résultats sont disponibles, mais ils sont très très complexes.

M. Howe: J'ai été très intéressé par les études faites aux États-Unis. Voici un rapport de 1967. On peut y lire ce commentaire, la réduction de la teneur en nicotine peut produire exactement les résultats que l'on veut éviter; le fumeur peut accroître sa consommation de cigarettes pour satisfaire son besoin en nicotine. Il me semblait que c'était là un commentaire assez intéressant. Plus il y a de nicotine dans la cigarette, plus l'envie de fumer est satisfaite. Si donc on ajoute un filtre pour diminuer le taux de nicotine, cela ne réduira peut-être pas la consommation.

M. Thompson: Ma théorie est que tant qu'il y aura de la fumée, qui évidemment contient des irritants, il y aura certains problèmes et si vous éliminez la fumée, alors l'habitude évidemment, n'est plus satisfaite. Je pense que c'est une distinction importante à faire, nous ne nous intéressons pas au dépôt d'un seul irritant chimique.

M. Howe: Oui. Ces conclusions sont très intéressantes. On voit même que les ingrédients que nous utilisons pour les pesticides, atteignent les plants de tabac et peuvent contenir des matières dangereuses. Savez-vous s'il y a des études en cours au Canada sur ce sujet?

M. Thompson: Je ne suis au courant d'aucune étude de ce genre-là.

M. Howe: Merci beaucoup docteur.

M. Haidasz: Monsieur le président, j'aimerais demander, pour dissiper tout doute dans l'esprit des membres de notre Comité, si notre témoin de ce matin peut nous dire si l'habitude de la cigarette est responsable surtout du carcinome bronchogénique ou si elle est responsable d'autres carcinomes?

M. Thompson: Il y a deux points évidents. D'abord l'irritation initiale qui atteint évidemment le revêtement du poumon où se développent la plupart des cancers. C'est ce que nous avons discuté jusqu'ici. L'autre point est de savoir où ces substances peuvent se concentrer dans l'organisme? Celles qui filtrent comme irritantes, celles qui se dissolvent dans les tissus, passent éventuellement dans les fluides et peuvent être excrétées, où

[Text]

eventually may be excreted, must go where? The urinary bladder. Is there an increased incidence there?

There are certain studies being conducted. For instance, Dr. Kerr at the University of Toronto had indicated that there is an increased hazard, but it is not nearly to the same degree that we have at the initial point of impact in the lung. Those are the two sites that have been incriminated and they are the two that make sense as well.

Mr. Haidasz: Have studies been made as far as other sites are concerned, the larynx and the oral cavity?

Dr. Thompson: Oh, yes. Pardon me, I should have included with the lung anything in the air passages. Certainly larynx carcinoma has definitely increased. As a matter of fact, many of our patients who have lung cancer often eventually have cancer of the larynx as well, or vice versa; they may have the one first and then the other, but in either case they are much more susceptible to cancer in the other site. Also, cancer of the lip in pipe smoker over the years has been known to be an increased hazard, and generally other oral cancers as well.

Mr. Haidasz: Returning to the most common site, which is the bronchial tubes, I would like to find out if the studies done at the Toronto General Hospital or elsewhere have shown any special histological differentiation in the type of cancer as far as it being squamous or adenocarcinoma or oat-cell carcinoma.

Dr. Thompson: Yes. Most of the cancers we are dealing with are squamous-cell carcinoma, you might say. For the benefit of those people who are not familiar with the term, the squamous cells are the cells from the leathery type of membrane which I showed you this morning and which normally are never present in the lung tissue. So, you cannot possibly have a squamous-cell cancer under normal conditions. You first have to produce this type of membrane and then superimposed on that you have the squa-

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mous-cell cancer, which is so characteristic of the smoker, but normally that tissue could not be produced in the lung because there is just none of it there.

Mr. Haidasz: In the studies done at the Toronto General Hospital was there any further differentiation noted with respect to the histological differentiation of carcinoma in female smokers and male smokers?

[Interpretation]

vont-elles? Dans la vessie. Y a-t-il une augmentation de ce cancer?

Il y a certaines études en cours. A l'Université de Toronto, par exemple, le Dr Kerr a indiqué qu'il y avait une menace accrue mais pas du tout au même degré qu'au premier point, les poumons. Ce sont les deux régions qui ont été incriminées, et cela semble logique.

M. Haidasz: Avez-vous étudié aussi d'autres régions, le larynx, par exemple, ou les cavités buccales?

M. Thompson: Oui, je m'excuse, mais j'aurais dû les inclure dans les passages bronchiaux. Certains carcinomes du larynx ont nettement augmenté. En fait, nombre de malades atteints de cancer du poulmon, développent par la suite un cancer du larynx et vice-versa. Ils peuvent avoir l'un avant l'autre, mais dans les deux cas leur susceptibilité au cancer de l'autre partie est très grande. Il y a aussi le cancer des lèvres chez les fumeurs de pipe; on a constaté qu'il était en augmentation, comme le sont d'ailleurs les autres cancers des régions buccales.

M. Haidasz: Si l'on revient à la région la plus commune, savoir les bronches, je voudrais savoir si les études qui ont été faites à l'hôpital général de Toronto ou ailleurs ont manifesté des différences histologiques entre les différents types de cancer, carcinome squameux ou adenocarcinome ou carcinome à cellules en grain.

M. Thompson: Oui, la plupart des cancers dont il s'agit ici, sont des carcinomes squameux, pourrait-on dire. Pour ceux qui ne sont pas familiers avec ces termes, disons que les cellules squameuses sont celles qui forment cette membrane cuireuse que je vous ai montrée ce matin et qui n'est jamais présente dans le poulmon sain. Vous ne pouvez jamais avoir un cancer à cellules squameuses dans les conditions normales. Il faut d'abord qu'il y ait production de ce genre de membrane et ensuite, superposé sur cela, se développe le cancer à cellules squameuses, caractéristique du fumeur. Normalement, ce tissu ne peut être produit dans le poulmon puisqu'il n'existe pas déjà.

M. Haidasz: Dans les études que vous avez faites à l'hôpital général de Toronto, y avait-il d'autres différences hystologiques des carcinomes, notamment entre les femmes et les hommes qui fument.

[Texte]

Dr. Thompson: Yes, our studies indicate that squamous-cell cancer is increasing in females as a proportion. Years ago about the only type that we would expect to find in females was the other main type, the adenocarcinoma, to be technical, but our findings now indicate that there is a definite increase in squamous-cell cancer in the female, and again these people are all heavy smokers.

Mr. Haidasz: Are there any results available, as far as pre-cancerous lesions are concerned in the bronchial tree and eventual development of carcinoma?

Dr. Thompson: In females, do you mean?

Mr. Haidasz: In both sexes.

Dr. Thompson: Yes, this is what we are attempting to illustrate by these studies. Until we were using this sputum project extensively there was no way of knowing whether a pre-cancerous change is there or not. We are now going to follow these groups that we have assessed to see if really what we are accomplishing mainly is a sorting out of the highest risk group within the high risk group, that is, take the group of smokers as a whole and then sort out the highest risk group according to these pre-cancerous changes that we see in the sputum, then follow these over a period of years to see if they do end up with a significantly higher number of cancers than a comparable group that did not show such changes. We will be able to answer your question in another 10 to 15 years but we cannot answer it now.

Mr. Haidasz: Dr. Thompson, could you tell us who is subsidizing the cost of your studies?

Dr. Thompson: There is a mixed support. A lot of our studies we are just carrying on on our own with material within the hospital and in out-patient clinics, and so on. Dr. Delarue is involved in obtaining a grant for the one study from the Ontario Cancer Treatment and Research Foundation. They have supported us in much of this work and I think that was our main outside source. The smoking withdrawal clinics, of course, have been supported in different ways.

Mr. Haidasz: Could you tell this Committee in your plans for the future how much more money you would need to carry on your studies?

Dr. Thompson: That is an open end, I think.

[Interprétation]

M. Thompson: Nos études indiquent que le cancer squameux augmente en proportion chez les femmes. Auparavant, le seul type que nous trouvions couramment chez les femmes était l'adéno-carcinome, mais nous voyons qu'il y a maintenant une forte augmentation de cancer squameux chez les femmes qui fument beaucoup.

M. Haidasz: Y a-t-il des données disponibles en ce qui concerne les lésions pré-cancéreuses dans les bronches et le développement éventuel de carcinomes?

M. Thompson: Chez les femmes?

M. Haidasz: Chez les deux sexes.

M. Thompson: C'est ce que nous essayons de démontrer par ces études. Jusqu'à ce que nous utilisions intensément l'analyse de l'expectoration, il n'y avait pas moyen de savoir s'il y avait des changements pré-cancéreux ou non. Nous allons maintenant continuer à relancer l'étude de ces groupes pour voir ce qui se produit vraiment: trouver les groupes qui ont le risque le plus élevé,—je veux parler des groupes de gros fumeurs,—et faire le tri selon les premières étapes, puis les suivre pendant un certain nombre d'années pour voir s'ils sont sujets à un nombre considérablement plus élevé de cancers qu'un groupe comparable qui n'indique pas ces changements. Nous pourrions peut-être répondre à votre question dans dix ou quinze ans, mais pas à l'heure actuelle.

M. Haidasz: Docteur Thompson, pouvez-vous nous dire qui subventionne les frais de vos études, de vos relevés?

M. Thompson: Il s'agit d'un financement mixte. Bon nombre de nos études sont faites au moyen de patients de l'hôpital et des cliniques externes, etc.... Le docteur Delarue essaie d'obtenir une subvention pour une étude auprès de la Fondation des recherches du traitement du cancer de l'Ontario qui a financé une bonne partie de ce travail. Je crois que c'était notre principale source extérieure. Bien entendu les cliniques pour fumeurs ont été appuyées de différentes façons.

M. Haidasz: Combien d'argent auriez-vous besoin pour poursuivre vos projets à l'avenir?

M. Thompson: Eh bien, je crois qu'il n'y a pas de limites.

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Mr. Haidasz: I presume you are short of money?

M. Haidasz: Je suppose que vous êtes à court de capitaux.

Dr. Thompson: Oh, yes; obviously.

M. Thompson: En effet.

Mr. Yewchuk: My questions have been answered, Mr. Chairman.

M. Yewchuk: J'ai obtenu mes réponses.

The Chairman: Are there any other questions? We have another witness to hear.

Le président: Y a-t-il d'autres questions? Nous avons un autre témoin à entendre avant de ...

Mr. Osler: I have just one. I probably missed it, but is there any sign that a person who smokes little is relatively all right? I noticed there were these lines there but I think you said that there was not much difference.

M. Osler: Une seule question. Y a-t-il des symptômes, des signes montrant que quelqu'un qui fume peu, échappe à ces dangers? Je crois que vous avez dit qu'il n'y avait pas tellement de différence que quelqu'un qui fume beaucoup ou non.

Dr. Thompson: There was not much difference in 10 and under and those that were 20 and over from the point of view of the early changes. This is the only thing we are looking at in that particular group and certainly they were developing some of the early changes at 10 per day as they were at 20 per day. To answer that fully, we would have to do a much larger group over a much longer period of time and I do not think we can give a final answer just yet. I would think that a very sporadic cigarette, a very occasional type of smoker, would not show nearly the same type of effect. I think that is quite reasonable.

M. Thompson: Nous avons été surpris de constater qu'il n'y avait pas tellement de différence chez ceux qui fument 10 ou moins de cigarettes, et ceux qui en fument 20 ou plus au point de vue des premiers symptômes. Ces études ne s'appliquaient qu'aux premiers symptômes. Les premiers symptômes se manifestaient, que l'on fume moins de dix cigarettes ou plus de dix ou plus de vingt. Mais il faudra faire beaucoup plus de tests pendant une période beaucoup plus longue avant que nous puissions obtenir une réponse définitive. Je crois que quelqu'un qui fume une cigarette de temps à autre ne manifesterait sûrement pas le même genre de symptômes qu'un gros fumeur.

The Chairman: A supplementary, Mr. Howe?

Le président: Question supplémentaire M. Howe?

Mr. Howe: Would that not be because the casual smoker would not inhale?

M. Howe: Serait-ce parce que le fumeur occasionnel n'avale pas la fumée?

Dr. Thompson: I think it is a question of total exposure, basically. This term "pack years" is a useful term to refer to and obviously the casual smoker does not have nearly the same number of pack years of exposure as the other smokers who are smoking 10 or 15 or 20 per day.

M. Thompson: Il s'agit d'une question d'exposition totale. Le fumeur occasionnel n'a sûrement pas la même exposition à long terme, n'est pas exposé du tout de la même façon que celui qui fume dix, vingt, trente cigarettes par jour.

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Mr. Howe: Probably from your own experience you have noticed people who just smoke occasionally. They just puff, and I think this is partly the reason why there may be a difference between cigar and pipe smokers; they do not draw the smoke down into their lungs the way cigarette smokers do.

M. Howe: D'après vos propres expériences, vous avez constaté que les fumeurs occasionnels ne respirent pas la fumée, et je crois que c'est en partie la raison pour laquelle il y a peut-être une différence entre les fumeurs de pipe et de cigare, qui n'aspirent pas la fumée de la même façon.

Dr. Thompson: That has been the explanation, yes.

M. Thompson: C'est l'explication, oui.

Mr. Foster: Dr. Thompson, the witness we had a couple of nights ago from the Toronto

M. Foster: Docteur Thompson, un témoin que nous avions il y a quelques jours qui

[Texte]

withdrawal clinic suggested to the Committee that he thought we should recommend to the government or to the House of Commons that it would be a wise move to ban cigarette advertising on television, and put tobacco and cigarettes under the Food and Drug provisions. Do you have any suggestions for this Committee?

Dr. Thompson: I do not really know. My own feeling is that there has been a deficit in exposure of the susceptible mind to the potential hazards, really, and I think this is where we should tackle the problem.

Mr. Foster: You are suggesting an educational program?

Dr. Thompson: This is what I am most concerned with personally. I think this sort of exposure, allowing the individual to have factual information and make up his own mind, in this day and age is perhaps more important than trying to force anybody to do anything. However, perhaps you can lessen the exposure on the other side, certainly by reducing that type of influence; if you cannot make it comparable the other way you end up, as is the case on American television now, with spot announcements counterbalancing other announcements. It is a sad commentary on our modern age, I think, if you have to sit through this sort of thing day after day.

The Chairman: Thank you, Dr. Thompson, for your very interesting representation. We have another witness. He is Mr. Switzer, the Dominion Fire Commissioner of the Department of Public Works. Have you all received the brief? Mr. Switzer, the Dominion Fire Commissioner of the Department of Public Works is accompanied by Mr. Kearny from the Dominion Fire Commissioner's Office. Mr. Switzer?

Mr. R. A. W. Switzer (Dominion Fire Commissioner, Department of Public Works): Thank you, Mr. Chairman, ladies and gentlemen.

I will try to be brief. I think the facts are very clearly stated in the brief that I have provided but I guess copies have not been made available to all members of the Committee.

First of all, I think we must understand the definition of fire. Fire is any instance of destructive or uncontrolled burning including

[Interprétation]

venait d'une clinique de cure pour fumeurs, de Toronto, a déclaré au Comité que nous devrions recommander au gouvernement ou à la Chambre des communes qu'il serait sage d'interdire la réclame pour la cigarette et pour le tabac à la télévision et à la radio, et de placer les cigarettes et le tabac sous le contrôle du Directeur des aliments et drogues. Est-ce que vous avez des propositions à faire au Comité dans ce sens?

M. Thompson: Je l'ignore. J'ai l'impression que les esprits influençables n'ont pas été suffisamment exposés aux risques éventuels que présente le tabac. Voilà le problème.

M. Foster: Vous voulez parler de l'éducation?

M. Thompson: Oui, de campagnes éducatives, voilà ce qui m'intéresse surtout personnellement. Il faudrait permettre à l'individu d'avoir tous les renseignements importants et que l'individu puisse alors faire un libre choix. Actuellement, cela serait peut-être plus important que de forcer quelqu'un à faire quoi que ce soit. Peut-être pourrait-on amoindrir les risques en réduisant ce genre d'influence, en faisant comme c'est le cas à la télévision aux États-Unis, c'est-à-dire en passant un commercial sur les dangers de la cigarette à la suite d'une annonce réclame pour une marque de cigarette quelconque. C'est peut-être un triste commentaire sur notre époque moderne, si vous avez à subir ce genre de chose jour après jour.

Le président: Merci, docteur Thompson, de votre exposé des plus intéressants. Nous avons un autre témoin. Il s'agit de M. R. A. Switzer, Commissaire fédéral des incendies auprès du ministère des Travaux publics. Son mémoire est très bref. L'avez-vous reçu?

M. Switzer, Commissaire fédéral contre les incendies du ministère fédéral des Travaux publics, est accompagné de M. R. A. Kearny du bureau du Commissaire. Je vous présente M. Switzer.

M. R. A. Switzer (Commissaire fédéral des incendies, ministère des Travaux publics): Merci monsieur le président, Madame, messieurs. Je vais essayer d'être très bref. Je crois que les faits d'ailleurs sont clairement exposés dans le mémoire, mais je crois qu'on n'a pas des exemplaires à tous les membres du Comité.

Nous devons bien comprendre tout d'abord la définition d'un incendie. L'incendie est un feu qui ne peut pas être contrôlé, qui est

[Text]

scorch burns, explosions of combustible dust or materials, flammable liquids and gases. That is our definition of fire.

It is a fact that the smoking of cigarettes, cigars and pipes is the leading cause of fires and fire deaths in Canada and the United States.

A review of our reports of fire losses in Canada for the ten-year period 1957 to 1966 was undertaken to determine the number of fires and the number of fire deaths which involved smoking and we have prepared two tables showing these facts.

Briefly, 44 per cent of the known causes of fires is smokers' carelessness, which results in approximately 20,000 to 22,000 fires a year. Ten per cent of all known deaths are caused by smokers' carelessness which amounts to slightly over 100 deaths per year.

In fire deaths involving smoking, the deaths are shown as being attributed either to smoking and ignition of clothing or smoking in bed.

I must apologize for the type of statistics which we have to present to you this afternoon. The responsibility for collecting fire loss statistics rests with the Provincial fire marshals and fire commissioners and the facts that I give you this afternoon are those which we have obtained from the provincial people, and I can assure you that attempts are now being made to improve our fire loss statistics.

At the present time we have two groups under smoking; fires caused by ignition of clothing and fires caused as a result of smoking in bed. The question, I think, that is obvious in our minds is why do we have fires caused by smoking materials? And I have listed these under two main headings; first of all, the need for matches or cigarette lighters to ignite the smoking material, and secondly, the inherent fuse characteristic of the cigarette which enables it to continue to burn even though it is left unattended. Now, of the two basic causes, the free-burning or the fuse characteristic of a cigarette is the one which is the most dangerous from a fire hazard point of view.

The majority of the matches used by smokers are of the safety type rather than the strike-anywhere type, except possibly of the pipe smoker. The match manufacturing industry keeps a very close watch on its competitors, and in particular the importers, to make sure that its product is treated to prevent what we call, "after-glow"; that is, to prevent the match from continuing to glow after you blow it out or shake it out. The normal method of preventing after-glow

[Interpretation]

causé par des liquides, des gaz, par la combustion ou d'autres causes encore.

Il est vrai que le fait d'utiliser des cigares, de cigarettes et de pipes constitue la cause la plus fréquente de décès attribués à l'incendie au Canada et aux États-Unis. Si l'on remonte aux dix dernières années soit au cours de la période 1957-1966, pour déterminer le nombre d'incendies et le nombre de décès dus à l'incendie, nous voyons quels sont les résultats de ces études.

Approximativement 44 p. 100 de tous les incendies sont causés par des négligences de fumeurs, ce qui représente environ de 20,000 à 22,000 incendies par année; environ 100 décès par le feu sont causés aussi par des fumeurs, les décès proviennent la plupart du temps de négligences causant l'inflammation des vêtements ou du fait que l'on fume au lit. Je dois m'excuser du genre de statistiques que nous devons vous présenter cet après-midi, la responsabilité de percevoir ces statistiques intéresse les commissaires provinciaux des incendies. Et les données que je vous présente sont celles que nous avons obtenues des représentants provinciaux. Je puis vous assurer qu'on essaie d'améliorer nos statistiques sur la lutte contre les incendies.

À l'heure actuelle, nous avons deux genres d'incendies causés par l'inflammation de vêtements et par l'usage de la cigarette au lit.

La question que nous nous posons est pourquoi est-ce une cause d'incendies? J'en ai énuméré les raisons sous deux rubriques générales; d'abord la nécessité d'avoir des allumettes ou un briquet pour allumer ce qu'il fume, et, deuxièmement, les effets incendiaires inhérents à la cigarette, ce qui fait qu'elle continue de brûler bien qu'on ne la fume plus. De ces deux causes fondamentales, le fait qu'une cigarette brûle d'elle-même représente le plus grand danger du point de vue des risques d'incendie.

La plus grande partie des allumettes employées par les fumeurs sont du type «sûreté» et non du type «qu'on peut allumer partout», sauf dans le cas des fumeurs de pipe. Le fabricant d'allumettes surveille de près ses concurrents, notamment les importateurs, afin de s'assurer que le produit est traité de façon qu'il n'y ait pas de tison une fois la flamme éteinte, à savoir que l'allumette puisse continuer à brûler après qu'on l'a éteinte. On y parvient d'ordinaire en trai-

[Texte]

consists of treating the splint board or paper stock with a non-toxic ammonium compound. The method they use for determining afterglow is a specification which has been produced by the match industry, and they also use a specification produced by the United States.

The match industry do a very good job of policing this industry, and a review of our records would indicate this. The afterglow safety feature built into the match, of course, does not take care of the fire hazard created by the disposal of the match while it is still in the flame stage. Nor does it reduce the hazard created when the match falls into the hands of a child.

Most flint-operated cigarette lighters are of safe design when handled by the adult. However, they become a very dangerous device if they become accessible to a child.

Therefore it would seem that the primary fire hazard associated with the source of ignition of smokers' materials is the careless disposal of the flaming match and the probability of the matches or the cigarette lighters being played with by children.

The free-burning characteristic of a factory-made cigarette, as distinct from the hand-rolled cigarette, is one which has been investigated by numerous agencies, and to my knowledge no action has been taken by either the cigarette manufacturers, or regulatory bodies having jurisdiction, to eliminate this inherent hazard of the cigarette.

It appears that the cigarette smoker prefers cigarettes which will remain alight though unattended. However, it is a known fact that the fuse characteristic of a burning cigarette which has been inadvertently or carelessly left to burn, is the one that destroys so many lives and so much property each year.

A Technical Information Bulletin issued by the National Research Council, dated July 22, 1949, and to my knowledge never updated, states:

All cigarette paper is made from carefully purified flax fibers, but in order to get the cigarette to burn at the same rate as the tobacco and prevent it from going out quickly when not being smoked, special porous paper is used and a definite proportion of calcium carbonate up to 20 per cent is added to the paper to provide for this porosity. So-called booklet papers contain no calcium carbonate so that hand-made cigarettes go out unless puffed frequently. It is claimed that all

[Interprétation]

tant le bus ou le carton dont on fabrique les allumettes d'un composé d'ammonium non toxique. Les fabricants d'allumettes établissent la durée du tison en conformité d'une norme du gouvernement des États-Unis ou de l'industrie canadienne des allumettes.

D'après la correspondance portée à nos dossiers, il semble que cette industrie exerce une assez bonne surveillance sur la sûreté de son produit. Toutefois, la sûreté de l'allumette en fonction du tison n'assure pas qu'il n'y aura pas de risque d'incendie quand on jette une allumette en feu, ni que le risque soit moindre quand un enfant a une allumette entre les mains.

La plupart des briquets à pierre sont conçus de façon à ne présenter aucun risque lorsqu'un adulte s'en sert. Toutefois, dans les mains d'un enfant, ils sont très dangereux.

Par conséquent, il semble que le principal risque d'incendie que présente l'usage du tabac soit la façon négligente dont on se défait d'une allumette en flamme et la possibilité qu'il y aurait pour des enfants de jouer avec des allumettes et des briquets.

La propriété de brûler d'elle-même qu'a la cigarette de fabrication commerciale, par opposition à la cigarette de fabrication domestique, a fait l'objet d'études de la part de nombreux organismes et, à ma connaissance, aucune mesure n'a été prise ni par les fabricants de cigarettes, ni par les organismes de réglementation compétents, en vue de faire disparaître ce risque inhérent à la cigarette.

Il semble que le fumeur de cigarettes préfère une cigarette qui reste allumée bien qu'il ne la fume pas. Toutefois, il est reconnu que l'effet incendiaire d'une cigarette allumée qu'on a laissée brûler par inadvertance ou négligence est la cause de beaucoup de pertes de vie et de propriété chaque année.

On peut lire ce qui suit dans un Bulletin d'information technique publié par le Conseil national de recherches, du 22 juillet 1949, et, à ma connaissance cette déclaration n'a jamais été mise à jour:

Le papier à cigarettes est fait de fibres de lin purifiées avec soin mais afin qu'il brûle à la même allure que le tabac et que la cigarette ne s'éteigne pas rapidement quand on ne la fume pas, on emploie pour sa fabrication un papier poreux spécial auquel on ajoute une proportion donnée, jusqu'à concurrence de 20 p. 100, de carbonate de calcium, afin d'en assurer la porosité. Le papier en livrets pour cigarettes de fabrication domestique ne contient pas de carbonate

[Text]

the cigarette paper needed in the U.S. and much of that used in Central America, South America, Russia, Britain, Africa, Turkey and India comes from two factories in New York City and one in Elizabeth, N.J. Canadian cigarette papers are manufactured by the Howard Smith Co. . . .

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A statement from the Central Experimental Farm, Tobacco Division, Ottawa, which once again is a 1949 statement, has this to say about the burning characteristics of the tobacco:

I know of no manufacturer of tobacco and cigarettes who uses any chemicals, for example, saltpetre, either to impair or improve the burn properties of his product. There are many other factors such as soil type, seasonal conditions and fertilizer content on the farm which exercise definite effects.

I have investigated this statement, and I was able to dig out of an article in the Canadian Journal of Plant Science, this statement:

Chlorine from 20 to 50 pounds per acre had no effect on the yield or leaf-grade quality of flue-cured tobacco grown on a fox loamy sand. Increased applications of chlorine increased the chlorine content moisture uptake and decreased the rate of burn of the cured leaf, but had no effect on the amount of total sugars.

That means that if you use a fertilizer that has a high chlorine content, you reduce the free-burning or rate-of-burning characteristics of the tobacco. So you can control the rate of burn of the tobacco by the type of fertilizer that you use. That is according to the people in the Department of Agriculture. However, these statements do not alter the fact that factory-made cigarettes continue to burn when left unattended and act as a fuse to ignite combustible materials with which they come in contact.

With reference to legislation, a review of our files would indicate that there is legislation which prohibits smoking in certain areas of public buildings, and in areas where flammable liquids are dispensed. Most provinces have legislation which prohibits smoking in theatres and public halls; some municipalities have by-laws which prohibit

[Interpretation]

de calcium, de sorte que celles-ci s'éteignent à moins qu'on en tire fréquemment des bouffées. On prétend que tout le papier à cigarettes employé aux États-Unis, de même qu'une grande partie du papier qu'emploient l'Amérique centrale, l'Amérique du Sud, la Russie, la Grande-Bretagne, l'Afrique, la Turquie et l'Inde provient de deux fabriques de New York et d'une fabrique d'Elizabeth (N.J.). Le papier à cigarettes canadien est fabriqué par la Howard Smith Co. . . .

La Division des tabacs de la Ferme expérimentale centrale, Ottawa, a déclaré ce qui suit en 1949 au sujet des caractéristiques de combustion du tabac:

Il n'y a pas à notre connaissance de fabricant de tabac ou de cigarettes qui emploie des produits chimiques, le salpêtre, par exemple, en vue d'altérer ou d'améliorer les propriétés de combustion de son produit. Il y a bien d'autres facteurs tels le genre de sol, sa teneur en engrais et les conditions saisonnières qui exercent des effets déterminants.

Évidemment, j'ai fait enquête sur cette déclaration et j'ai pu trouver, dans un article du Journal canadien des sciences, la déclaration suivante:

Le chlore, dans la mesure de 20 à 50 livres l'acre, n'a aucun effet sur la croissance du tabac jaune dans un sol argileux. Si on applique du chlore, on accroît la teneur en humidité et diminue le taux de combustion de la feuille séchée, mais cela n'a aucun effet sur la teneur en sucre.

Par conséquent, si on utilise un engrais qui a une forte teneur en chlore, on réduit les caractéristiques de combustion du tabac. Par conséquent, on peut contrôler le taux de combustion du tabac, selon le genre d'engrais que l'on utilise, d'après le ministère de l'Agriculture, du moins. Ces énoncés ne changent en rien le fait que les cigarettes de fabrication commerciale continuent de brûler par elles-mêmes et servent de «mèche» pour allumer les matériaux combustibles avec lesquels elles viennent en contact.

Au point de vue législatif, l'étude de nos dossiers a révélé qu'il existe des mesures législatives qui interdisent de fumer dans certaines parties d'immeubles publics et où l'on trouve des liquides inflammables. La plupart des administrations provinciales ont édicté des mesures législatives interdisant de fumer dans les théâtres, cinémas et autres salles.

[Texte]

smoking in department stores, and Ontario has a regulation which prohibits smoking within 10 feet of a gasoline service station pump. The Province of Saskatchewan has a hotel regulation which makes it an offence to cause a fire through the use of smoking materials while in a hotel. It reads as follows:

UNLAWFUL IGNITION OF COMBUSTIBLE CONTENTS. Any person who in smoking or attempting to light or to smoke a cigarette, cigar, pipe or tobacco in any form for which lighters or matches are used, or any person who sets fire by negligence or accident to any bedding, furniture, curtain, drape, house or household furnishings in any hotel, shall be guilty of an offence and liable on summary conviction to a fine of not less than \$25 nor more than \$100 for the first offence and not less than \$50 nor more than \$200 for the second offence.

This regulation has been in effect since 1947. It was in the Province of Saskatchewan when it was brought into effect, and many charges have been laid under the authority of this regulation. The members of the Hotel Association of Saskatchewan welcomed the legislation, and while I was there they used it. I have had correspondence with the present Commissioner of the Province of Saskatchewan and he tells me that they are still using the legislation to lay charges against those who feel it necessary to smoke in bed and in turn set fire to the bed. But he also states that a number of the hotel owners would rather use the Criminal Code of Canada, as it has been suggested to us that a person damaging hotel or other property occupied by the general public, by careless smoking habits, may be charged with "mischief" which is a criminal offence, and which is punishable under Sections 372, 373 and 628 of the Criminal Code of Canada.

It is a well-known fact that the hotelkeepers are now using both the Provincial regulation and also the Criminal Code of Canada to try and discourage their guests from careless smoking habits.

Another method by which we attempt to reduce fires from careless smoking is through public fire prevention education. All provinces, under the auspices of their provincial Fire Marshals or Fire Commissioners and the

[Interprétation]

publiques. Dans certaines municipalités, il est interdit de fumer dans les magasins à rayons, et, en Ontario, un règlement provincial interdit de fumer dans les dix pieds à la ronde d'une pompe à essence d'une station-service.

Pour ce qui est du Saskatchewan, un règlement visant les hôtels range parmi les infractions à la loi le fait de provoquer un incendie par l'usage du tabac dans l'hôtel. Ce règlement est ainsi conçu:

«INFLAMMATION ILLÉGALE DES EFFETS COMBUSTIBLES DE L'HÔTEL. Quiconque en fumant ou en tendant d'allumer ou de fumer une cigarette, un cigare, une pipe ou du tabac sous quelque forme que ce soit dont l'allumage requiert un briquet ou des allumettes, ou quiconque par négligence ou accident, met le feu à la literie, aux meubles, aux rideaux, aux tentures, aux accessoires mobiliers d'un hôtel quelconque, est coupable d'une infraction et passible, sur déclaration sommaire de culpabilité, d'une amende d'au moins \$25 ou d'au plus \$100 pour la première infraction et d'au moins \$50 et d'au plus \$200 pour la deuxième infraction».

Le règlement susmentionné est en vigueur depuis le mois de juillet 1947. Elle a été appliquée à plusieurs reprises. Les membres de l'Association des hôteliers de la Saskatchewan s'en sont réjouis et ils l'appliquaient lorsque j'y étais. J'ai correspondu avec le Commissaire des incendies de la province de la Saskatchewan et il m'a dit qu'on applique encore cette loi pour imposer des amendes à ceux qui sentent le besoin de fumer au lit et qui ont mis le feu au lit; il déclare aussi que bon nombre des hôteliers aimeraient beaucoup mieux recourir au Code criminel du Canada, comme on nous l'a proposé. Quiconque cause des dégâts à un hôtel ou à tout autre immeuble public par sa négligence en fumant, peut être inculpé de «méfait», un acte criminel punissable en vertu des articles 372, 373 et 628 du Code criminel du Canada.

C'est un fait bien connu que les hôteliers ont maintenant recours aux deux règlements, le règlement provincial et le Code criminel du Canada, pour tenter de dissuader leurs clients qui ne font pas attention lorsqu'ils fument.

Une autre méthode pour essayer de réduire les incendies par suite de négligence dans l'usage du tabac, c'est l'éducation du public en matière de prévention des incendies. Chaque administration provinciale, sous l'égide de ses

[Text]

federal government through the facilities of the Office of the Dominion Fire Commissioner, have extensive fire prevention programs which are geared to motivate all people from all walks of life and age groups to become actively engaged in fire prevention programs which would reduce the loss of life and property through the ravages of fire.

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The campaigns take the form of posters, newspaper articles and mats, T.V. slides and sound film and radio tapes. Most Fire Marshals and Fire Commissioners have extensive fire prevention film libraries on subjects of fire prevention and fire fighting, and these are used quite extensively by agencies interested in promoting fire prevention.

Most of the fire prevention publicity material produced for Canada is produced by what is known as the Joint Fire Prevention Publicity Committee Incorporated. This is a non-profit organization sponsored by the Association of Canadian Fire Marshals and Fire Commissioners and the Canadian Association of Fire Chiefs. It is supported by all levels of government and by the industry, and last year the Committee received approximately \$68,000 in the form of grants and donations which were used in the production of fire prevention materials. But I might state that the radio stations, TV stations and newspapers donate tens of thousands in time, at no cost to the fire services people, and we rely very heavily on these media to promote our fire-prevention program.

I have listed three recommendations, Mr. Chairman. We are suggesting a stepped-up program of public education to bring to the attention of all Canadian citizens the hazards and consequences of careless smoking habits; we are suggesting that we encourage the tobacco industry to reduce the fuse effect of the cigarette—which I do not think will go over very big; and we have suggested a stepped-up legislative program to reduce the probability of a careless smoker causing a fire which will endanger the life and property of others in, for example, places of public assembly, large department stores, passenger elevators and emergency exit-ways.

I have made this very, very brief and I will now attempt to answer any questions the Committee may have.

[Interpretation]

prévôts ou commissaires des incendies et le gouvernement fédéral par l'intermédiaire du Commissariat fédéral des incendies, met en œuvre de nombreux programmes en matière de prévention des incendies qui visent à inciter toutes les classes de la société et tous les groupes d'âge à participer activement à un programme de prévention des incendies afin de réduire les pertes de vie et de propriétés attribuable aux incendies.

Les campagnes se font au moyen d'affiches, d'articles et de photographies publiés dans les journaux, des films sonorisés et des bandes magnétiques radiodiffusées. La plupart des prévôts et commissaires des incendies disposent de cinémathèques bien garnies en matière de prévention des incendies et de lutte contre les incendies auxquelles les organismes qui s'intéressent à éliminer les incendies ont souvent recours.

Au Canada, la plus grande partie de la documentation publicitaire en matière de prévention des incendies provient du *Joint Fire Prevention Publicity Committee Incorporated*, organisme à but non lucratif parrainé par l'*Association of Canadian Fire Marshals and Fire Commissioners* et la *Canadian Association of Fire Chiefs*. L'entreprise privée et tous les niveaux de gouvernement lui accordent leur soutien. Au cours de 1968, le *Committee* a reçu, en dons et subventions, une somme d'environ \$68,000 qui a servi à établir la documentation susmentionnée. Et je puis dire que les stations de radio, de télévision et les journaux ont donné des dizaines de milliers de dollars à temps, sans que les services d'incendie aient à payer, et que nous comptons beaucoup sur ces moyens d'information pour lancer notre campagne de prévention des incendies.

J'ai donné une liste de ces recommandations, monsieur le président. Nous proposons un programme amélioré d'éducation du public pour que les Canadiens soient bien au courant des conséquences et des dangers de la négligence des fumeurs. Nous proposons d'encourager l'industrie du tabac à réduire l'effet fusant de la cigarette; mais nous ne pensons pas que cela aura beaucoup de succès. Enfin, nous avons proposé des mesures législatives améliorées visant à réduire la probabilité d'un incendie dû à la négligence d'un fumeur, et qui pourrait mettre en danger la vie et les biens des autres, par exemple, dans les grands magasins, dans les endroits de réunion, dans les ascenseurs et dans les sorties de secours. Ma déclaration a été très brève, et je vais maintenant m'efforcer de répondre aux questions des membres du Comité.

The Chairman: Thank you, Mr. Switzer. Before we pass to the question period, is it agreed that the figures that appear at the end of the brief be printed as an appendix to these proceedings?

Some hon. Members: Agreed.

The Chairman: The meeting is open for questions. Mr. Mather?

Mr. Mather: Mr. Chairman, I had intended to ask a question or two about the economic toll taken by careless smoking, but I note that the witness has this very well tabulated at the back of the brief. I think I am right in saying, relative to the toll, economically and in lives, of careless smoking, that roughly 44 per cent of all fires, to your knowledge, are caused by such smoking.

Mr. Switzer: Known causes.

Mr. Mather: That about 100 people a year die as a result of the same thing. And, as I read it, that roughly \$7 million a year is the annual economic property toll taken by careless smoking.

Mr. Switzer: That is right. That is a 10-year average.

Mr. Mather: That is all, Mr. Chairman.

The Chairman: Thank you, Mr. Mather. Mr. Howe?

Mr. Howe: Mr. Chairman, I was rather interested in the reference to the fact that the allormade cigarette fuses and burns more readily. One of your recommendations is that the tobacco companies should hurry. I think we should be tougher than that. Should we not say that they must remove from the paper the additives that create this continued fusing of the cigarette?

Mr. Switzer: I would be happy to support you.

Mr. Howe: Do they not put this additive into the paper of the hand-rolled cigarette?

Mr. Switzer: The free-burning effect of the cigarette depends not only upon the paper but upon the amount of chlorine used in the fertilizer in the land that is used to grow the tobacco leaf. As you reduce the chlorine-content of the fertilizer you increase the burning rate of the tobacco, and this is carefully balanced.

Le président: Merci, monsieur Switzer. Avant de passer aux questions, êtes-vous d'accord pour que l'on imprime en appendice au compte rendu de nos délibérations les chiffres qui figurent à la fin du mémoire?

Des voix: D'accord.

Le président: Vous pouvez maintenant poser des questions. M. Mather?

M. Mather: Monsieur le président, je voudrais poser une question au sujet des dépenses que peut entraîner la négligence des fumeurs, mais je vois que le témoin a des tableaux très précis là-dessus à la fin du mémoire. Si je ne m'abuse, en ce qui concerne les pertes de vies et de biens qu'entraîne la négligence des fumeurs, 44 p. 100 environ de tous les incendies sont, à votre connaissance, dus à cette cause.

M. Switzer: 44 p. 100 dans le cas des causes connues. Oui.

M. Mather: Et qu'environ 100 personnes par an perdent la vie par suite de cette négligence, et les chiffres indiquent qu'environ 7 millions de dollars par an sont perdus à cause de la négligence des fumeurs.

M. Switzer: C'est exact. Sur une moyenne de dix ans.

M. Mather: C'est tout, monsieur le président.

Le président: Merci, monsieur Mather. Monsieur Howe?

M. Howe: Monsieur le président, j'étais très intéressé d'apprendre que les cigarettes roulées industriellement s'enflamment et brûlent plus facilement. Je pense qu'il faudrait être plus sévère. Ne devrions-nous pas exiger que l'on supprime du papier ces ajouts qui font que la cigarette brûle continuellement?

M. Switzer: Vous avez tout mon appui sur ce point.

M. Howe: N'ajoute-t-on pas cette même substance dans le papier des cigarettes qui se roulent à la main?

M. Switzer: Le fait que la cigarette se consume toute seule ne tient pas seulement au papier, mais aussi à la quantité de chlore utilisée dans les engrais sur la terre qui sert à la culture de la feuille de tabac. En diminuant la quantité de chlore utilisé dans les engrais, ou augmente la facilité avec laquelle le tabac brûle; les deux choses sont soigneusement équilibrées.

[Text]

Mr. Howe: In other words, the tobacco that is put into the cigarette is different from that sold by the package to the man who rolls his own? It has a different content?

• 1300

Mr. Switzer: I am not qualified to answer that question but it would seem to me, as a layman, that possibly the reason the hand-made cigarette has a tendency to go out faster than does the factory-made cigarette is related to the paper. I am not sure of this, but this is what I understand.

Mr. Howe: I have always understood that. I have rolled my own and I have smoked the others. I have always noticed that the hand-rolled cigarette is just like smoking a pipe. You have to keep lighting it every time you pick it up. Would this be of advantage if this Committee decided to indicate in its report that there be regulations about the fusing qualities of cigarettes to prevent them starting fires?

Mr. Switzer: This is a fact.

Mr. Mather: Mr. Chairman, I have a related question. I rather like that idea but if we recommend a study of the paper or the taking of the paper off the cigarette, and the carbon and the tars and the nicotine out of it, we are not going to have much cigarette left. Of that I personally, am much in favour. Perhaps the simplest thing would be to put the cigarette out, period.

The Chairman: Mr. Foster?

Mr. Foster: I have been reading Table I. The total number of fires per year caused by careless smoking has fallen from 31,425 in 1957 to 22,140 in 1966. Is this correct?

Mr. Switzer: Yes, it is falling. There has been quite a drop since about 1963.

Mr. Foster: That is almost a 30 per cent drop. What is the reason for this?

Mr. Switzer: Generally speaking, the number of fires is dropping...

Mr. Foster: From all causes?

Mr. Switzer: That is right. We feel that it is a result of our better education program and better inspection program—home inspection by fire departments.

[Interpretation]

M. Howe: Autrement dit, il y a une différence entre le tabac des cigarettes qui se vendent en paquet et celui des cigarettes que l'on roule à la main? La teneur n'est pas la même?

M. Switzer: Je ne suis pas en mesure de vous répondre, mais il me semble, tout profane que je sois, que c'est à cause du papier que la cigarette roulée à la main a tendance à s'éteindre plus facilement que la cigarette roulée industriellement. Je n'en suis pas certain, mais c'est là mon avis.

M. Howe: J'ai toujours pensé cela. J'ai fumé les deux genres de cigarettes, et je me suis rendu compte que la cigarette roulée à la main est comme la pipe: il faut la rallumer constamment. Est-ce que ce ne serait pas un avantage si le Comité décidait d'indiquer dans son rapport qu'il devrait y avoir un règlement au sujet du caractère fusant des cigarettes pour empêcher qu'elles ne causent des incendies?

M. Switzer: C'est un fait.

M. Mather: Monsieur le président, j'ai une question connexe. Je trouve que c'est une bonne idée, mais si nous recommandons que l'on étudie le papier, ou qu'on le supprime de la cigarette, et que l'on supprime aussi le carbone, le goudron et la nicotine, il ne va pas rester grand-chose de la cigarette. Pour ma part, je suis tout à fait en faveur de cela. Mais peut-être le plus simple serait-il de supprimer complètement la cigarette, ni plus ni moins.

Le président: Monsieur Foster?

M. Foster: Je viens de lire le tableau 1. Le nombre total des incendies dus chaque année à la négligence des fumeurs est tombé de 31,425 en 1957 à 22,140 en 1966. Est-ce bien cela?

M. Switzer: Oui, le nombre diminue. Il y a eu une baisse assez considérable depuis 1963 environ.

M. Foster: Cela représente une baisse de près de 30 p. 100. Quelle en est la raison?

M. Switzer: D'une façon générale, le nombre des incendies diminue...

M. Foster: Quelle qu'en soit la cause?

M. Switzer: Oui. Nous estimons que cela est dû à l'amélioration de notre programme d'éducation et de notre programme d'inspection des foyers par les services d'incendie.

Texte]

Mr. Foster: The amount of loss is not dropping, though. Does this mean that when they cause fires they are burning up bigger hotels? The figure of \$6 million to \$7 million seems to be a pretty standard amount.

Mr. Switzer: A house that was worth \$10,000 10 years ago is worth about \$15,000 to \$17,000 today.

Mr. Foster: Yes.

The Chairman: Are there any further questions?

Mr. Yewchuck: Mr. Switzer, in view of the fact that 44 per cent of fires are caused by careless smoking possibly one of your recommendations might be that every smoker carry a fire-extinguisher with him at all times.

Mr. Haidasz: I have one question relative to Table 2, on the ignition of clothing. Has the witness any suggestions in relation to the flammability of fabrics and how bed sheets and blankets can be treated so that they are less susceptible to burning?

Mr. Switzer: This has been studied very carefully by the chemists. The majority of the flame-proofing materials or chemicals that are used are water-soluble—it is a water-soluble salt. When bed sheets or clothing are laundered they lose their fire-retardant value. It is washed out. It is not a practical solution to the problem. It has been studied, particularly by the Department of Veterans Affairs.

The Chairman: Are there any further questions?

Thank you, Mr. Switzer, for your well-presented brief; and I also wish to thank the officers of your Department for the excellent brief that they have prepared.

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The meeting is adjourned until 11 a.m. Thursday, February 27, when the Canadian Medical Association will present their brief.

[Interprétation]

M. Foster: Le montant des pertes ne diminue pas, par contre. Cela signifie-t-il que lorsqu'il y a un incendie, de plus grands édifices brûlent. Il semble que six ou sept millions de dollars soit à peu près le montant moyen.

M. Switzer: Une maison qui valait \$10,000 il y a dix ans vaut \$15,000 ou \$17,000 aujourd'hui.

M. Foster: Oui.

Le président: Y a-t-il d'autres questions?

M. Yewchuk: Monsieur Switzer, étant donné que 44 p. 100 des incendies sont dus à la négligence des fumeurs, vous pourriez peut-être recommander que tout fumeur ait sur lui à tout moment un extincteur d'incendie.

M. Haidasz: J'ai une question au sujet du Tableau 2, relatif à l'inflammation des vêtements. Le témoin aurait-il des recommandations à faire sur le caractère inflammable des tissus et sur la manière dont on pourrait traiter les draps de lit et les couvertures pour qu'ils s'enflamment moins facilement?

M. Switzer: Cette question a été étudiée très attentivement par les chimistes. La plupart des matières ou des produits chimiques ignifuges que l'on utilise sont solubles à l'eau—ce sont des sels solubles à l'eau. Lorsqu'on lave les draps ou les vêtements, la matière ignifuge se dissout, et le tissu perd son caractère ininflammable. Ce n'est donc pas la bonne solution. La question a été étudiée, notamment par le ministère des Anciens combattants.

Le président: Y a-t-il d'autres questions?

Merci, monsieur Switzer, de ce mémoire que vous nous avez si bien présenté; je voudrais aussi remercier les fonctionnaires de votre Ministère de l'excellent mémoire qu'ils ont préparé.

La séance est levée. Notre prochaine réunion aura lieu le jeudi 27 février, à 11 heures du matin. L'Association des médecins du Canada nous présentera alors son mémoire.

APPENDIX G

FIRES CAUSED BY SMOKING

A REPORT TO
THE HOUSE OF COMMONSSTANDING COMMITTEE ON HEALTH,
WELFARE AND SOCIAL AFFAIRS

STATISTICS:

It is a fact that the smoking of cigarettes, cigars and pipes is the leading cause of fires and fire deaths in Canada and the United States.

A review of our reports of Fire Losses in Canada for the 10 year period 1957-1966 was undertaken to determine the number of fires and the number of fire deaths which involved smoking. These are shown in Tables 1 and 2 respectively which are enclosed.

In Table 1—Fires Involving Smoking—it can be seen that smoking has accounted for about 37% of the total number of fires and 5% of the loss. These percentages have been very consistent over the 10 years. However, if we consider the fires of known origin only, smoking has accounted for about 44% of the fires and 10% of the loss. In this regard, it should be noted that fires of unknown origin have accounted for about 16% of the total number of fires and 50% of the loss.

In Table 2—Fire Deaths Involving Smoking—the deaths are shown as being attributed either to smoking and ignition of clothing, or smoking in bed. There may have been other lives lost due to fires involving smoking, but unless the deaths were directly attributed to the victim's clothing becoming ignited, the fire deaths may have been attributed to other causes. The exception to this is Ontario, where all deaths involving smoking have been included. The figures in this Table show that smoking and ignition of clothing and smoking in bed have accounted for 11% and 7% respectively of the total number of fire deaths and 14% and 9% respectively of the number of fire deaths of known origin.

APPENDIX G

FUMER: CAUSE D'INCENDIE
RAPPORT PRÉSENTÉ AUCOMITÉ PERMANENT DE LA CHAMBRE
DES COMMUNES SURLA SANTÉ, LE BIEN-ÊTRE SOCIAL
ET LES AFFAIRES SOCIALES

STATISTIQUES:

Il est avéré qu'au Canada et aux États-Unis les fumeurs de cigarettes, de cigares et de pipes sont principalement la cause des incendies et des pertes de vie qui en découlent.

Nous avons fait l'étude de nos Rapports sur les pertes causées par l'incendie au Canada de 1957 à 1966, afin d'établir le nombre d'incendies et de pertes de vie attribuables aux fumeurs. Les statistiques pertinentes figurent respectivement aux tableaux 1 et 2 ci-joints.

Le tableau 1—Incendies attribuables aux fumeurs—démontre que les fumeurs répondent pour 37 p. 100 des incendies et de 5 p. 100 des pertes. Ces pourcentages sont demeurés presque les mêmes au cours des dix années en cause. Toutefois, si l'on tient compte des incendies dont l'origine est connue, les fumeurs sont la cause de quelque 44 p. 100 des incendies et de 10 p. 100 des pertes. Par contre, les incendies d'origine inconnue ont causé environ 16 p. 100 du nombre total d'incendies et 50 p. 100 des pertes.

Le tableau 2—Pertes de vie du fait d'incendies attribuables aux fumeurs—démontre que les pertes de vie sont attribuées soit aux fumeurs et à l'inflammation de vêtements soit aux fumeurs au lit. Il peut y avoir eu d'autres pertes de vie du fait d'incendies attribuables aux fumeurs, mais à moins que la mort n'ait été causée directement par l'inflammation des vêtements des victimes, elle peut avoir été attribuée à d'autres causes. Seules les statistiques relatives à l'Ontario font exception, car elles comprennent sans distinction toutes les pertes de vie attribuables aux fumeurs. Les chiffres de ce tableau montrent que les fumeurs et l'inflammation de vêtements, et les fumeurs au lit sont responsables respectivement de 11 et de 7 p. 100 du nombre total de pertes de vie du fait d'incendies et respectivement de 14 et de 9 p. 100 du nombre de pertes de vies du fait d'incendies d'origine connue.

FIRE HAZARD CHARACTERISTICS OF SMOKING MATERIALS:

Fire investigations reveal that there are two basic reasons for the large number of fires caused by a careless smoker:

1. The need for matches or cigarette lighters to ignite the smoking material.
2. The inherent "fuse" characteristics of the cigarette which enables it to continue to burn even though it is left unattended.

Of the two basic causes, the free burning, or "fuse" characteristics of a cigarette is the one which is the most dangerous from a fire hazard point of view.

The majority of the matches used by smokers are of the "safety" type rather than the "strike anywhere" type (pipe smokers excepted). The match manufacturing industry keeps a very close watch on its competitors and in particular the importers, to make certain that its product is treated to prevent "after glow". The normal method to prevent "after glow" consists of treating the splint board paper stock with a non-toxic ammonium compound (dibasic ammonium phosphate). In determining the amount of "after glow" permitted, they use either a U.S. Government specification for safety matches, or a set of regulations agreed to by the Canadian Match Industry dated June 15, 1933. Correspondence on our files indicate that the industry is doing a reasonably good job of policing the safety of its product. However, the "after glow" safety feature built into the match does not take care of the fire hazard created by the disposal of the match while it is still in the "flame" stage, nor does it reduce the hazard created when the match falls into the hands of a child.

Most flint-operated cigarette lighters are of a safe design when handled by adults. However, they become a very dangerous device if they become accessible to a child. Therefore, it would seem that the primary fire hazard associated with the source of ignition of smokers' materials is the careless disposal of flaming matches and the probability of the matches and cigarette lighters being played with by children.

The free-burning characteristic of a factory-made cigarette, as distinct from the hand-rolled cigarette, is one which has been investigated by the numerous agencies and to my

RISQUES D'INCENDIES INHÉRENTS AU MATÉRIEL DE FUMEURS

Les enquêtes sur les incendies révèlent que le grand nombre d'incendies causées par un fumeur négligent est attribuable à deux raisons fondamentales:

1. Le besoin d'allumettes ou d'un briquet pour allumer ce qu'il fume.
2. Les effets incendiaires inhérents à la cigarette, ce qui fait qu'elle continue de brûler bien qu'on ne la fume plus.

De ces deux causes fondamentales, le fait qu'une cigarette brûle d'elle-même ou qu'elle ait des effets incendiaires représente le plus grand danger du point de vue risque d'incendie.

La plus grande partie des allumettes employées sont du type «sûreté» et non du type «qu'on peut allumer partout» (sauf dans le cas des fumeurs de pipe). Le fabricant d'allumettes surveille de près ses concurrents, notamment les importateurs, afin de s'assurer que le produit est traité de façon qu'il n'ait pas de tison une fois la flamme éteinte. On y parvient d'ordinaire en traitant les éclisses de carton dont on fabrique les allumettes d'un composé d'ammonium non toxique (orthophosphate diammonique). Les fabricants d'allumettes établissent la durée du tison en conformité d'une norme du gouvernement des États-Unis ou d'une réglementation en date du 15 juin 1933 acceptée par l'industrie allumettière canadienne. D'après la correspondance protégée à nos dossiers, il semble que cette industrie exerce une assez bonne surveillance relative à la sûreté de son produit. Toutefois, la sûreté de l'allumette en fonction du tison n'assure pas qu'il n'y aura pas de risque d'incendie quand on jette une allumette en feu, ni que le risque soit moindre quand un enfant a une allumette entre les mains. La plupart des briquets à pierre sont conçus pour ne présenter aucun risque lorsqu'un adulte s'en sert. Toutefois, dans les mains d'un enfant, ils sont très dangereux.

Par conséquent, il semblerait que le principal risque d'incendie que présente l'allumage du matériel du fumeur soit la façon négligente dont on se défait d'une allumette en flammes et la possibilité qu'il y aurait pour des enfants de jouer avec des allumettes et des briquets.

La propriété de brûler d'elle-même qu'a la cigarette de fabrication commerciale, contrairement à la cigarette de fabrication domestique, a fait l'objet d'études de la part de nom-

knowledge no action has been taken by either the cigarette manufacturers, or regulatory bodies having jurisdiction, to eliminate this inherent hazard of the cigarette.

It appears that the cigarette smoker prefers cigarettes which will remain alight though unattended. However, it is a known fact that the "fuse" characteristic of a burning cigarette which has been inadvertently or carelessly left to burn, is one that destroys so many lives and so much property each year.

A Technical Information Bulletin issued by the National Research Council, dated July 22, 1949, states as follows:

"All cigarette paper is made from carefully purified flax fibers but in order to get the cigarette to burn at the same rate as the tobacco and prevent it from going out quickly when not being smoked, special porous paper is used and a definite proportion of calcium carbonate up to 20% is added to the paper to provide for this porosity. So-called booklet papers contain no calcium carbonate so that hand-made cigarettes go out unless puffed frequently. It is claimed that all the cigarette paper needed in the U.S. and much of that used in Central America, South America, Russia, Britain, Africa, Turkey and India comes from two factories in New York City and one in Elizabeth, N.J. Canadian cigarette papers are manufactured by the Howard Smith Co. . ."

A statement from the Central Experimental Farm, Tobacco Division, Ottawa, reads as follows: (dated November, 1949)

I know of no manufacturer of tobacco and cigarettes who uses any chemicals, for example, saltpetre, either to impair or improve the burn properties of his product. There are many other factors such as soil type, seasonal conditions and fertilizer content on the farm which exercise definite effects."

These statements do not alter the fact that factory-made cigarettes continue to burn when left unattended and act as a "fuse" to ignite combustible materials with which they come in contact.

breux organismes et, à ma connaissance, aucune mesure n'a été prise ni par les fabricants de cigarettes, ni par les organismes de réglementation compétents, en vue de faire disparaître ce risque inhérent à la cigarette.

Il semble que le fumeur de cigarettes préfère une cigarette qui reste allumée bien qu'il ne la fume pas. Toutefois, il est reconnu que l'effet incendiaire d'une cigarette allumée qu'on a laissé brûler par inadvertance ou négligence est la cause de tant de pertes de vie et de propriété chaque année.

On peut lire ce qui suit dans un Bulletin d'information technique publié par le Conseil national de recherches le 22 juillet 1949:

«Le papier à cigarettes est fait de fibres de lin purifiées avec soin mais afin qu'il brûle à la même allure que le tabac et que la cigarette ne s'éteigne pas rapidement quand on ne la fume pas, on emploie pour sa fabrication un papier poreux spécial auquel on ajoute une proportion donnée, jusqu'à concurrence de 20 p. 100, de carbonate de calcium, afin d'en assurer la porosité. Le papier en livrets pour cigarettes de fabrication domestique ne contient pas de carbonate de calcium, de sorte que celles-ci s'éteignent à moins qu'on en tire des bouffées fréquemment. On prétend que tout le papier à cigarettes employé aux États-Unis, de même qu'une grande partie du papier qu'emploient l'Amérique centrale, l'Amérique du Sud, la Russie, la Grande-Bretagne, l'Afrique, la Turquie et l'Inde provient de deux fabriques de New York et d'une fabrique d'Elizabeth (N.J.). Le papier à cigarettes canadien est fabriqué par la Howard Smith Co. . .»

La Division des tabacs de la Ferme expérimentale centrale, Ottawa, a déclaré ce qui suit en novembre 1949:

«Il n'y a pas à notre connaissance de fabricant de tabac ou de cigarettes qui emploie des produits chimiques, le salpêtre, par exemple, en vue d'altérer ou d'améliorer les propriétés de combustion de son produit. Il y a bien d'autres facteurs tels le genre de sol, sa teneur en engrais et les conditions saisonnières qui exercent des effets déterminants.»

Ces énoncés ne changent en rien le fait que les cigarettes de fabrication commerciale continuent de brûler par elles-mêmes et servent de «mèche» pour allumer les matériaux combustibles avec lesquels elles viennent en contact.

LEGISLATION:

A review of our files would indicate that there is legislation which prohibits smoking in certain areas of public buildings, and in areas where flammable liquids are dispensed. Most provinces have legislation which prohibits smoking in theatres and public halls; some municipalities have by-laws which prohibit smoking in department stores, and Ontario has a regulation which prohibits smoking within 10 feet of a gasoline service station pump. The Province of Saskatchewan has a hotel regulation which makes it an offence to cause a fire through the use of smoking materials while in a hotel. It reads as follows:

"UNLAWFUL IGNITION OF COMBUSTIBLE CONTENTS. Any person who in smoking or attempting to light or to smoke a cigarette, cigar, pipe or tobacco in any form for which lighters or matches are used, or any person who sets fire by negligence or accident to any bedding, furniture, curtain, drape, house or household furnishings in any hotel, shall be guilty of an offence and liable on summary conviction to a fine of not less than \$25 nor more than \$100 for the first offence and not less than \$50 nor more than \$200 for the second offence."

This Regulation has been in effect since July, 1947, and I understand that many charges have been laid and are continuing to be laid against individuals who contravene this Regulation.

It has been suggested to me that a person damaging hotel or other property occupied by the general public, by careless smoking habits, may be charged with "mischief" a criminal offence which is punishable under Sections 372, 373 and 628 of the Criminal Code of Canada.

It is a well-known fact that hotelkeepers in laying such charges under either Provincial Regulations or the Criminal Code, do so with a view or hope that they will be awarded compensation for the damage suffered, and it is more to their advantage to lay the charge under the Criminal Code. Some insurance companies insist on charges being laid.

MESURES LÉGISLATIVES:

L'étude de nos dossiers a révélé qu'il existe des mesures législatives qui interdisent de fumer dans certains secteurs d'immeubles publics et dans des secteurs où l'on a accès à des liquides inflammables. La plupart des administrations provinciales ont édicté des mesures législatives qui interdisent de fumer dans les théâtres, cinéma et autres salles publiques. Dans le cas de certaines municipalités, il est interdit de fumer dans des magasins à rayons, et, en Ontario, un règlement provincial interdit de fumer dans les dix pieds à la ronde d'une pompe à essence d'une station-service. Pour ce qui est du Saskatchewan, un règlement applicable aux hôtels range parmi les infractions à la loi le fait de provoquer un incendie au moyen du matériel dont quelqu'un se sert pour fumer dans l'hôtel. Ce règlement est ainsi conçu:

"INFLAMMATION ILLÉGALE DES EFFETS COMBUSTIBLES DE L'HÔTEL. Quiconque en fumant ou en tantant d'allumer ou de fumer une cigarette, un cigare, une pipe ou du tabac sous quelque forme que ce soit dont l'allumage requiert un briquet ou des allumettes, ou quiconque par négligence ou accident, met le feu à la literie, aux meubles, aux rideaux, aux tentures, aux accessoires mobiliers d'un hôtel quelconque, est coupable d'une infraction et passible sur déclaration sommaire de culpabilité d'une amende d'au moins \$25 ou d'au plus \$100 pour la première infraction et d'au moins \$50 et d'au plus \$200 pour la deuxième infraction".

Le règlement susmentionné est en vigueur depuis le mois de juillet 1947, et je crois comprendre que l'on a inculpé plusieurs personnes et que l'on continue d'inculper les contrevenants.

On m'a laissé entendre que quiconque cause des dommages à un hôtel ou à tout autre immeuble public par sa négligence en fumant, peut être inculpé de «méfait», acte criminel punissable en vertu des articles 372, 373 et 628 du Code criminel du Canada.

C'est un fait reconnu que lorsque les hôteliers portent plainte en vertu du règlement provincial ou du Code criminel, ils le font dans l'espoir d'être dédommagés, et il leur est plus avantageux de porter plainte en vertu du Code criminel. Certaines compagnies d'assurance exigent qu'ils portent plainte.

FIRE PREVENTION EDUCATION:

All provinces, under the auspices of their Provincial Fire Marshals or Fire Commissioners and the Federal Government through the facilities of the Office of the Dominion Fire Commissioner, have extensive fire prevention programs which are geared to motivate all people from all walks of life and age groups to become actively engaged in a fire prevention program which would reduce the loss of life and property through the ravages of fire. The campaigns take the form of posters, newspaper articles and mats, T.V. slides and sound film and radio tapes. Most Fire Marshals' and Fire Commissioners' offices have extensive fire prevention film libraries on subjects of fire prevention and fire fighting. Fires caused by smokers' carelessness are usually given pre-eminence.

Most of the fire prevention publicity material for Canada is produced by the Joint Fire Prevention Publicity Committee Incorporated. This is a non-profit organization sponsored by the Association of Canadian Fire Marshals and Fire Commissioners and the Canadian Association of Fire Chiefs. It is supported by all levels of Government and by industry. During 1968, the Committee received approximately \$68,000 in form of grants and donations which were used in the production of fire prevention materials. Radio stations, television stations and newspapers donate thousands of dollars worth of time and space as a public service using the materials supplied by this Committee.

RECOMMENDATIONS:

1. A stepped-up program of public education to bring to the attention of all Canadian citizens, the hazards and consequences of careless smoking habits.
2. Encourage the tobacco industry to reduce the "fuse" effect of the cigarette.
3. A stepped-up legislative program to reduce the probability of a careless smoker causing a fire which would endanger the life and property of others. Example, places of public assembly, large department stores, passenger elevators, emergency exitways.

Submitted by:

R. A. Switzer,
Dominion Fire Commissioner.

February, 1969.

ÉDUCATIVE DU PUBLIC EN MATIÈRE DE PRÉVENTION DES INCENDIES

Chaque administration provinciale, sous l'égide de ses prévôts ou commissaires des incendies et du gouvernement fédéral par l'intermédiaire du Commissariat fédéral des incendies, met en œuvre de nombreux programmes en matière de prévention des incendies qui visent à inciter toutes les classes de la société et tous les groupes d'âge à participer activement à un programme de prévention des incendies qui permette d'amoinrir la perte de vie et de propriété attribuable à l'incendie.

Les campagnes se traduisent par des affiches, des articles et des photographies publiés dans les journaux, des films sonores et des diapositives télédiffusés et des rubans magnétiques radiodiffusés. La plupart des prévôts et commissaires des incendies disposent de cinémathèques bien garnies en matière de prévention des incendies et de lutte contre l'incendie. On insiste d'ordinaire sur les incendies attribuables à la négligence des fumeurs.

Au Canada, la plus grande partie de la documentation publicitaire en matière de prévention des incendies provient du *Joint Fire Prevention Publicity Committee Incorporated*, organisme à but non lucratif parrainé par l'*Association of Canadian Fire Marshals and Fire Commissioners* et la *Canadian Association of Fire Chiefs*. L'entreprise privée et tous les niveaux de gouvernement lui accordent leur soutien. Au cours de 1968, le *Committee* a reçu en dons et subventions une somme d'environ \$68,000 qui a servi à établir la documentation susmentionnée. Les stations de radio et de télévision et les journaux accordent l'équivalent de milliers de dollars en permettant à ce *Committee* d'y faire passer des messages d'intérêt public fondés sur la documentation qu'il fournit à ces moyens de communication.

NOUS PRÉCONISONS:

1. Pousser la mise en œuvre d'un programme d'éducation du public qui fasse ressortir aux yeux des citoyens canadiens les risques et conséquences qu'entraîne la négligence des fumeurs.
2. Exhorter l'industrie du tabac à diminuer l'effet incendiaire de la cigarette.
3. Pousser l'adoption de mesures législatives qui réduisent la possibilité qu'un fumeur négligent soit la cause d'un incendie qui soit pour autrui un risque de perte de vie ou de propriété, notamment, dans les lieux de rassemblement, les grands magasins, les ascenseurs, et aux issues de secours.

Le Commissaire fédéral des incendies,

Présenté par: R.A.W. Switzer.

Février 1969.

TABLE I
FIRES INVOLVING SMOKERS' CARELESSNESS, 1957-66

Year	Property						Forests	
	No.	% Total*	% Known**	Loss	% Total*	% Known**	No.	%
				\$				
1957.....	31,425	38	45	6,022,515	5	10	1,042	17
1958.....	36,052	41	48	5,656,205	5	10	1,222	16
1959.....	34,028	40	47	5,914,818	5	10	815	15
1960.....	31,037	39	46	6,559,352	5	11	1,182	13
1961.....	32,659	39	46	6,693,799	5	11	1,596	18
1962.....	31,637	37	44	7,448,721	5	9	1,205	19
1963.....	28,500	34	43	9,359,174	6	12	1,705	22
1964.....	23,156	31	39	8,245,166	6	11	1,546	22
1965.....	21,563	32	39	8,668,874	6	12	Not available	
1966.....	22,140	32	39	6,447,369	4	7	Not available	
Average....	29,220	37	44	7,101,599	5	10	1,289	18

*% of Total Number of Fires

**% of Number of Fires of Known Origin

TABLE 2
FIRE DEATHS INVOLVING SMOKING AND IGNITION OF CLOTHING, 1957-66

Year	Smoking and Ignition of Clothing			Smoking in Bed		
	No.	% Total*	% Known**	No.	% Total	% Known**
1957.....	56	9	11	41	6	8
1958.....	56	11	14	32	6	8
1959.....	40	7	9	33	6	7
1960.....	40	7	9	39	7	9
1961.....	68	12	16	50	9	12
1962.....	71	11	15	35	6	7
1963.....	74	13	18	39	7	9
1964.....	66	11	14	35	6	7
1965.....	73	12	16	35	6	7
1966.....	85	15	18	63	11	14
Average....	63	11	14	40	7	9

*% of Total Number of Fires

**% of Number of Fires of Known Origin

TABLEAU I
INCENDIES ATTRIBUABLES À LA NÉGLIGENCE DES FUMEURS, 1957-66

Année	Propriétés						Forêts	
	Nombre	% du total*	% origine connue**	Pertes	% du total*	% origine connue**	Nombre	%
				\$				
1957.....	31,425	38	45	6,022,515	5	10	1,042	17
1958.....	36,052	41	48	5,656,205	5	10	1,222	16
1959.....	34,028	40	47	5,914,818	5	10	815	15
1960.....	31,037	39	46	6,559,352	5	11	1,182	13
1961.....	32,659	39	46	6,693,799	5	11	1,596	18
1962.....	31,637	37	44	7,448,721	5	9	1,205	19
1963.....	28,500	34	43	9,359,174	6	12	1,705	22
1964.....	23,156	31	39	8,245,166	6	11	1,546	22
1965.....	21,563	32	39	8,668,874	6	12	non disponibles	
1966.....	22,140	32	39	6,447,369	4	7	non disponibles	
Moyenne	29,220	37	44	7,101,599	5	10	1,289	18

*% du nombre total d'incendies.

**% du nombre d'incendies d'origine connue.

TABLEAU II
PERTES DE VIE DU FAIT D'INCENDIES ATTRIBUABLES AUX FUMEURS
ET AUX VÊTEMENTS QUI ONT PRIS FEU, 1957-66

Année	Fumeurs et vêtements qui ont pris feu			Fumeurs au lit		
	Nombre	% du total*	% origine connue**	Nombre	% du total*	% origine connue**
1957.....	56	9	11	41	6	8
1958.....	56	11	14	32	6	8
1959.....	40	7	9	33	6	7
1960.....	40	7	9	39	7	9
1961.....	68	12	16	50	9	12
1962.....	71	11	15	35	6	7
1963.....	74	13	18	39	7	9
1964.....	66	11	14	35	6	7
1965.....	73	12	16	35	6	7
1966.....	85	15	18	63	11	14
Moyenne.....	63	11	14	40	7	9

*% du nombre total d'incendies.

**% du nombre d'incendies d'origine connue.

HOUSE OF COMMONS

CHAMBRE DES COMMUNES

First Session

Première session de la

Twenty-eighth Parliament, 1968-69

vingt-huitième législature, 1968-1969

STANDING COMMITTEE
ON

LIBRARY COMITÉ PERMANENT

DE LA

HEALTH, WELFARE AND
SOCIAL AFFAIRS

MAR 24 1969

SANTÉ, DU BIEN-ÊTRE SOCIAL
ET DES AFFAIRES SOCIALES

Chairman

M. Gaston Isabelle

Président

MINUTES OF PROCEEDINGS
AND EVIDENCEPROCÈS-VERBAUX ET
TÉMOIGNAGES**No. 20**

THURSDAY, FEBRUARY 27, 1969

LE JEUDI 27 FÉVRIER 1969

Respecting the subject-matter of

Concernant la question de fond des

Bill C-39, An Act to amend the Broadcast-
ing Act (cigarette advertising).Bill C-39, Loi modifiant la Loi sur la radio-
diffusion (Annonces de cigarettes).Bill C-45, An Act to restrain the use of
Tobacco.Bill C-45, Loi visant à restreindre l'usage
du tabac.Bill C-53, An Act to amend the Food and
Drugs Act.Bill C-53, Loi modifiant la Loi des aliments
et drogues.Bill C-134, An Act to amend the Tobacco
Restraint Act.Bill C-134, Loi modifiant la Loi sur la ré-
pression de l'usage du tabac chez les ado-
lescents.Bill C-137, An Act to amend the Broad-
casting Act (Prohibition of cigarette
advertising).Bill C-137, Loi modifiant la Loi sur la radio-
diffusion (Interdiction de réclames de ci-
garettes).Bill C-147, An Act to control the tar con-
tent and nicotine level of cigarettes.Bill C-147, Loi ayant pour objet de contrôler
la teneur en goudron et en nicotine des
cigarettes.

WITNESSES—TÉMOINS

(See Minutes of Proceedings)

(Voir Procès-verbaux)

STANDING COMMITTEE ON
HEALTH, WELFARE AND
SOCIAL AFFAIRS

Chairman
Vice-Chairman

M. Gaston Isabelle
Mr. Steve Otto

and Messrs.

Forget,
Fortin,
Foster,
Godin,
Guilbault

Haidasz,
Howe,
Mrs. MacInnis (M^{me}),
McBride,
Monteith,
Osler,

(Quorum 11)

La secrétaire du Comité:

Gabrielle Savard

Clerk of the Committee.

COMITÉ PERMANENT DE
LA SANTÉ, DU BIEN-ÊTRE SOCIAL
ET DES AFFAIRES SOCIALES

Président
Vice-président

et Messieurs

Ritchie,
Robinson,
Rochon,
Rynard,
Thomas (*Maisonneuve*),
Yewchuk—(20).

(Text)

MINUTES OF PROCEEDINGS

THURSDAY, February 27, 1969.

(24)

The Standing Committee on Health, Welfare and Social Affairs met this day at 11.15 o'clock a.m. The Chairman, Mr. Gaston Isabelle, presided

Members present: Mrs. MacInnis and Messrs. Fortin, Foster, Haidasz, Howe, Isabelle, Mather, McBride, Monteith, Osler, Otto, Robinson, Rynard, Yewchuk—(14).

Witnesses: Representing the Canadian Medical Association: Dr. R. M. Matthews, President-Elect, Peterborough; Dr. N. C. Delarue, Assistant Professor (Surgery), University of Toronto, Toronto; Dr. D. V. Bates, Royal Victoria Hospital, Montreal; Dr. Y. Morin, Cardiologist—Staff, Laval University, Quebec City; Dr. A. F. W. Peart, General Secretary, C.M.A.; Dr. R. M. Lane, Victoria Island Health Centre, Chairman, C.M.A. Standing Committee on Public Health, Victoria; Dr. W. A. Maclean, General Surgeon, Active Staff Royal Alexandra Hospital, Edmonton; Mr. D. A. Deekie, Secretary, Public Relations, C.M.A.

The Chairman read into the record letters received

from R. E. Beamish, M.D., F.R.C.P.(C), F.R.C.P. (Edin.), Department of Cardiology, Manitoba Clinic, Winnipeg;

from C. H. Weder, M.D., F.R.C.S.(C), Associate Professor of Clinical Surgery, University of Saskatchewan, University Hospital, Saskatoon;

from H. Bower, President, Saskatchewan Division, Canadian Cancer Society, Regina.

The Chairman introduced Dr. Matthews who, in turn, introduced the other members of the delegation.

(Texte)

PROCÈS-VERBAL

Le JEUDI 27 février 1969.

(24)

Le Comité permanent de la Santé, du Bien-être social et des Affaires sociales se réunit aujourd'hui à 11 h. 15 de l'avant-midi, sous la présidence de M. Gaston Isabelle, président.

Présents: M^{me} MacInnis, MM. Fortin, Foster, Haidasz, Howe, Isabelle, Mather, McBride, Monteith, Osler, Otto, Robinson, Rynard, Yewchuk—(14).

Témoins: Pour représenter l'Association Médicale Canadienne: Docteur R. M. Matthews de Peterborough, Président de l'A.M.C.; Docteur N. C. Delarue de Toronto, Professeur assistant (chirurgie), Université de Toronto; Docteur D. V. Bates de Montréal, Médecin à l'Hôpital Royal Victoria; Docteur Y. Morin de Québec, Cardiologue—Institut de cardiologie de Québec, et membre de la Faculté, Université Laval; Docteur A. F. W. Peart de Toronto, secrétaire général, A.M.C.; Docteur R. M. Lane de Victoria, Victoria Island Health Centre, et président de la Commission permanente de l'A.M.C. sur l'hygiène publique; Docteur W. A. Maclean d'Edmonton, chirurgien général, Hôpital Royal Alexandra; M. D. A. Deekie de Toronto, secrétaire, Relations publiques.

Le président lit les lettres reçues du D^r R. E. Beamish, M.D., F.R.C.P.(C), F.R.C.P. (Edin.), de Winnipeg, du département de cardiologie de la clinique du Manitoba; du D^r C. H. Weder, M.D., F.R.C.S.(C), de Saskatoon, professeur adjoint de chirurgie clinique à l'hôpital universitaire, Université de la Saskatchewan; et du Docteur H. Bower de Regina, président de la division de la Saskatchewan de la Société canadienne du Cancer.

Le président présente le Docteur Matthews qui, à son tour, présente les autres membres de la délégation.

Agreed,—That the brief of the Canadian Medical Association re: Smoking and Health, be printed as an appendix to this day's proceedings (*See Appendix H*).

Dr. Matthews went briefly through the brief; Drs. Delarue, Morin, Bates, Lane and Maclean made short statements relevant to their particular fields.

The witnesses were questioned.

The questioning concluded, the Chairman expressed his gratitude to the delegates of the Canadian Medical Association.

At 1.12 p.m. the Committee adjourned.

Il est convenu,—Que le mémoire de l'Association Médicale Canadienne sur le tabac et la santé soit imprimé en appendice au compte rendu (*voir appendice H*).

Le Docteur Matthews résume les grandes lignes du mémoire; les docteurs Delarue, Morin, Bates, Lane et Maclean font quelques remarques pertinentes.

Les témoins sont interrogés.

L'interrogatoire terminé, au nom du Comité le Président remercie les délégués de l'Association et à 1 h. 12 de l'après-midi, le Comité s'ajourne.

*La secrétaire du Comité,
Gabrielle Savard,
Clerk of the Committee.*

[Texte]

EVIDENCE

(Recorded by Electronic Apparatus)

Thursday, February 27, 1969

1118

The Chairman: Lady and gentlemen, I now see a quorum. First of all I would like to read to the Committee three short letters I have received. The first one is from Dr. R. E. Beamish of the Department of Cardiology of the Manitoba Clinic in Winnipeg:

Dear Doctor Isabelle:

Re: Smoking and Health

It is noted that your Committee has been studying the above problem and I commend your interest and activity in this area. As a practising physician in the cardiovascular field, I feel that the role of cigarette smoking in diseases of the heart and arteries is a most important one and merits governmental study and action.

May you and your committee have much success in your efforts to reduce the consumption of cigarettes in Canada.

Yours sincerely,

R. E. Beamish, M.D.,

F.R.C.P. (C), F.R.C.P. (Edin).

Department of Cardiology.

The second one is from Dr. C. H. Weder, Associate Professor of Clinical Surgery of the University of Saskatchewan:

Dear Dr. Isabelle:

As a surgeon who in my professional life has to deal constantly with people suffering from cancer of the lung and who knows how ineffectual our present method of treatments are, I wish to commend the proposed bill to prohibit the advertising of cigarettes. While it seems unlikely the incorrigible elders will give up the habit, to make it attractive to youngsters particularly by the use of sex symbols and other diabolical devices seems to be unfair to our future generations.

[Interprétation]

TÉMOIGNAGES

[Enregistrement électronique]

Le jeudi 27 février 1969

Le président: Madame, messieurs, nous avons maintenant atteint le quorum. Tout d'abord, je voudrais donner lecture au Comité de trois courtes lettres que j'ai reçues. La première nous vient du docteur R.E. Beamish, du département de cardiologie de la clinique du Manitoba, à Winnipeg:

Monsieur le Docteur,

Sujet: Tabac et santé

On nous apprend que votre comité a étudié le problème mentionné ci-dessus, et je vous félicite de votre intérêt et de votre activité dans ce secteur. A titre de médecin pratiquant spécialiste des maladies cardio-vasculaires, j'ai l'impression que le rôle de la cigarette dans les maladies du cœur et des artères est très important et mérite l'étude et l'action du gouvernement.

J'espère que vous-même et votre Comité aurez beaucoup de succès dans vos efforts en vue de réduire la consommation de cigarettes au Canada.

Veuillez agréer, monsieur le Docteur, l'assurance de ma considération distinguée.

R.E. Beamish, docteur en médecine,

F.R.C.P.(C), F.R.C.P. (Édimbourg),

Département de cardiologie.

La deuxième lettre nous vient du docteur C.H. Weder, professeur assistant de chirurgie clinique de l'Université de la Saskatchewan.

Monsieur le Docteur,

A titre de chirurgien qui, au cours de l'exercice de sa profession, traite constamment des gens qui souffrent du cancer du poumon, et qui sait combien peu efficaces sont les méthodes de traitement à l'heure actuelle, je tiens à vous féliciter du Bill que vous vous proposez d'adopter en vue d'empêcher la publicité pour la cigarette. Il semble peu probable que les fumeurs invétérés d'un certain âge abandonnent cette habitude, mais il me semble injuste à l'égard des générations futures de rendre la cigarette attrayante pour les jeunes, surtout par l'usage de symboles sexuels et autres moyens diaboliques.

[Text]

[Interpretation]

• 1120

I trust that you may have more success with your private members bill in this regard than is usually the case. I would encourage you, however, to keep trying as perhaps it may have an educational experience on some of the Members of Parliament whatsoever party they belong.

Best wishes for the future.

Yours very truly,

C. H. Weder M.D., F.R.C.S. (C)
Associate Professor of Clinical Surgery.

J'espère que ce Bill aura plus de succès que n'en ont d'ordinaire les bills privés. Je voudrais, cependant, vous encourager à persévérer, car ce sera peut-être une expérience très instructive pour certains députés, quel que soit leur parti.

Meilleurs vœux pour l'avenir.

Veuillez agréer, monsieur le Docteur, l'assurance de ma considération distinguée.

C.H. Weder, docteur en médecine,
F.R.S.C.(C)

Professeur assistant de chirurgie clinique.

We have another letter from H. Bower, President, Saskatchewan Division, Canadian Cancer Society:

Honorable Sir:

We were very pleased to learn that your Committee has undertaken a study of the subject-matter of six Private Members' Bills relating to tobacco and cigarette smoking, and measures to be taken to help overcome the health hazard resulting from the habit of cigarette smoking, and will in due course make recommendations to Parliament.

As an individual personally and deeply interested in this subject, we believe your Committee members and you are to be commended for the steps you have taken and will propose to bring about greater control of the problem.

Only through co-ordination of all our resources, National, Provincial and Local, will we be able to overcome this detriment to a strong and healthy Canada. We would therefore offer our greatest encouragement to you and your members, as you lead in this most humanitarian service.

Yours truly,

H. Bower, President
Saskatchewan Division
Canadian Cancer Society

Nous avons aussi une autre lettre qui nous vient de M. H. Bower, président de la division de la Saskatchewan, de la Société canadienne du cancer.

Monsieur le docteur,

Nous sommes très heureux d'apprendre que votre Comité a entrepris une étude de la question qui a fait l'objet de six bills privés relatifs au tabac et à la cigarette, ainsi qu'aux mesures à prendre pour aider à surmonter les dangers pour la santé qui résultent de l'usage habituel de la cigarette, et que le Comité fera ensuite des recommandations au Parlement. Étant personnellement très intéressé par la question, j'estime que les membres de votre Comité et vous-même devez être félicités des mesures que vous avez prises, et que vous envisagez d'amener un plus grand contrôle de ce problème.

C'est seulement grâce à la coordination de toutes nos ressources, nationales, provinciales et locales, que nous parviendrons à vaincre ce danger qui menace un Canada fort et sain. Nous offrons à vous-même et aux membres du Comité nos très vifs encouragements, car vous avez pris la tête d'un service extrêmement humanitaire.

Veuillez agréer, monsieur le Docteur, l'assurance de ma considération distinguée.

H. Bower,
président de la division de la
Saskatchewan de la Société
canadienne du cancer.

We do not have any more for this morning; maybe some more will be received later.

Nous n'avons pas d'autres lettres ce matin, nous en recevrons peut-être d'autres plus tard.

[Texte]

Mr. Otto: Mr. Chairman, on a point of order: if these are to be read into the record, shall we extend the invitation to the whole country to send letters of either acclaim or condemnation and read them all, or are we going to limit it to doctors, or shall we ask everyone in Canada to send letters to state their point of view to this Committee?

The Chairman: No. We have read those letters because they are from professors and very prominent members of the medical profession and I imagine that they are the ones that, up to now, are taking care of the health of this country. So, I believe that this will be quite interesting, not just to know their comments, but that when we receive comments like that from prominent people to let the people know about it.

Mr. Howe: Mr. Chairman, might I comment on that point of order? This is such an important and interesting and necessary type of study we are conducting that I think that we should welcome people writing and giving us encouragement and assistance in any way possible. This Committee is not going to be through in a day, or a week or a month. I have the evidence here from the United States where it has been sitting for two years and I do not think we should think of rushing this thing through but should welcome anybody who has any ideas or anything to add to this Committee.

Mr. Yewchuk: A further point of order, Mr. Chairman. Maybe Mr. Otto wants us to read his letter to his constituents in this Committee too.

The Chairman: Order.

Mr. Otto: On a point of order, Mr. Chairman, I am saying that if we are going to invite letters we should let the public know all their letters are welcome and that they will all be published. However, we will have to have a volume that...

The Chairman: We will discuss this at the steering committee, this afternoon, please.

Mr. Robinson: On the point of order, Mr. Chairman, it would seem to me that since we have before us today the representatives of the Canadian Medical Association that it was quite proper to read letters from eminent doctors who are members of the Association.

The Chairman: Thank you, sir. Let us pass this important matter to the steering committee this afternoon and the steering committee will make recommendations in regard to let-

[Interprétation]

M. Otto: Monsieur le président, j'invoque le Règlement. Si ces lettres doivent être lues et imprimées, allons-nous inviter le pays tout entier à nous envoyer des lettres de félicitations ou de reproches que nous lirons ici, ou allons-nous nous en tenir aux lettres des médecins; ou encore, allons-nous demander à tous les Canadiens de nous écrire pour nous faire part de leur point de vue?

Le président: J'ai lu ces lettres-là parce qu'elles venaient de professeurs et de membres éminents de la profession médicale et je suppose que ce sont eux qui, jusqu'ici, prennent soin de la santé de la population. J'ai donc pensé qu'il serait très intéressant, non seulement d'avoir leur opinion, mais aussi de la faire connaître au public, lorsqu'il s'agit de personnes éminentes comme celles-là.

M. Howe: Monsieur le président, j'aimerais faire une observation sur ce rappel au Règlement. L'étude à laquelle nous nous livrons actuellement est si importante, si intéressante et si nécessaire qu'à mon avis, nous devrions être très heureux que l'on nous écrive pour nous encourager et nous aider, de quelque façon que ce soit. Notre Comité ne terminera pas ses travaux d'ici un jour, une semaine, ou même un mois. Aux États-Unis, le Comité a siégé pendant deux ans, et je pense que nous ne devons pas expédier à la hâte ce sujet, et que nous devons au contraire être heureux que des gens nous envoient leurs idées et leurs propositions.

M. Yewchuk: Un autre rappel au Règlement, monsieur le président. Peut-être M. Otto voudrait-il aussi que nous lisions au comité sa lettre à ses mandants.

Le président: A l'ordre!

M. Otto: Rappel au Règlement, monsieur le président. Je pense que si nous invitons le public à nous écrire, nous devons lui faire savoir que toutes les lettres seront bien reçues et seront publiées. Mais il nous faudra avoir un volume qui...

Le président: Messieurs, nous en parlerons cet après-midi au comité de direction.

M. Robinson: Au sujet de ce rappel au Règlement, monsieur le président, j'estime qu'étant donné que nous avons ici aujourd'hui des représentants de l'Association médicale canadienne, il était parfaitement normal de lire ces lettres qui nous viennent de médecins éminents membres de l'Association.

Le président: Merci monsieur. Confions cette importante question au comité de direction, qui siégera cet après-midi, et qui fera des recommandations au sujet des lettres que

[Text]

ters received and what we should do with those letters. I imagine we will receive a lot of them.

Gentlemen, today it is our pleasure to welcome a delegation from a most distinguished group of Canadian citizens.

Mr. Robinson: Advertising agencies.

The Chairman: Order, please. I was talking about the Canadian Medical Association. Their brief is already in your hands and I will ask Dr. Matthews, who is the President-Elect of the Canadian Medical Association to introduce the members of the delegation.

• 1125

Dr. R. M. Matthews (President-Elect, Canadian Medical Association): Mr. Chairman, madam, gentlemen, it is my pleasure to introduce our delegation to you today. We have gathered from across Canada a number of people who are authorities in their respective fields to make their specialized knowledge available to this Committee.

On my right I have Dr. N. C. Delarue, who is the Assistant Professor of Surgery of the University of Toronto, Senior Consultant in Thoracic Surgery to the Toronto General Hospital, Senior Consultant in Surgery to the Ontario Cancer Institute and the Canadian Medical Association representative to the Department of National Health and Welfare Technical Advisory Committee on Smoking and Health.

Further to my right is Dr. Y. Morin, who is a Cardiologist to the Institut of Cardiologie de Québec who is an authority on cardiovascular disease generally.

Also Dr. D. V. Bates from Montreal who is the Associate Dean of the Faculty of Medicine of McGill University, Professor of Medicine and Chairman of the Department of Physiology at McGill University. He has special interests in the field of pulmonary disease, he is a member of the Technical Advisory Committee on Smoking and Health to the National Institute of Health at Bethesda in Maryland.

Dr. A. F. W. Peart is the General Secretary of the Canadian Medical Association.

Dr. R. M. Lane is the Chairman of the Canadian Medical Association Standing Committee on Public Health, a Director of the Victoria Island Health Centre and an authority on chest diseases in his own right.

Dr. W. A. MacLean is a General Surgeon from the University of Alberta and the Chairman of our Standing Committee on Cancer.

[Interpretation]

nous allons recevoir et de ce que nous devrions en faire. Je suis certain que nous allons en recevoir beaucoup.

Messieurs, nous sommes heureux d'accueillir aujourd'hui une délégation extrêmement distinguée de citoyens canadiens.

M. Robinson: Les agences de publicité.

Le président: A l'ordre, s'il vous plaît! Je parlais de l'Association médicale canadienne. Vous avez déjà le mémoire, et je vais demander au Dr. Matthews, président de l'Association, de nous présenter les membres de sa délégation.

M. Matthews (président de l'Association médicale canadienne): Monsieur le président, madame, messieurs, j'ai le plaisir de vous présenter notre délégation. Nous avons assemblé des diverses régions du Canada, ses gens qui sont des autorités dans leurs domaines respectifs et sont prêts à mettre leurs connaissances spécialisées à la disposition du Comité.

J'ai à ma droite le Dr. N. C. Delarue, professeur assistant de chirurgie à l'Université de Toronto, premier chirurgien conseil en chirurgie du thorax à l'Hôpital général de Toronto, premier chirurgien conseil en chirurgie à l'Institut du cancer de l'Ontario et représentant de l'Association médicale canadienne au Comité consultatif technique sur le tabac et la santé auprès du ministère de la Santé nationale et du Bien-être social. Nous avons ensuite, toujours à ma droite, le docteur Y. Morin, cardiologue à l'Institut de cardiologie de Québec, qui est une autorité sur les maladies cardio-vasculaires en général.

Puis le Dr. D. V. Bates, de Montréal, vice-doyen de la Faculté de médecine de l'Université McGill, professeur de médecine et président du département de physiologie de l'Université McGill. Il s'intéresse tout particulièrement aux maladies pulmonaires, et il est membre du comité consultatif sur le tabac et la santé auprès de l'Institut national de la santé de Bethesda, dans le Maryland. Le Dr. A. F. W. Peart est secrétaire général de l'Association médicale canadienne.

Le Dr. R. M. Lane est président de la Commission permanente de l'Association médicale canadienne sur l'hygiène publique et directeur du *Victoria Island Health Centre*; c'est une autorité sur les maladies du thorax.

Le Dr. W. A. Maclean est chirurgien général, il enseigne à l'Université de l'Alberta, et il est président de la Commission permanente de notre Association sur le cancer.

[Texte]

Mr. D. A. Geekie is the Secretary of Public Relations to the Canadian Medical Association with a special interest in educational work, particularly in the field of chest diseases, where he spent several years before coming to the Canadian Medical Association.

That, sir, is the delegation and I hope they will be of some service to this Committee. The Chairman has given me permission to abstract this brief. I do not think we need to read it.

The Chairman: Is it agreed, because everyone has received a copy, that the brief be printed as an appendix to today's Minutes of Proceedings and Evidence.

Some hon. Members: Agreed.

(See attached)

Dr. Matthews: We wish to state, first, that we feel as an Association that it is impossible to emphasize too strongly the importance and seriousness which we attach to the subject before the Committee. The story of the health hazard created by cigarette smoking represents an unrivalled tale of illness, disability and death. We feel that the potential benefits to be derived from the cessation of smoking place it in a level of importance in preventive medicine with pasteurization of milk, chlorination of water and immunization generally against such diseases as small pox, diphtheria and polio.

We as an Association have been interested in the subject since 1959. As the story unfolded there was growing evidence that not only were cigarettes involved in lung cancer but, to a great extent, in diseases such as bronchitis, bronchiectasis, emphysema and coronary disease itself.

We submitted a brief to the National Conference on Smoking and Health convened by the former Minister of National Health and Welfare, the Honourable Miss LaMarsh, on November 25, 1963. We documented in this brief the hazards as they appeared to us at this time, and we made certain recommendations after undertaking first to carry out a concerted program of professional education with our own members. We requested help from the federal government in a program of public education and from the Department of National Health and Welfare in making educational material available. We suggested that there could not be too much research done in this field.

We recommended specifically as an interim step in the production of an entirely safe cigarette that cigarettes of lower tar and nico-

[Interprétation]

M. D. A. Geekie est secrétaire des relations publiques de l'Association médicale canadienne, et il s'intéresse tout particulièrement au travail éducatif, surtout dans le domaine des maladies du thorax, dont il s'est occupé pendant plusieurs années avant de se joindre à l'Association médicale canadienne.

Voilà, monsieur, comment se compose notre délégation, et j'espère qu'elle pourra aider les membres du Comité en répondant à leurs questions. Le président m'a permis de sauter ce mémoire. Je pense que nous n'avons pas besoin de le lire.

Le président: Tout le monde en a reçu un exemplaire. La résolution adoptée veut que l'on annexe le mémoire aux comptes rendus d'aujourd'hui. D'accord.

Des voix: D'accord.

M. Matthews: A titre d'Association, nous trouvons qu'il est impossible de ne pas suffisamment insister sur l'importance et la gravité de ce sujet devant le comité. Les ravages causés à la santé par l'usage du tabac constituent une longue histoire de maladies, et de décès. Les avantages inhérents de l'arrêt de l'usage de la cigarette les placent dans la médecine préventive, au niveau de la pasteurisation du lait, du chlorage de l'eau et de la vaccination contre des maladies telles que la petite vérole, la diphtérie et la poliomyélite. A titre d'Association, nous nous sommes intéressés au problème depuis 1959. De plus en plus on s'est aperçu que non seulement la cigarette était responsable de cancers du poumon mais aussi des bronchites, des bronchectasies, de l'emphysème, des maladies coronariennes.

Nous avons soumis un mémoire, le 25 novembre 1963, alors que l'honorable Judy LaMarsh avait tenu conférence nationale sur la santé et le bien-être durant son passage au ministère de la Santé et du Bien-être social. Nous avons décrit dans ce mémoire les dangers tels qu'ils nous apparaissaient à l'époque, et nous avons émis certaines recommandations aux fins d'entreprendre un programme d'éducation au sein de notre propre organisme. Nous avons demandé l'aide du ministère de la Santé nationale et du Bien-être social pour la fourniture de matériel éducatif, en insistant sur le fait qu'il ferait jamais trop de recherches dans ce secteur.

Ce mémoire recommandait comme étape provisoire dans la production d'une cigarette absolument sûre, que l'on fabrique des ciga-

[Text]

tine content be produced and that the contents of these substances be described on each cigarette package.

• 1130

We recommended that the content of advertising be altered to promote moderation and to discourage the use of the product, particularly by children and young adults.

We recommended that certain provisions of the Tobacco Restraint Act be enforced.

And we recommended that ways and means of encouraging the use of less dangerous forms of tobacco be explored.

Some of this has been done, as you know, and we are grateful to the efforts of the Department of National Health and Welfare in their program of continuing public education.

We have continued to study this matter, to follow the work that has been done and the extensive scientific evidence that is being continually published. We believe that there is no longer any scientific controversy regarding the risk created by cigarette smoking.

Perhaps at this time we could provide a brief review of the medical facts related to smoking in the particular fields which are a hazard. So far as chronic bronchitis and emphysema are concerned, the figures that we have quoted and which you are familiar with speak for themselves. We say that it is conceivable that chronic bronchitis and emphysema well prove to be the most costly medical consequences of cigarette smoking in terms of disability, premature loss of life in the productive years of life and hospital and medical care.

In respect of lung cancer, again there is no question regarding the ideology, and it is definitely established that the earlier one begins smoking, the more one smokes, the more one inhales, and the longer one smokes, the greater the risk. There is no doubt also that certain other types of cancer, particularly of the mouth, throat and bladder, are definitely associated in direct relationship to cigarette smoking.

Heart disease, from the evidence that has been accumulating recently, is the leading cause of death in Canada, and again is intimately associated with cigarette smoking. The over-all probability of death caused by heart disease has increased by 70 per cent in cigarette smokers generally.

We have listed certain other conditions, that perhaps are less dramatic, perhaps where cigarette smoking is less likely to be

[Interpretation]

rettes contenant moins de goudron et de nicotine, et que la quantité de ces substances soit inscrite sur chaque paquet; recommandait qu'en général la publicité soit modifiée de manière à encourager la modération et à décourager l'emploi du produit chez les enfants et les jeunes adultes; recommandait que certaines dispositions de la Loi sur la répression de l'usage du tabac chez les adolescents soient mises en vigueur; recommandait qu'on étudie les moyens d'encourager l'emploi du tabac sous des formes moins dangereuses.

Une part de ces recommandations ont été entérinées. Et nous sommes reconnaissants envers le ministère quant aux mesures prises dans son programme d'éducation publique.

Nous avons continué à étudier la question et nous suivons les travaux qui s'effectuent et les preuves exhaustives publiées continuellement. Il n'y a pas de doute quant au risque que représente le tabac et surtout l'usage de la cigarette. Nous pourrions peut-être maintenant passer rapidement en revue les découvertes médicales relatives aux maladies et aux conséquences de l'usage de la cigarette. Les chiffres relatifs à la bronchite chronique et à l'emphysème que nous citons, et que vous connaissez, parlent d'eux-mêmes. Nous affirmons que la bronchite chronique et l'emphysème sont les conséquences médicales les plus coûteuses vis-à-vis de l'usage de la cigarette. Ces maladies entraînent en général l'augmentation de l'impotence et de la mortalité prématurée au cours de la période productive de la vie humaine, et sont responsables du nombre de soins médicaux et d'hospitalisation.

Plus on fume, plus on aspire la fumée, et plus on commence à fumer jeune, plus les risques sont grands. Il ne fait aucun doute que d'autres genres de cancers, notamment de la bouche, de la gorge et de la vésicule biliaire sont directement reliés à l'usage du tabac.

Les maladies cardiaques, selon les preuves qui ont été accumulées récemment, montrent que la principale cause de décès au Canada, est encore une fois, intimement liée à l'usage du tabac et la probabilité de mortalités est augmentée de 70 p. 100 pour les fumeurs dans les cas des maladies du cœur.

Nous avons énuméré d'autres maladies qui elles, sont peut-être moins dramatiques, mais dont l'agent causal est définitivement la ciga-

[Texte]

the only factor or the major factor involved, but nevertheless these are definitely associated with smoking. We have listed sinusitis, peptic and gastric ulcers, and cerebrovascular accidents among smokers, premature birth, low birth rates, disorders of the peripheral circulation and the hazard association of accidental burns arising from smoking mishaps which is of the extent that cannot be ignored.

We have dealt with disability to some extent, with mortality, you are familiar with the statistics regarding life expectancy, and I do not need to go over those again. We have quoted the Surgeon General who appointed the original committee which is the basis of a lot of subsequent work in the States regarding chronic disability and the effect generally on the quality of living.

We have discussed the question of giving up the habit. Academically, it seems that a great proportion of smokers would like to give up the habit. The Minister, in his brief to this Committee, stated that his figures showed that 45 per cent of smokers have seriously tried to stop smoking. We admit it is a difficult problem, we know that it is a major undertaking, and perhaps the deliberations of the Committee could be focused not so much anymore on the hazards of cigarettes, which are proven, but on the ways and means of encouraging people to stop smoking.

It is with mixed feelings that we reported a survey of the proportion of doctors who smoke. The figures are on the decline. The figures show that the percentage of doctors who have stopped smoking is greater than the percentage of the general population who have stopped. We still regret that 35 per cent of Canadian physicians still smoke cigarettes regularly. Some success obviously has been obtained, both with doctors and with the population at large. We have to come to the conclusion that the dissemination of information alone is not enough. The Canadian Medical Association is of the opinion that more must be done, and that more strenuous and direct efforts are indicated.

• 1135

We have made several recommendations to this Committee. In view of the extensive evidence indicting cigarette smoking as a major health hazard and in an effort to reduce this major public health problem the Canadian Medical Association is pleased to support the intent of the private members' bills currently before this Committee and the presentation of the Honourable John Munro, Minister of National Health and Welfare, to the Committee on December, 1968.

[Interprétation]

rette. Nous avons cité les sinusites, les ulcères gastriques et duodénaux, les accidents cérébrovasculaires, les accouchements prématurés, les désordres de circulation vasculaire, et les brûlures accidentelles dues à la cigarette.

Nous avons aussi parlé de l'invalidité. Vous êtes au courant sans doute des données statistiques intéressant l'espérance de vie, et je n'ai pas à revoir ces statistiques avec vous. Nous avons cité le Chirurgien général qui a institué le comité, qui a servi de tremplin pour bon nombre de travaux ultérieurs aux États-Unis visant l'invalidité chronique et les effets sur la qualité de la vie.

Nous avons discuté de la question d'abandonner l'usage du tabac. Il semble, théoriquement du moins, qu'un grand nombre de fumeurs veulent abandonner cet usage. Le ministre a déclaré dans son mémoire que 45 p. 100 des fumeurs ont essayé sérieusement d'abandonner leur habitude. On reconnaît que c'est un problème fort difficile. Nous savons que c'est là une décision d'importance. Peut-être, et cela est très important, que les travaux du comité devraient plus maintenant se concentrer sur les dangers de la cigarette qui sont réels mais bien plutôt sur les façons d'encourager les gens à cesser de fumer.

C'est avec des sentiments divers que nous avons fait un relevé sur les médecins qui fument. Les chiffres indiquent que la proportion des médecins qui ont arrêté de fumer est plus élevée que la proportion de la population en général. Nous regrettons cependant que 35 p. 100 des médecins canadiens fument encore régulièrement. Nous avons obtenu des succès et dans le cas des médecins et dans le cas de l'ensemble de la population. Il faut en venir à la conclusion que la diffusion des renseignements ne suffit pas. Le comité de l'Association médicale estime qu'il faut faire, qu'il faut déployer des efforts plus directs et plus suivis.

Nous avons formulé plusieurs recommandations au comité. Devant l'abondance des preuves indiquant que l'usage de la cigarette expose la santé à des graves dangers et dans un effort pour atténuer ce problème sérieux d'hygiène publique, l'Association médicale canadienne est heureuse d'accorder son appui aux projets de loi présentés au Comité, à titre privé, par des membres du Parlement et à la présentation que l'honorable John Munro, ministre de la Santé nationale et du Bien-être social, fit au Comité, le 19 décembre 1968.

[Text]

The Association offers the following recommendations for your consideration:—

1. That the Federal Government enact legislation to eliminate the advertising of cigarettes in all media and at the point of sale.

2. That the Federal Government enact legislation requiring that all cigarette packaging be effectively labelled so as to clearly indicate that cigarette smoking is a health hazard.

We understand that there is some question about the total jurisdiction of the federal government in this area, so that failing the above recommendations we recommend that the federal government enact legislation requiring the effective labelling of cigarette packaging, but in addition, that there be effective labelling of advertising of all types indicating that cigarette smoking is a health hazard. Such labelling should include the tar and nicotine content and other toxic agents as they are identified, as determined by appropriately designated governmental agencies.

3. That the Tobacco Restraint Act be supported, strengthened and enforced so as to effectively reduce the sale of this hazardous product to minors.

4. That governments at all levels be encouraged to discontinue financial support and other subsidy of the tobacco industry.

5. That governments at all levels and the voluntary health agencies that have been engaged in public education regarding the hazards of smoking be commended for their efforts and encouraged to increase their support and activity in this field.

Thank you, Mr. Chairman, for the privilege of being allowed to present our views to you. With your permission I would ask the members of the delegation to speak briefly to the brief before it is open for general discussion.

Perhaps Dr. Delarue would be first.

Dr. N. C. Delarue (C.M.A. representative to Department of National Health and Welfare Technical Advisory Committee on Smoking and Health): Mr. Chairman, ladies and gentlemen, it is a privilege to have this opportunity to talk with you and to relate my discussion to the matter of lung cancer. Lung cancer, as

[Interpretation]

L'Association soumet les recommandations suivantes à votre considération:

1. QUE le gouvernement fédéral adopte une loi visant à éliminer la publicité en faveur des cigarettes dans tous les domaines et sur les lieux de la vente.

2. QUE le gouvernement fédéral adopte une loi exigeant que tout paquet de cigarettes soit étiqueté efficacement de façon à indiquer clairement que l'habitude de la cigarette est dangereuse pour la santé.

Nous savons qu'on met en doute la compétence du gouvernement fédéral dans ce domaine. Si cette recommandation ne pouvait être adoptée, nous recommanderions que le gouvernement fédéral adopte une loi exigeant que tout paquet de cigarettes soit étiqueté efficacement de façon à indiquer clairement que l'habitude de la cigarette est dangereuse pour la santé. A défaut de ce qui précède, que le gouvernement fédéral adopte une loi exigeant que l'étiquetage des paquets de cigarettes et toute la publicité indiquent que l'usage de la cigarette est dangereuse pour la santé. Cet étiquetage devra préciser la quantité du goudron, de la nicotine et des autres agents toxiques, qui seront également identifiés de la manière déterminée par les agences gouvernementales désignées à cette fin.

3. Que l'on appuie, renforce et fasse respecter la Loi sur la répression de l'usage du tabac chez les adolescents afin de réduire la vente aux mineurs de ce produit dangereux.

4. Que tous les gouvernements, à tous les paliers, soient encouragés à cesser d'aider financièrement, au moyen de subsides ou autrement, l'industrie du tabac.

5. Que tous les gouvernements, à tous les paliers, et les organismes bénévoles de santé qui se sont engagés à informer le public sur les dangers du tabac, soient félicités pour les efforts déjà faits et encouragés à augmenter leur appui et leur activité dans ce domaine.

Nous vous remercions monsieur le président pour le privilège d'avoir pu vous présenter nos vues et avec votre permission, je demanderais aux membres de la délégation de dire quelques mots au sujet du mémoire avant qu'on ne passe à la discussion générale.

Je vais donc commencer par le docteur Delarue.

M. N. C. Delarue (C.M.A. représentant le ministère de la Santé et du Bien-être social, comité consultatif et technique sur le tabac et la santé): Monsieur le président, mesdames et messieurs, c'est un privilège que de pouvoir causer avec vous au sujet du cancer des poumons.

[Texte]

you know, is the best documented of the areas in which we are interested. It was the first proven relationship with cigarette smoking and it has continued to demonstrate one of the facts which we wish to bring before you today; namely the issue that statistics, often questioned as to their validity, are now buttressed by scientific evidence to indicate their absolute validity.

I would reiterate something that Dr. Matthews has just said, that the days of controversy in this matter are now over. The facts as presented are established facts and not open to controversial interpretation of any type.

• 1140

When I mention the fact that there is scientific support for the statistical observations of increasing death risk, I think I might simply refer back to the slides that we prepared sometime ago and which I believe Dr. Thompson demonstrated to you a few days ago illustrating the progressive changes in the bronchial lining that are related to increasing exposure to tobacco smoke. These changes are quantitatively related to the exposure, as Dr. Matthews has said.

I would also draw to your attention that there is evidence to indicate that these changes are not always totally progressive and that they could regress were the insult to be withdrawn, so that there is every reason, no matter how long a smoker has continued smoking, for him to stop smoking because his risk of death and his risk of illness and disability falls progressively back towards that of the non-smoking population.

We would not want there to be a defeatist attitude amongst smokers on the basis of the fact that they have smoked for many years, have done any harm that they are going to do and that therefore there is perhaps no reason for them to discontinue the habit. This is certainly not true. I believe that the data regarding smoking and lung cancer are so well documented and have been so well documented for you in the past that I need say nothing else about this particular aspect of the risks of cigarette smoking.

M. Y. Morin (Cardiologue, Institut de Cardiologie de Québec): Monsieur le président, il est bien connu que les maladies du cœur représentent de loin la cause de mortalité la plus fréquente au pays puisque cette année, au Canada, plus d'un décès sur deux sera attribuable à une maladie du cœur ou des vaisseaux. Une forte proportion de ces décès sont causés par l'utilisation de la cigarette.

[Interprétation]

Comme vous le savez, c'est là le secteur de recherches où nous avons le plus de documentation, où il y a des rapports avérés entre la cigarette et la maladie. On a continué à démontrer que les faits que nous vous avons présentés aujourd'hui, notamment la question de la mise en cause de la validité des statistiques sont maintenant confirmés par les preuves médicales qui confirment la parfaite validité de ces statistiques.

Je tiens à appuyer ce que vient de dire le docteur Matthews. La controverse est maintenant terminée là-dessus, les faits qui nous sont présentés sont des faits avérés et prouvés qui ne donnent plus lieu à une interprétation litigieuse.

Je crois que je pourrais revenir aux diapositives que nous avons préparées il y a quelque temps, celles que M. Thompson, je crois, vous a montré il y a quelques jours, qui montraient les changements progressifs du revêtement bronchial après l'exposition à la fumée de cigarette. Ces changements sont rattachés quantitativement à l'exposition à la fumée.

Je tiens aussi à vous signaler qu'il y a des preuves montrant que ces changements ne sont pas toujours progressifs et qu'il peut y avoir régression si l'agent causal est retiré et il y a toute raison de croire que quelle que soit la durée de la période de temps pendant laquelle on a fumé, il n'y a aucune raison de ne pas arrêter de fumer, car alors les risques de mortalité, de maladie, d'invalidité sont réduits en conséquence.

Nous ne voudrions pas qu'il y ait une attitude défaitiste chez les fumeurs qui pensent que s'ils ont fumé un certain nombre d'années, ils ont subi des dommages à leur santé auxquelles ils ne peuvent plus remédier. C'est inexact. Je crois que les données récentes concernant l'usage de la cigarette et le cancer des poumons sont tellement bien documentées que je n'ai pas à ajouter quoi que ce soit au sujet du danger de l'usage du tabac.

Dr. Y. Morin (Cardiologist, Institute of Cardiology, Quebec): Mr. Chairman, it is well known that heart diseases represent by far the main cause of mortality in Canada, since this year, more than 1 death out of 2 will be attributed to heart disease or to vascular disease. A high proportion of these deaths are caused by cigarette smoking. The statistics based on studies made in Framingham and

[Text]

Plusieurs statistiques ont été compilées, en particulier à Framingham et ici au Canada surtout chez les anciens combattants qui ont démontré que l'infarctus du myocarde, et la maladie coronarienne étaient de trois à cinq fois plus fréquents chez les individus qui faisaient une utilisation courante de la cigarette.

De plus, certaines études pathologiques, des études faites à l'autopsie ont démontré que l'artériosclérose coronarienne, qui est la base de cette maladie était également deux fois plus fréquente chez les fumeurs que chez les non-fumeurs. Je voudrais souligner ici le travail excellent fait par un chercheur canadien, le docteur Mustard de Hamilton qui a démontré que l'utilisation du tabac augmentait la coagulation sanguine et, de cette façon, était un des facteurs qui pouvaient provoquer la thrombose coronarienne.

Disons que l'utilisation de la cigarette est également associée à une très forte incidence de maladies vasculaires périphériques, de maladies vasculaires du cerveau et que plusieurs composantes de la fumée de cigarettes ont été trouvées expérimentalement très toxiques pour le cœur.

Par exemple, on sait que le monoxyde de carbone est toxique pour le cœur, que d'autres produits comme la pyridine, les acides volatils et ainsi de suite, sont toxiques pour le myocarde. Mais c'est surtout la nicotine qui est en cause. On sait que la fumée d'une cigarette correspond à l'absorption d'un milligramme de nicotine, qui est toxique, puisqu'elle augmente le travail cardiaque en accélérant le cœur, en augmentant le débit cardiaque, la résistance périphérique et en déterminant une constriction des vaisseaux cutanés. On sait par conséquent que la cigarette peut être considérée comme un poison chronique pour le cœur.

Les cliniciens le savaient depuis longtemps. Par exemple, un médecin français, le docteur Beau en 1862 avait déjà déterminé que le tabac, la cigarette en particulier était extrêmement nocif pour les gens qui souffraient de maladies coronariennes. Les médecins qui traitent des maladies de cœur se sont rendu compte depuis longtemps que l'abandon de la cigarette entraîne des améliorations considérables chez les malades et je pourrais insister sur cet aspect que l'abstention subite, brutale de tabac chez les malades n'a jamais entraîné de conséquences néfastes.

Trop souvent, dans l'esprit du public on pense que l'abstention subite de tabac va déterminer des réactions au niveau du cœur ou ailleurs, réactions qui peuvent avoir des conséquences fatales.

[Interpretation]

here in Canada, especially on veterans, who show that myocardial infarction and coronary disease were from three to five times higher among individuals smoking cigarettes regularly.

Furthermore, a number of pathological studies which were made during autopsies, show that the coronary arteriosclerosis, which is at the base of this disease, is also twice as frequent among smokers as among non-smokers. I would like to underline, at this point, the excellent work done by a Canadian researcher, Dr. Mustard, from Hamilton, who has shown that the use of tobacco increases the coagulation of blood and, therefore, was one of the factors which could bring about the coronary thrombosis.

Cigarette smoking is also associated with a very marked incidence of peripheral vascular diseases, and also vascular diseases of the brain, and several ingredients from the smoke of cigarettes were shown in experiments to be highly toxic for the heart.

For instance, we know that carbon monoxide is toxic for the heart, that other products as pyridine, volatile acids and so forth, are toxic for the myocardium. But it is especially nicotine with which we are concerned. We know that the smoke of one cigarette corresponds to the absorption of one milligram of nicotine which is toxic, since it increases the work of the heart by accelerating it, by increasing its output and peripheral resistance and by causing constriction of the cutaneous vessels. Consequently, we know that cigarettes may be considered as a chronic poison for the heart.

Clinicians have known this since quite a long while. For example, in 1862, Dr. Beau, a French physician, had already established the fact that tobacco, and cigarettes in particular were extremely harmful for people who suffered from coronary disease. Heart specialists noticed quite a long while ago that patients who stopped smoking showed marked improvement, furthermore, I might stress the fact that the sudden stop in the use of tobacco among patients has never had bad results.

Too often, the public believes that if they suddenly stop smoking this might result in reactions in the area of the heart or elsewhere, and that these reactions might be fatal in their consequences.

[Texte]

Notre expérience et celle des autres n'ont jamais démontré un tel phénomène et au contraire, on peut dire que chez la grande majorité des gens, l'abstention du tabac, la cessation de l'habitude de fumer la cigarette se fait relativement facilement.

En conclusion, monsieur le président, je peux dire que tous les médecins qui ont l'occasion de traiter des malades qui souffrent de maladies de cœur ou des vaisseaux, qu'ils soient praticiens généraux, ou spécialistes, appuient sans la moindre restriction les conclusions qui ont été énumérées dans le mémoire de l'Association médicale canadienne.

Dr. D. V. Bates (Physician, Royal Victoria Hospital): I would like to enlarge on some figures you will find in the brief in the second paragraph of page 3 concerning the diseases of chronic bronchitis and emphysema. The two things I want to say about these two diseases are first that the increasing mortality from these diseases in Canada is running closely parallel to that of the United States. On that page and in that paragraph you will see that the Canadian death rate from these diseases rose from 3.6 per 100,000 in 1955 to 12.7 per 100,000 in 1965, which is about a fourfold increase over ten years.

In the United States between 1956 and 1966 in a ten-year period, the increase in absolute numbers of deaths from these two diseases was from 6,535 in 1956 to 25,416 in 1966 which is a fourfold increase, and it is interesting to me that the statistics on mortality have run so closely parallel.

In both countries the serious aspect of these figures is that the rate of increase of mortality is still increasing so that we have a long way to go before the situation is any sense under control.

The second point I want to make is not specifically made in the brief, and that is that these two diseases of chronic bronchitis and emphysema do not as a rule kill people quickly. They incapacitate people for years. I have no Canadian data on incapacity or disability, but there is U.S. data on this, and because the mortality experience is so closely parallel I am going to suggest to you that possibly the disability experience is parallel as well. I will read one sentence from the 1968 Supplement to the 1967 Public Health Service Review published by the U.S. Department of Health, Education and Welfare, on page 66:

Last year, payments made by the Social Security Administration to men

[Interprétation]

Our experience and that of others have never indicated such a phenomenon, on the contrary, with the great majority of people, abstention from tobacco, stopping cigarette smoking can be done relatively easily.

In concluding I can say, Mr. Chairman, that all the doctors who deal with patients suffering from vascular diseases or heart diseases, whether they be general practitioners or specialists, subscribe without the slightest restriction to the conclusions which are listed in the report of the Canadian Medical Association.

M. D. V. Bates (Royal Victoria Hospital): J'aimerais faire d'autres commentaires sur les statistiques qu'on peut trouver dans le mémoire, à la page trois, au sujet de l'emphyseme et de la bronchite chronique. Deux commentaires, d'abord le taux de mortalité croissant de ces deux maladies au Canada s'établit parallèlement à ce qui se passe aux États-Unis. Vous voyez dans ce paragraphe que le taux de mortalité au Canada va de 3.6 sur 100,000 en 1955 à 12.7 en 1965, soit quatre fois plus.

Aux États-Unis entre 1956 et 1966, au cours d'une période de dix ans, l'augmentation du nombre absolu de mortalité est passée de 6,535 en 1956 à 25,416 en 1966, ce qui est aussi quatre fois plus. Il me semble intéressant que les données statistiques sur la mortalité soient demeurées si étroitement parallèles.

Dans les deux pays, l'aspect sérieux de ces chiffres, c'est que l'augmentation de la mortalité continue à progresser; nous avons donc beaucoup de chemin à parcourir avant que la situation connaisse un certain contrôle.

Le deuxième point que j'aimerais signaler, n'apparaît pas spécifiquement dans le mémoire. C'est que ces deux maladies, la bronchite chronique et l'emphyseme, ne tuent pas les gens rapidement. Ils causent plutôt l'invalidité pendant un certain nombre d'années. Je n'ai pas de données canadiennes sur l'invalidité ou l'incapacité, mais il y a des données américaines à ce sujet. Et vu que l'expérience de mortalité est si étroitement parallèle, je vous dirai qu'il est possible que l'expérience relative à l'invalidité soit également parallèle.

Je vous lirai une phrase tirée du supplément de 1968 de la revue sur la santé publique de 1967 publiée par le Département de la Santé, du Bien-être social et de l'éducation des États-Unis, à la page 66:

L'an dernier, les paiements versés par l'administration de sécurité sociale à des

[Text]

and women totally disabled because of emphysema amounted to about 90 million dollars; this was 7 percent of all disability payments, making chronic lung disease second only to heart disease in this regard.

I think the statistical basis of associating this rising mortality and colossal disability with cigarettes is well-established. I am aware that there is evidence that some small fraction of this increase could be due in some part to living in modern cities, but cigarettes unquestionably are the major agent. It is because of the accelerating mortality and because of the colossal disability that the deliberations of your Committee are, in any sense in which I can use the word, urgent. Thank you very much.

Dr. R. M. Lane (Chairman, Canadian Medical Association Standing Committee on Health): Mr. Chairman, I would like to amplify a little our last recommendation because I think the activities in the field of public education are particularly important.

As data became available showing the huge extent of this hazard, and it has been recently

• 1150

described as the leading health hazard in America, there also began to be available data showing the value of stopping smoking, and this has been referred to by Dr. Delarue who points out that the person who has smoked 40 years may feel that there is no value for him to stop, but the evidence, especially from the study of British physicians, is that this is not so. As Dr. Morin has said, the effects of smoking as they relate to cardiovascular deaths can be ameliorated to quite an extent if the person does stop. Indeed, it is now quite clear that all cardiologists and those who do peripheral vascular work are suggesting very firmly that their patients should stop.

I think there is evidence too, mainly from morbidity studies in the United States, that symptoms of diseases related to smoking, are greatly ameliorated if the smoker does stop.

[Interpretation]

hommes et à des femmes complètement invalides qui souffraient d'emphysème ont représenté environ 90 millions de dollars. C'était 7 p. 100 de toutes les allocations de maladie, par conséquent, les maladies chroniques du poumon ne venaient qu'en deuxième place par rapport aux maladies du cœur, dans ce domaine.

Je crois que statistiquement, il est bien établi que l'on peut associer le taux croissant de la mortalité à l'usage de la cigarette. Je suis au courant qu'il y a des indices qu'une petite fraction de cette augmentation pourrait jusqu'à un certain point, être attribuable à la vie de certaines villes modernes. Mais la cigarette serait sans doute le facteur essentiel et c'est en raison de cette accélération des cas de mortalité et en raison de l'importance colossale de l'invalidité que les délibérations de votre comité sont urgentes, dans tous les sens du mot.

Je vous remercie.

M. Lane (Président du Comité permanent de l'Association médicale canadienne sur la Santé): Monsieur le président, j'aimerais insister un peu sur notre dernière recommandation, car je crois que l'activité dans le domaine de l'éducation publique est particulièrement importante.

Au fur et à mesure que nous avons eu des données montrant l'incidence effrayante de ce danger contre la santé, qui a récemment été décrit comme étant la plus grande menace à la santé en Amérique, on a également commencé à obtenir des données montrant la valeur de l'abandon de cette habitude du tabac, et le Dr Delarue a abordé cette question en soulignant qu'une personne qui a fumé depuis quarante ans, pourrait penser qu'il ne lui sert à rien d'abandonner de fumer. Mais, les études qui ont été faites, surtout les recherches des médecins britanniques et d'autres, montrent que ce n'est pas le cas. Et comme le docteur Morin l'a dit, les effets du tabac sur la mortalité cardio-vasculaire peuvent être réduits sensiblement si quelqu'un cesse de fumer. On sait fort bien que tous les cardiologues et ceux qui dans leur pratique touchent au système cardio-vasculaire, affirment ou déclarent fermement que leurs malades devront arrêter de fumer.

Je crois que la preuve a été faite, principalement par les études sur la morbidité effectuées aux États-Unis, que les symptômes attribuables à la cigarette, au tabac, et les maladies qui lui sont attribuées, s'améliorent si le fumeur cesse de fumer.

[Texte]

I think we should commend the Department of National Health and Welfare's program over the last few years along this line, and I would suggest that there is ample reason for suggesting that it could be enlarged and suitable moneys provided for this. It is not too long ago that the Science Council of Canada in their annual report suggested that the funds available for science should be channelled perhaps more to certain priority fields. I suggest this is one in which cost benefit of analysis would show that we are making a great deal, because there is evidence that fewer people are smoking.

In a democracy one talks of majorities and I think it should now be clear that less than a majority of adults smoke. This is certainly true of physicians. Although all members of the Committee are a little concerned that still quite a few doctors smoke, it is my observation that the interns, medical students and the younger doctors smoke very much less than the older ones. This is rather along the line of what has been found in studies where stopping smoking has been attempted, in that it tends to be the person who has smoked longest and who started at the earliest age who is hardest to convince to stop, unfortunately.

I think, therefore, that your Committee should understand that we have every reason for optimism. There has been over the years an attempt to see that in our society alcohol is used reasonably and I think it is rather hard for even a middle-aged person to feel too happy about the results.

On the other hand, I would suggest that the short span of time in which we have attempted to reduce smoking cigarettes has had results, and that there will be increasing results in the future as more young people do not get involved with this problem. Thank you, Mr. Chairman.

Dr. W. A. MacLean (Chairman, Canadian Medical Association Standing Committee on Cancer): Thank you. I just have one small item to add to support our number one commendation, Mr. Chairman, with regard to the advertising at the point of sale. I think a very disturbing thing we have noticed is the mimicry that is associated with the sale of cigarettes, the giving away of \$1,000 and so forth on the basis of answering a skill testing question. I have heard it said some people are starting to smoke because of this reason. This

[Interprétation]

Je crois qu'il convient de féliciter le Ministère de la Santé nationale et du bien-être social pour le programme mis en œuvre au cours des dernières quelques années sur cette question et je suis d'avis qu'il y a suffisamment de raisons qui montrent que ce programme pourrait être amplifié et que des crédits supplémentaires devraient y être affectés. Il n'y a pas tellement longtemps, le Conseil des sciences du Canada dans son rapport annuel a suggéré que les fonds disponibles soient canalisés ou affectés surtout à certains domaines de priorité. C'est peut-être un domaine où l'analyse du coût et des avantages montrerait que nous y gagnons beaucoup vu que nous possédons certains indices que moins de gens fument.

En démocratie, les majorités viennent en ligne de compte, et je crois qu'il devrait maintenant être clair que ceux qui fument chez les adultes représentent moins que la majorité. C'est sûrement le cas chez les médecins. Bien que les membres du comité s'inquiètent peut-être encore un peu du fait que beaucoup de médecins fument, je remarque que les internes, les étudiants et les jeunes médecins fument beaucoup moins que les plus âgés. Je crois que c'est là la tendance générale qui s'est manifestée dans les études où on a essayé de cesser de fumer; ceux qui avaient commencé à fumer le plus tôt et qui fumaient depuis le plus longtemps, étaient malheureusement les plus difficiles à convaincre d'arrêter.

Par conséquent, le Comité devrait bien comprendre que nous avons toutes les raisons d'être optimiste. Dans les années passées, des tentatives ont été faites pour que notre société fasse un usage modéré de l'alcool, et je crois qu'il est difficile, même pour une personne d'âge moyen, de se réjouir du résultat.

Par contre, je crois que pendant la courte période de temps au cours de laquelle nous avons essayé de réduire l'usage de la cigarette, des résultats ont été obtenus et il y aura des résultats de plus en plus importants dans l'avenir, alors que de moins en moins de jeunes ne contracteront l'habitude.

Merci, monsieur le président.

M. W. A. MacLean (Président de la Commission permanente de l'A.M.C. sur le cancer): Merci. Je voudrais faire seulement un tout petit commentaire pour appuyer notre recommandation principale, monsieur le président, en ce qui a trait à la réclame et à la vente. Ce qui est le plus inquiétant, ce sont les trucs que l'on emploie pour vendre la cigarette, en faisant des cadeaux de mille dollars ou autre chose sous le prétexte qu'il faut répondre à une question mettant les connaissances à l'épreuve.

[Text]

should be seriously looked into by this Committee and steps taken to control such gimmickery, whether it be advertising at the point of sale or in the newspaper.

It was suggested, as a matter of fact, Mr. Chairman, by a member of my Committee that the skill-testing question to win the \$10,000 should be a 3,000 word essay on the hazards of cigarette smoking. I do not think this can be achieved, but I would suggest the Committee look very strongly into some effort to control such gimmickery. Thank you.

The Chairman: Thank you, gentlemen, and the meeting is now open for discussion. Mr. Mather?

Mr. Mather: Thank you, Mr. Chairman, and may I begin by saying that I very much appreciate having the representatives of the Canadian Medical Association before us

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today, surely the most important health organization in the country. I also appreciate the very detailed mass of further evidence which they have given to the Committee in regard to cigarettes and disease.

I am one who usually has questions to ask to try to encourage the witnesses on this subject, to bring out further points that seem to me important in linking cigarettes and disease. However, today the brief has been so comprehensive and the different expert doctors who have added to it have spoken so clearly on every aspect that occurred to me, that I have today only one or two very short questions. I also want to say while I have the microphone, Mr. Chairman, that I think that the constructive recommendations of these witnesses are very much to the point.

One question is, would the delegation agree with the United States Surgeon General who said, I think three or four years ago, that there was now no question about cigarettes causing disease, but only a question as to what to do about that.

The Chairman: Are you directing your question to the...

Mr. Mather: Yes, to the spokesman.

Dr. Matthews: I think there would be no doubt that we would approve that statement and support it.

Mr. Mather: Thank you. Mr. Chairman, a couple of days ago we had testimony from Dr. Thompson of the Toronto General Hospital. He came here with slides and showed them to

[Interpretation]

J'entends dire que certaines personnes commencent à fumer en raison de tous ces truc publicitaires. Je crois que le Comité devrait étudier sérieusement cette question et prendre des mesures pour mettre fin à ce truquage que l'annonce se fasse en association avec le produit vendu ou dans les journaux.

Un membre du Comité m'a signalé que les questions qu'on pose pour gagner dix mille dollars devrait être une composition de 3,000 mots sur les dangers de la cigarette. Je ne crois pas que cela pourrait être réalisé mais je proposerais au Comité de faire tous les efforts possibles pour trouver des moyens pour contrôler pareil truquage. Merci.

Le président: Merci, messieurs.

Maintenant, la discussion est ouverte. Le débat s'amorce. M. Mather.

M. Mather: Merci, monsieur le président. J'apprécie fort le fait d'avoir les représentants de l'Association médicale du Canada comme témoins aujourd'hui. C'est sûrement l'organisation de la santé la plus importante au pays. J'apprécie fort les preuves détaillées qu'ils ont présentées au Comité au sujet des maladies qui peuvent être contractées par la cigarette.

Normalement j'ai des questions à poser pour essayer de stimuler les témoins, pour les inciter à soumettre des points qui me semblent importants pour faire le bien entre la cigarette et la maladie. Cependant, aujourd'hui, le mémoire a été si complet et les divers experts en médecine ont été si catégoriques et clairs sur tous les aspects auxquels je songeais, que je n'ai qu'une ou deux très brèves questions aujourd'hui. Alors que j'ai la parole, monsieur le président, Je crois que les recommandations constructives de ces témoins étaient très pertinentes. Ma question c'est la suivante: la délégation souscrit-elle au rapport des chirurgiens généraux des États-Unis qui disait il y a environ trois ou quatre ans, je crois, qu'il ne fait plus de doute que la cigarette cause des maladies. Il s'agit plutôt de savoir ce qu'il faut faire.

Le président: Est-ce que vous adressez votre question aux témoins?

M. Mather: Oui, au porte-parole.

M. Matthews: Je crois qu'il ne fait aucun doute que nous endossons la déclaration et que nous l'appuyons.

M. Mather: Merci, monsieur le président, il y a quelques jours, le docteur Thompson, de l'Hôpital Général de Toronto, est venu nous montrer des diapositives, et sauf erreur, ces

[Texte]

us and I believe—at least it seemed to me—they gave very clear proof of the causal effect of smoking in regard to the development of lung cancer. While he was showing the slides he said that X-rays taken by doctors in their offices of people who came and were a bit worried about whether they should smoke or not did not actually, in many cases, pick up or show quickly enough the change that had taken place in the lung area and which was caused by cigarette smoking and that these people would go away from the doctors' offices perhaps reassured that they did not have a positive case of lung cancer.

He had some ideas with respect to a different type of examination, such as the use of sputum and a microscopic examination, but he thought that this would be very difficult to work out.

My point is that if the doctor is right—and I think he is—in saying that a lot of people go and have a checkup and an X-ray and they are told there is no indication of lung cancer from the X-ray, is this not a situation that should be reviewed by the doctors because in effect it would seem to me that the very people who should be discouraged from smoking by an examination are sort of being encouraged to continue. Would it be logical to ask that consideration be given by the medical profession to that point to see if some other method of diagnosis could be developed?

The Chairman: Are you directing your question to Dr. Delarue?

Mr. Mather: I think Dr. Delarue would be the man to answer it.

Dr. Delarue: In the first place I should make it clear that Dr. Thompson is on my team at the Toronto General Hospital and as such he does the physiological examinations of the sputum in cases of proven lung cancer and in patients at high risk; cigarette smokers over the age of 35 or 40.

We have been doing a study of the value of screening those people by examining their sputum. There might be a little divergence in our interpretation of the results of this study; it would not be fundamental but, in direct answer to your question, I think it would be very pertinent because obviously a single X-ray or a single negative sputum examination is no guarantee of safety, and the cigarette smoker who persists in this habit, should at least provide himself with the safety of a chest X-ray every six months. That is easy to obtain and the value of careful radiological appraisal is unquestioned. Early asymptomatic cancers can be recognized in X-

[Interprétation]

diapositives montraient clairement les effets causals de la cigarette sur le développement du cancer du poumon. Il a dit que les radiographies, faites par les médecins, sur des gens qui se demandent s'ils doivent continuer à fumer ou non, ne peuvent pas montrer assez tôt les changements qui se font dans les poumons par suite de l'usage de la cigarette. Par conséquent, ces gens quittent le bureau du médecin rassurés parce qu'ils n'ont pas de symptômes visibles de cancer du poumon.

Il a suggéré un autre genre d'analyse, l'analyse de l'expectoration au microscope. Mais il estimait que cette technique serait assez difficile à mettre en œuvre.

S'il a raison, et je crois que oui, lorsqu'il dit que bon nombre de gens vont subir une radiographie et s'en vont rassurés parce qu'on leur dit que la radiographie n'indiquait aucun symptôme de cancer, est-ce que cette situation ne devrait pas être revue par les médecins, car effectivement, il me semble que les gens que la radiographie devrait dissuader de la cigarette, de fait, sont encouragés à continuer parce qu'il n'y a pas d'indice positif. Ne pourrait-on pas demander au corps médical de considérer ce point et voir à ce qu'il mette au point un autre genre de diagnostic?

Le président: Adressez-vous votre question au docteur Delarue?

M. Mather: Je crois que le docteur Delarue serait le plus apte à y répondre.

M. Delarue: Tout d'abord, je dois signaler que le docteur Thompson fait partie de mon équipe à l'Hôpital Général de Toronto. Il est en charge des examens pathologiques des échantillons d'expectoration des patients ayant des cancers du poumon et de ceux qui ont de grandes chances d'en avoir, c'est-à-dire les fumeurs de plus de 35 ou 40 ans.

Nous avons étudié la valeur du tri de ces gens par l'analyse de l'expectoration. Il pourrait y avoir des divergences dans les résultats de nos interprétations. Ce n'est peut-être pas fondamental, mais cela pourrait répondre à votre pertinente question, à savoir qu'une radiographie ou un examen négatif de l'expectoration n'offre aucune garantie et que le gros fumeur, le fumeur invétéré, devrait au moins subir une radiographie tous les six mois. Cela est très facile à obtenir. La valeur des examens radiologiques soignés est indiscutable. Les radiographies permettent de repérer les cancers symptomatiques et à ce stade, ils sont curables. C'est tout à fait diffé-

[Text]

rays and if they are recognized in the asymptomatic stage they are curable. This is a far cry from the situation where we have to wait for the patient to report the disease because of the development of, to him, disabling symptoms.

The possibility of providing sputum physiological appraisal for these patients is not presently practically applicable across the country. So, the basis of my divergence with Dr. Thompson's assessment is the fact that X-rays are practical, valuable, helpful, and, of course, indicated on a continuing level for cigarette smokers.

Mr. Mather: Do you not think, sir, that beyond that, though, the main weapon against the development of lung cancer would be the old one that prevention is very much better than cure?

Dr. Delarue: That, sir, is why we are here today.

Mr. Mather: This would pretty well tie in with the recommendations of the Canadian Medical Association in regard to limitation of advertising promotion, and so on?

Dr. Delarue: Yes, absolutely.

Mr. Otto: Mr. Chairman, I do not think the gentlemen giving evidence would like it if all of us were to agree with them 100 per cent. There would be no purpose to it. The trouble with lawyers is they almost feel there is an absolute necessity to take the other side, so whatever questions I put to you must not be interpreted as if I did not give great credence to your brief; I think it is very good.

Dr. Morin's evidence on cardiovascular problems and how they are associated with cigarette smoking rather puzzled me in view of the study that was just completed, I believe in Framingham, Massachusetts over a period of eight years with a population of 10,000 people. I believe it was a fairly complete study and only a brief report has been published. If I read that report correctly, it seems that that study blames all cardiovascular problems, especially when related to coronaries, on cholesterol. Almost no mention is made of cigarette smoking at all. How does that compare with your findings?

Dr. Morin: It should be realized, of course, that myocardial infarction is a multicausal disease. It has several causes and elevated blood cholesterol, of course, is one of the most important. There are several other causes, such as physical inactivity, diabetes and hypertension, and these are all factors that will increase the incidence of myocardial

[Interpretation]

rent des cas où le malade lui-même vient nous consulter parce que les symptômes deviennent apparents.

A l'heure actuelle, cet examen pathologique des expectorations n'est pas praticable à travers le pays. Donc, là où je ne partage pas l'avis du docteur Thompson c'est que je pense que les radiographies sont utiles et sont tout à fait indiquées pour les gros fumeurs.

M. Mather: Croyez-vous aussi que la principale arme contre l'augmentation du taux de cancer du poulmon serait la prévention plutôt que la guérison?

M. Delarue: Oui monsieur et c'est pourquoi je suis ici aujourd'hui.

M. Mather: Cela se rattacherait très bien aux recommandations de l'Association médicale canadienne qui veut limiter la publicité, la promotion, etc. n'est-ce pas?

M. Delarue: Tout à fait.

M. Otto: Monsieur le président, je ne pense pas que les témoins aimeraient que nous soyons d'accord avec eux à 100 p. 100. Cela ne servirait à rien. Comme vous le savez, l'avocat par nature, sent toujours la nécessité de prendre la contre-partie de la thèse et c'est dans cet esprit que je vais poser des questions. N' imaginez pas que je ne souscris pas à votre mémoire. Il me semble excellent.

Les preuves présentées par le docteur Morin sur les maladies cardio-vasculaires et le rapport entre ces maladies et la cigarette me préoccupent quelque peu au vu de l'étude qui vient d'être terminée à Framingham, Massachusetts, qui a duré pendant huit ans et porté sur un échantillon de 10,000 personnes. Je crois que c'était une étude complète mais que seul un rapport très succinct a été publié jusqu'ici. Si j'ai bien lu cette étude elle impute tous les problèmes cardiovasculaires et notamment ceux relatifs aux coronaires au cholestérol. Il n'est pratiquement pas fait mention de l'usage du tabac. Comment pouvez-vous comparer ces résultats avec les vôtres?

M. Morin: Vous savez bien évidemment que l'infarctus du myocarde n'est pas dû à une seule cause. Il y a beaucoup de causes, un taux élevé de cholestérol dans le sang étant une des principales. Il y a plusieurs autres causes comme l'inactivité physique, le diabète, l'hypertension, ce sont tous des facteurs qui augmentent la fréquence de l'infarctus du

[Texte]

infarction in a given population. The Framingham study, which is certainly the most publicized study of this type, has definitely shown that cigarette smoking will increase the risk by three times in individuals of the age of 45 to 55, 2.5 times in individuals of the age of 55 to 65 and 1.6 times for individuals who are older.

In other words, the Framingham study shows that there is a very much higher incidence of myocardial infarction in populations that smoke as compared to populations that do not smoke—other factors being equal, of course.

I might add that if you have other predisposing factors such as if you are hypertensive, if you are diabetic, if your cholesterol is high, if you are obese, if you are inactive, and if in addition to all this you smoke, then you increase your chances of having a myocardial infarction by much more than three times. I do not know the exact figure but I would say it is something more in the range of 50 or 60 times.

Mr. Otto: This is really my point, that it is a contributing factor. You say it will make your chances greater of developing cardiovascular problems if, on top of these other things, you happen to smoke cigarettes.

Dr. Morin: I think the matter of causation is always a problem of semantics between lawyers and doctors. We never can agree on the real cause. I think that myocardial disease—and this has been quite generally agreed—is a multifactorial disease in which several factors play a part. I am not in any way saying that coronary artery disease will never occur in a non-smoking individual; of course, it will.

However, I think this can be looked at in this way, that for a given individual his chances of having a myocardial infarction will be multiplied if in addition he is hypertensive, hypercholesterolemic, if he smokes, if he is inactive, obese, and so forth.

I think it has to be looked at in this way. There is not a single cause of coronary artery disease, such as in the case of tuberculosis, for example, where we know there is one single cause.

Mr. Otto: Just following on what you said, if you are hypertensive, if you are constantly under stress, if you are obese, if you are psychologically maladjusted to this complex society, then outwardly the chances are that you are the one most likely to smoke.

[Interprétation]

myocarde dans une population donnée. L'étude de Framingham, qui est sans doute l'étude de ce type qui a reçu le plus de publicité, a montré très clairement que l'usage de la cigarette augmente le risque de trois fois chez les individus qui ont entre 45 et 55 ans; 2.5 fois chez les individus qui ont entre 55 et 65 ans; et 1.6 fois chez les individus plus vieux.

En d'autres termes, l'enquête dit que la fréquence de l'infarctus du myocarde est beaucoup plus grande chez les gens qui fument que chez ceux qui ne fument pas, les autres facteurs étant semblables bien sûr.

Je pourrais même ajouter que si vous avez d'autres facteurs de prédisposition, par exemple, hypertension, diabète, haute teneur en cholestérol, obésité, et si vous êtes inactif, et si, en plus de tout cela vous fumez, là, évidemment, vous augmentez vos risques d'avoir un infarctus du myocarde de bien plus de trois fois, quelque chose de l'ordre de 50 ou 60 fois.

M. Otto: C'est justement là mon point, en fait, c'est un facteur qui contribue aux troubles cardiovasculaires et vous augmentez vos risques si vous fumez.

M. Morin: Je pense que l'aspect causal est toujours un problème de sémantique entre les avocats et les médecins. On ne peut jamais s'entendre sur ce qu'est qu'une vraie cause. Les maladies du myocarde sont des maladies pour lesquelles plusieurs facteurs entrent en cause. Je n'essaie pas du tout de dire que les maladies coronaires ne se présentent jamais chez quelqu'un qui ne fume pas, évidemment cela arrive.

Mais, j'essaie de considérer les choses dans une perspective donnée; pour un individu donné, ses chances d'avoir un infarctus du myocarde, seront augmentées s'il fume, est obèse, hypertendu, hypercholestérolémique, inactif, etc. C'est ainsi qu'il faut considérer la chose. Les maladies coronaires ne sont pas comme la tuberculose pour laquelle l'on sait qu'il y a une seule cause.

M. Otto: Alors, pour continuer, si vous souffrez d'hypertension, si vous êtes constamment sous pression, si vous êtes obèse, si vous êtes psychologiquement mal adapté à cette société complexe, alors il peut fort bien arriver que vous soyez la personne la plus portée à fumer.

[Text]

Dr. Morin: I agree with that, but if you stop smoking the risk—and this has been stressed by somebody—of your having a myocardial infarction will drop to the previous level, and this is very important.

Mr. Otto: This is the purpose of this Committee and the reasoning in your brief; the curtailment of advertising and other factors.

You say 35 per cent of the doctors still smoke. Surely they are not impressed with advertising. No one has to repeat to them the dangers of smoking. They do not have to have a caution printed on the cigarette package and yet they continue to smoke. Why?

Dr. Lane: I think, Mr. Chairman, this is a field in which we should emphasize that our gains are slight but, I would suggest, constant. I can recall when doctors of my acquaintance were skeptical, and properly so, of the relationship even with lung cancer. In 1960 I think most of us were a bit skeptical of the relationship with excess mortality in cardiovascular disease.

But it is now 1969. I would suggest there is now no doubt about it, and what I notice is a snow-balling effect of the number of doctors who stop smoking. Dr. Delarue mentioned earlier informally that at any meeting of chest physicians and surgeons, a person smoking a cigarette has to have about 68 excuses why he is doing it, because he is picked on.

Mr. Otto: The proportion that you mention among doctors coincides fairly accurately with the proportion that Dr. Moss had given in his evidence regarding the withdrawal clinic. About 33 or 35 per cent just will not give up smoking. So how effective are these recommendations going to be? In other words, let us suppose that you curtail advertising; let us suppose that you strengthen regulations on the sale of tobacco and so on. Do you think that is really going to be effective?

Dr. Lane: I think the reply, Mr. Chairman, is yes, gradually. I think all of us in the delegation were wondering if the gradual impact of knowledge would change the smoking patterns of our country, and I suggest they have.

The American study based on one million Americans, which the American Cancer Society undertook some years ago, found that the percentage of persons over the age of 30 who smoked in 1965 had gone down from the same

[Interpretation]

M. Morin: Je suis d'accord. Mais si vous cessez de fumer, votre risque, quelqu'un l'a dit tout à l'heure, d'avoir un infarctus du myocarde va revenir au niveau antérieur, c'est cela qui est important.

M. Otto: La raison d'être de ce comité et de votre mémoire est la réduction de la publicité et autres facteurs.

Vous dites que 35 p. 100 des médecins continuent à fumer. Ils ne sont certainement pas influencés par la publicité qu'on fait. Personne n'a besoin de leur répéter quels sont les dangers du tabac. Ils n'ont pas besoin d'une mise en garde sur le paquet de cigarettes, et pourtant, ils continuent à fumer, pourquoi?

M. Lane: Monsieur le président, je pense que c'est un domaine où il faut insister sur le fait que nos progrès sont lents mais constants. Je me rappelle que certains médecins de ma connaissance étaient assez sceptiques au sujet du rapport entre la cigarette et le cancer du poulmon. En 1960, je pense que la plupart d'entre nous étaient plutôt sceptiques quant à la relation avec la mortalité excessive due aux maladies cardio-vasculaires.

Mais nous sommes maintenant en 1969; il n'y a pas le moindre doute à ce sujet. Tout ce que je peux vous dire c'est que le nombre de médecins qui cessent de fumer fait boule de neige. Le docteur Delarue a mentionné officieusement tout à l'heure que si vous allez à une réunion de médecins et de chirurgiens qui s'occupent des maladies de la poitrine, la personne qui fume est mieux de se préparer des excuses parce qu'elle se fera attaquer.

M. Otto: La proportion des médecins que vous mentionnez coïncide exactement avec celle donnée par le docteur Moss dans son témoignage sur la clinique. Entre 33 p. 100 et 35 p. 100 ne voulait pas abandonner l'usage du tabac. Dans quelle mesure ces recommandations seront-elles efficaces? Par exemple, vous dites qu'il faudrait éliminer la publicité; vous proposez aussi qu'on soit plus strict pour la vente du tabac, et ainsi de suite. Pensez-vous vraiment que ce sera efficace?

M. Lane: Monsieur le président, je pense que la réponse est oui. Naturellement, je pense que chacun des membres de la délégation, nous nous demandons si, graduellement, l'impact des connaissances va changer les tendances des gens au sujet du tabac dans notre pays. En fait, je crois que c'est déjà le cas.

Aux États-Unis, par exemple, avec un échantillon d'un million, la Société américaine du cancer a fait une enquête il y a quelques années et on s'est aperçu que le pourcentage des gens de plus de 30 ans qui fumaient en

[Texte]

figure in 1959. It had not gone down substantially for those over 65 years. But this is the key thing. We are, I think, making gains. I grant they are very slow, but using alcohol education as a comparison, I think we are going faster here than we are with it.

Mr. Otto: You have just said that the majority of Canadians do not smoke.

Dr. Lane: The majority of adults.

Mr. Otto: Of adults. In other words, let us say that 45 per cent still smoke, and if Dr. Moss can be believed, and I think he can, he said that there is not much hope for that one-third who will never stop smoking, or 35 per cent as you doctors have indicated. The real issue then is that 10 per cent.

In other words, the purpose of all these recommendations is to try to convince that 10 per cent between the 45 per cent who now smoke and the 35 per cent that Dr. Moss said will never quit smoking. Is not this the issue, to try to get that 10 per cent to quit smoking?

Dr. Lane: Yes, but I would suggest that the 45 per cent is not a set figure. I perhaps can give another example. I was taught some 30 years ago that the maternal mortality rate would never drop below 1.5 per thousand live births. I was taught this by an eminent professor in Toronto. And this has now dropped to one-fifth of that. I would agree that the evidence we had up to that point was that it was going to be very hard to make it drop. But I would suggest from looking at my own colleagues that the proportion who will stop smoking is accelerating considerably. And I would also suggest that as the level of formal education in our populace increases, the number who start, or persist, or who smoke heavily, will be less.

Mr. Otto: I am continuing the same line of questioning because I want to get it quite clear that you believe that eventually that 35 per cent or 33 per cent can be convinced not to smoke. In other words, you do believe

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honestly that over a period of time with these recommendations only, or with other legislation, the incidence of smoking can be reduced to almost a negligible amount. Is that right?

[Interprétation]

1965 avait baissé par rapport à 1959. Il n'avait pas baissé substantiellement pour les gens de plus de 65 ans. Mais c'est justement le facteur clé. Je pense que nous gagnons du terrain, très lentement, si vous voulez, mais si l'on compare, par exemple, avec l'éducation au sujet de l'alcool, je pense que nous faisons beaucoup plus de progrès au Canada qu'aux États-Unis.

M. Otto: Vous venez de dire que la majorité des Canadiens ne fument pas.

M. Lane: La majorité des adultes.

M. Otto: Des adultes. Autrement dit, il y en a 45 p. 100 qui continuent de fumer. Et si le docteur Moss est digne de foi, et je pense que oui, il dit qu'il n'a pas beaucoup d'espoir pour le tiers qui ne cessera jamais de fumer, ou le 35 p. 100 comme vous l'avez dit, de sorte que les seules personnes en cause sont ce 10 p. 100.

C'est-à-dire que toutes ces recommandations visent à convaincre le 10 p. 100 des 45 p. 100 qui fument dans le moment, car d'après le docteur Moss, 35 p. 100, ne cesseront jamais de fumer. C'est à ce 10 p. 100 qu'on s'adresse pour les amener à cesser de fumer.

M. Lane: Oui, mais je vous dirai que le 35 p. 100 n'est pas un chiffre définitif. Je pourrais peut-être vous donner un autre exemple. Il y a une vingtaine d'années, on m'a dit que le taux de mortalité à l'accouchement ne serait jamais inférieur à .5 par mille accouchements. C'est un médecin éminent qui me l'avait dit. Le taux de mortalité est maintenant baissé à un cinquième de ce chiffre-là. Naturellement, les témoignages du temps indiquaient qu'il serait très difficile de le faire baisser. Mais si je considère mes propres collègues, la proportion des gens qui cessent de fumer augmente très rapidement et je vous dirai que plus le niveau d'éducation est élevé, en général, dans la population, le nombre de gens qui commencent à fumer ou qui persistent, ou qui deviennent de gros fumeurs, sera moindre.

M. Otto: Je continue dans le même ordre d'idées, parce que je veux que l'on comprenne bien que selon nous, on convaincra un jour, ce 33 p. 100 ou 35 p. 100 de la population de ne pas fumer. Autrement dit, vous

croyez vraiment, qu'avec un certain temps, grâce à ces recommandations seulement, ou grâce à d'autres mesures législatives, la fréquence de l'usage du tabac serait réduite à un pourcentage presque négligeable; est-ce exact?

[Text]

Dr. Lane: I do, sir. I would point out that a chief medical officer of health in Britain a few years ago said, "We should be aiming for the day when the ash tray is as uncommon an item of commerce as the spittoon."

The Chairman: A supplementary, Mr. Mather?

Mr. Mather: Mr. Chairman, I have a supplementary on this point. Aside from hoping to reduce the number of people who now smoke, you are concerned as doctors and we as a committee with the idea of discouraging young people from starting to smoke, and surely your recommendations, if given effect, would have some value in that field. I think we should place a good deal of attention on stopping people from starting.

We have a slogan in our group "Be smart, don't start". And I think this is very practical. Do you agree with what I say?

Dr. Lane: Yes, I do, sir.

Dr. A. F. W. Peart (General Secretary, Canadian Medical Association): Mr. Chairman, Dr. Bates gave us a survey this morning that would interest this group about a study he did among interns in Montreal which demonstrates the point we are making, that the younger doctors do not seem to be smoking to the same extent as the older age group. Perhaps Dr. Bates would give you the figures that he gave us this morning.

Dr. Bates: This is quite an informal observation but I began teaching medical students at McGill in 1956 and in 1957 I asked how many of the class in third year smoked cigarettes. Out of 90 students it was about 36. Two years ago, in exactly the same group but now 120 students, the number smoking more than four cigarettes a day was 12.

We unfortunately have not got a detailed study of smoking habits 10 years ago of this kind of age group. And perhaps all I am saying is that the contemporary teaching of the medical profession is certainly being very effective.

In response to your question, I think that in a sense the hard-core smokers will unfortunately eliminate themselves. I was very entertained by a large notice which was put up at the McGill Student's Union a month ago on a cigarette vending machine which simply said, "Lung Cancer Ends Cigarette Smoking".

The Chairman: Dr. Matthews?

[Interpretation]

M. Lane: Oui. En Grande-Bretagne, le responsable de la santé a dit qu'on devrait arriver un jour à rendre les cendriers aussi désuets que les crachoirs.

Le président: Avez-vous une question supplémentaire M. Mather?

M. Mather: Permettez-moi de reprendre un point. En plus d'espérer de réduire le nombre de gens qui fument actuellement, en tant que médecins ou en tant que membres du Comité nous voulons décourager les jeunes de commencer à fumer et nos recommandations, si elles sont adoptées, seraient valables dans ce domaine. Je pense que nous devrions consacrer beaucoup d'attention à empêcher les gens de commencer à fumer. Nous répétons souvent, par exemple, «les gens avisés ne fument pas». Je crois que ce genre de chose est très pratique. Êtes-vous d'accord?

M. Lane: Oui, c'est vrai.

M. A. F. W. Peart (Secrétaire général A.M.C.): Le docteur Bates nous a dit quelque chose qui pourrait intéresser le groupe, au sujet d'une étude sur les internes à Montréal qui appuie ce que nous voulons faire ressortir, à savoir que les jeunes médecins ne semblent pas fumer autant que leurs collègues plus âgés. Le docteur Bates pourrait peut-être répéter les chiffres qu'il nous a donnés ce matin.

M. Bates: C'est une remarque très officieuse, mais j'ai commencé à enseigner à McGill, en 1956 et en 1957, j'ai demandé aux élèves de troisième année combien d'entre eux fumait. Sur 90 élèves, il y en avait 36. Il y a deux ans, avec le même groupe, qui compte maintenant 120 étudiants, il y avait 12 étudiants qui fumaient plus de 4 cigarettes par jour.

Et malheureusement, nous n'avons pas une enquête détaillée sur les habitudes de l'usage du tabac des gens de ce groupe d'âge, il y a une dizaine d'années. Tout ce que je peux vous dire c'est que l'enseignement en médecine à l'heure actuelle est très efficace. Pour répondre à votre question, je vous dirai que les fumeurs endurcis vont malheureusement s'éliminer eux-mêmes. Et j'ai été très amusé par une grande annonce placée dans le foyer de l'Union des étudiants de l'université McGill, le mois dernier, sur un distributeur automatique de cigarettes qui disait: «le cancer du poulmon met fin à l'usage de la cigarette».

Le président: Docteur Matthews.

[Texte]

Dr. Matthews: Mr. Chairman, I would like to make a comment on this. We all know in our personal experience of even the hard-core smoker who has stopped. It may take a coronary attack to make him do it, but not always. He can stop; it is not an incurable disease. And even if it was, you still have the 10 to 15 per cent—whatever it is—over that. You still have, as Mr. Mather said, the younger generation who know what is going on and are perhaps more responsible to the publicity.

Also, I do not know whether to be flattered or not by the suggestion that the hard core doctors are not susceptible to advertising. But there are perhaps other segments of the population who are particularly susceptible to advertising, and they are part of the great many who want to give up smoking. I think the force of the tremendous amount of publicity and the amounts of money spent on encouraging cigarette smoking are effective. And all that these bills are asking, and that we are asking, is that there be some counterforce to this advertising that is constantly beamed on the more susceptible elements of the population.

The Chairman: Dr. Rynard?

Mr. Rynard: Mr. Chairman, I just wanted to say that this has been a long-continuing process. Dr. Delarue pointed out, I believe, that it is only in the last seven or eight years that we have been making headway. But I also want to point out that Dr. Oschner, in 1948, established the link between cigarette smoking and cancer and laid down a dictum then that anyone with a chronic cough and smoking cigarettes had cancer of the lung until proven otherwise. That was back in 1948, 20 years ago. I was down there at his clinic at that time.

I also wanted to mention that the day before yesterday we had Dr. Thompson here and he brought up the point but did not clarify to this group, as I saw it, that you are dealing with a question of nicotine.

Dr. Morin has brought up this morning the effects of nicotine on the cardiovascular system. Are we confining ourselves to cigarettes only, or are we citing the dangers also of cigar smoking—or are there dangers of cigar smoking, of pipe smoking, of the use of tobacco?

Another point I wanted to bring up is that we are a little bit embarrassed and I, as a physician, am a little bit embarrassed to see doctors staying at a statistic of 35 per cent. Many of us know that they are heavy smok-

[Interprétation]

M. Matthews: Je voudrais faire un commentaire à ce sujet. Nous savons tous par expérience personnelle que même le fumeur endurci peut cesser de fumer. Il peut avoir besoin d'une attaque coronarique pour l'amener à cesser, mais pas toujours. Il peut arrêter, ce n'est pas une maladie incurable. Et même si c'en était une, il y aurait toujours le 10 ou 15 p. 100 de plus. Comme le dit M. Mather, vous avez toujours la jeune génération qui sait ce qui se passe et qui réagit peut-être davantage à la publicité.

Je ne sais pas s'il faut se flatter ou non de voir que les médecins endurcis ne sont pas sensibles à la publicité, mais je signale qu'il y a d'autres secteurs de la population qui y sont très sensibles, et ils font partie de ceux que nous voulons amener à cesser. Je crois que la grande quantité de publicité et de réclame et des fortes sommes d'argent qui sont dépensées pour encourager l'usage de la cigarette sont efficaces. Tout ce que ces bills veulent, et ce que nous voulons, c'est que l'on mette un contrepoids à cette publicité qui s'adresse plus directement aux secteurs de la population qui y sont les plus sensibles.

Le président: M. Rynard?

M. Rynard: Monsieur le président, je voulais seulement vous dire que c'est un procédé à long terme. Le docteur Delarue a signalé, je pense, que c'est seulement depuis sept ou huit ans que nous gagnons du terrain. Mais, déjà en 1948, le docteur Oschner avait établi la relation entre l'usage de la cigarette et le cancer. Et, à ce moment-là, il avait établi une règle d'après laquelle quiconque avait une toux chronique et fumait la cigarette, avait le cancer du poumon, jusqu'à ce qu'on ait la preuve du contraire. Et ceci remonte à 1948. Soit, il y a vingt ans. Je suis allé à sa clinique de l'époque.

Et, maintenant, je voudrais aussi soulever un nouveau point de vue. Avant-hier le D^r Thompson est venu ici et il a soulevé un point mais ne l'a pas précisé à notre groupe. La question de la nicotine.

Le D^r Morin a parlé ce matin des effets de la nicotine sur le système cardio-vasculaire. Est-ce que nous nous limitons à la cigarette seulement ou est-ce que nous parlons de danger aussi du cigare ou d'autres risques dus à l'usage du cigare, de la pipe ou du tabac?

Maintenant, l'autre point que je voulais amener sur le tapis, est le suivant: nous sommes un peu embarrassés, et moi, en tant que médecin, je suis un peu embarrassé de voir des médecins qui restent au niveau de 35 p.

[Text]

ers. I am wondering if something could be done in an educational way to keep those people or those doctors who continue to do this from setting an example in public by confining themselves to smoking in private rather than going out and allowing young people to see them do this.

I remember a case—and this is a very important point—where a clergyman passed around a bunch of cigarettes to a group of adolescent people coming back in a boat from a certain area. That had a profound effect on those young people and I do not believe that he realized just what he was doing. And I am saying this about the medical profession: I wonder if in some way we could do a little better job, as Mr. Otto has pointed out, of educating those people so that they are not setting an example for the young people.

There is another thing that I was interested in and that I am sure this group is interested in. Of those people who have stopped smoking, have any had to turn compulsively to anything else? Have you any statistics to indicate that this 40 per cent or 45 per cent that you are talking about have a tendency to develop other habits in the same way as they have to be addicted to smoking? Do you want to answer one at a time?

Mr. Chairman: You have been asking many questions. Are you directing your questions to one particular doctor?

Mr. Rynard: I am addressing them to you, Mr. Chairman, and you are to pick out who is to answer. Now, if you want one question, we will start with the doctors.

Mr. Chairman: All right.

Mr. Rynard: All right. We will start with the doctors and then I will ask my second question.

Dr. Delarue: Mr. Chairman, Dr. Rynard, I would not want this Committee to think that we were concentrating on lung cancer or the hazards from the carcinogenic agents in tobacco smoke. Dr. Bates and Dr. Morin have pointed out areas which, to me, are far more important than lung cancer—and that does not mean that I do not believe lung cancer is important. But the rapidity with which information is collecting that indicates the significance of these other diseases means, I am sure, that they are more significant results of cigarette smoking than lung cancer itself.

[Interpretation]

100. Tout le monde sait bien qu'ils sont des fumeurs invétérés. Et je me demande si, sur le plan éducatif, on ne pourrait pas faire quelque chose pour que ces gens ou ces médecins qui continuent à fumer, ne puissent donner un exemple public, en continuant à fumer. S'ils pouvaient se limiter, en se faisant de la pluparté entre eux, à la cigarette en privé plutôt que de les fumer devant les jeunes gens.

Je me rappelle un exemple très important. Un ministre religieux avait passé un paquet de cigarettes à un groupe de jeunes gens qui revenaient en bateau d'un certain endroit. Ceci a eu un effet très profond sur ces jeunes gens et je ne pense pas qu'il se soit rendu compte exactement de ce qu'il faisait. Et, je dis cela au sujet de la profession médicale. Je me demande si, d'une façon ou d'une autre, on ne pourrait pas faire un meilleur travail, comme l'a dit M. Otto, pour éduquer ces gens afin qu'ils ne donnent pas le mauvais exemple aux jeunes.

Une autre chose m'a beaucoup intéressée et je suis certain que les membres du comité y sont aussi intéressés. Parmi ces gens qui ont cessé de fumer, ils sont, en général, dit-on, forcés d'adopter quelque chose d'autre. Est-ce que vous avez des statistiques pour nous montrer que ce 40 p. 100 ou ce 45 p. 100, dont vous parlez, ont une tendance à s'adonner à une autre habitude, exactement comme ils doivent s'habituer à la cigarette? Voulez-vous répondre aux questions une à la fois?

Le président: Vous avez posé plusieurs questions. Les adressez-vous à un médecin en particulier?

M. Rynard: C'est à vous que je m'adresse, monsieur le président. C'est à vous de choisir qui répondra. Si vous voulez une question, nous commencerons par les médecins.

Le président: Très bien.

M. Rynard: Bon, on va parler des médecins et ensuite je poserai ma deuxième question.

M. Delarue: Monsieur le président, docteur Rynard, je ne voudrais pas que le Comité pense que nous nous concentrons sur le cancer du poumon ou des risques découlant des agents cancérogènes du tabac. Les docteurs Bates et Fortin ont souligné des effets qui sont beaucoup plus importants que le cancer du poumon et cela ne veut pas dire que je ne trouve pas que le cancer du poumon est important. Mais d'après les données que nous avons recueillies, apparemment, l'importance de ces autres maladies, signifie que les résultats de l'usage de la cigarette, sont plus bas.

[Texte]

As far as pipes and cigars are concerned. I think we must be very clear about one thing. The person who smokes a pipe from the time he begins smoking is a different person from the one who has smoked cigarettes and then stops and takes up a pipe or a cigar. The risk for the person who has always smoked a pipe and a cigar is admittedly very slightly increased, perhaps insignificantly. The figures are pretty clear that this is not a risk to be considered in the same area.

However, the person who has smoked cigarettes and tries to protect himself by shifting to pipes and cigars is in a different kettle of fish because he has done a certain amount of harm already. He tends also to smoke the pipe and cigar the way he did cigarettes, which means that he inhales more than his counterpart and that his risk does not fall very much. This is well shown, I think, by the fact that in Switzerland and Austria, where they preferentially smoke the small type of cigar and inhale it, the risk is not very much less than that from the cigarette, so that we are not sure that this is an out for a confirmed cigarette smoker.

Now your suggestion that doctors might set an example is not quite as facetious as perhaps you intended it because we are involved now in trying to get teachers not to smoke in school. We surely cannot ask teachers to give up smoking on school grounds unless doctors are at least prepared to consider the same policy in their offices and when they are on public display. We are in a little anomalous position here if we suggest the teachers do something that we are not prepared to do.

As far as the compulsion for other vices is concerned, I do not think there is any evidence that the ex-smoker shifts inevitably to other vices. He tends to put on a little weight, this is certainly true, but although obesity is a hazard, the risk of obesity is so much less than the risk of continuing smoking that I think that in only one situation does it have to be considered in a dual area.

The person who has already had a heart attack and gives up smoking must also go on a diet. He has been so ill and at death's door, if you want to say it that way, that I think he is prepared to do both at the same time, whereas in concentrating on the person who smokes and has not had any of these major catastrophes, we feel that the concentration should be on getting him to give up smoking. If he happens to gain weight we can go back after him and hit him again with a diet if it seems indicated.

[Interprétation]

Il faut être très clair pour le tabac de la pipe ou du cigare. Celui qui commence à fumer la pipe, dès le début, est une personne différente de celui qui a commencé par fumer la cigarette pour ensuite prendre la pipe ou le cigare. Si quelqu'un fume toujours la pipe ou le cigare, les risques sont légèrement augmentés, de façon plus ou moins insignifiante. Les chiffres sont très clairs que ce n'est pas un risque qu'on doit considérer de la même façon.

Toutefois, la personne qui, autrefois, fumait la cigarette et essaie de se protéger en fumant le cigare ou la pipe, se met dans un autre genre de situation, parce que ce n'est pas comme elle fumait avant. S'il fumait énormément la cigarette, il aspire beaucoup plus, et ça n'aide pas beaucoup de passer à une autre forme de tabac. Par exemple, en Suisse ou en Autriche, on montre que les gens fument la pipe ou le cigare et les respirent, et le risque n'est pas de beaucoup inférieur à celui des gens qui fument la cigarette, de sorte que nous ne sommes pas certains que ce soit une échappée pour un fumeur de cigarettes confirmé.

Maintenant, vous dites que les médecins pourraient peut-être montrer l'exemple. Ce n'est peut-être pas aussi facile que vous le pensez, parce que, dans le moment, nous essayons d'obtenir des professeurs qui ne fument pas en classe. On ne peut pas leur demander de ne pas fumer dans les écoles, mais on peut le demander aux médecins. Alors, nous sommes dans une position anormale, ici. Nous ne pouvons pas demander aux professeurs de faire une chose que nous ne sommes pas prêts à faire nous-mêmes.

Quant aux autres vices, je pense que rien ne prouve que l'ancien fumeur passe inévitablement à d'autres vices. En général, il prend un peu d'embonpoint. C'est certainement vrai, mais même si l'obésité est un danger, les risques de l'obésité sont tellement moindres que ceux de continuer à fumer. C'est seulement dans un seul cas qu'il faut considérer la chose d'une façon double.

Par exemple, quelqu'un qui a déjà eu une crise cardiaque et qui abandonne la cigarette, doit aussi suivre un régime. Je pense qu'en général, ils sont prêts à faire les deux. Et si vous vous concentrez sur les gens qui fument et n'ont pas eu d'autres incapacités, nous trouvons qu'il faut insister simplement pour les faire abandonner le tabac. Ensuite, s'ils commencent à prendre de l'embonpoint, nous pouvons toujours revenir les voir et leur faire suivre un régime.

[Text]

[Interpretation]

Mr. Rynard: Dr. Delarue, I was not being facetious at all. I remember an address you gave in which you told them they had better smoke in the bathroom.

M. Rynard: Docteur Delarue, je n'essaie pas d'être fastidieux du tout. Je me rappelle un discours que vous avez donné. Vous avez dit qu'il serait préférable qu'ils fument dans les toilettes.

Mr. Geekie (Secretary, Public Relations, CMA): I might point out that as early as 1963, the President of the CMA, in an unprecedented appeal to the members of the profession, stated, and I quote:

M. Geekie (secrétaire, relations publiques, Association médicale canadienne): Je signale que dès 1963, le président de l'AMC, dans un appel sans précédent aux membres de la profession, et je cite:

I would like to suggest to those physicians who feel unable to discontinue the smoking of cigarettes.

J'aimerais suggérer aux médecins qui se sentent incapables de discontinuer la cigarette

and he had previously appealed to them to do so

et il leur avait demandé antérieurement de le faire

that an appropriate public example could be provided by abstaining when in the exercise of their professional duties, especially in their offices and in hospital...

qu'ils pourraient donner un exemple public approprié en s'abstenant de fumer dans l'exercice de leur profession, surtout dans leur bureau et dans les hôpitaux...

I would like to point out that while there are still 35 per cent of the profession who are smoking regularly, this is really quite a substantial reduction from what it was a few years ago.

Et ici, je voudrais aussi signaler que même s'il y avait encore 35 p. 100 des médecins qui fumaient régulièrement, ce serait une réduction assez substantielle, si on compare ce chiffre avec celui d'il y a une dizaine d'années.

Mr. Rynard: Mr. Chairman, I want to pursue a couple of questions. It would seem to me that we have to get into the schools, because I believe that many of the bigger schools have smoking rooms for their teachers. Now, just writing about it without going at this facet of education, how can we tell kids not to smoke?

M. Rynard: Monsieur le président, je voudrais continuer avec quelques questions seulement. Alors, il me semblerait que nous devons aller dans les écoles, parce que je crois que beaucoup des grandes écoles ont des salles où les professeurs peuvent se réunir et fumer. Avant de passer à l'éducation, je me demande comment vous pouvez dire aux enfants de ne pas fumer, alors qu'un professeur le fait à l'école?

I was amazed the other day to see how soon they light up once they get outside the door of the high school. This bothered me because I have been an advocate of cutting out the cigarette smoking for many years and I have spoken on it on several occasions. It bothers me that we have rooms where the teachers can go and smoke, right in the school before students at their most impressionable age, while the federal government spends \$700,000 to get them to stop this. Then I was a little bit chagrined the other day riding in an aeroplane where you could smoke cigarettes—only.

L'autre jour j'ai vu un étudiant, un jeune enfant qui sortait de l'école et qui, immédiatement s'est allumé une cigarette. Ceci m'a bouleversé parce que j'ai toujours été contre la cigarette. Cela m'ennuie que les professeurs fument dans les écoles pendant que le gouvernement fédéral dépense \$720,000 pour les empêcher de fumer. J'ai été un peu chagriné l'autre jour. J'étais en avion et j'ai vu une affiche disant: «Vous pouvez fumer la cigarette seulement.»

I wonder if we have done enough research on this so that we can get right down to the bottom of it and start at a proper base. If this is doing what we believe it is doing, then it certainly should have a lot more pressure put on it to stop and a lot more going into the schools and a lot more going into our own profession and into the nursing profession, and others.

Alors, je me suis demandé si nous avons fait assez de recherches là-dessus, pour pouvoir arriver au fond des choses et commencer sur une bonne base. Si nous réussissons à faire ce que nous croyons, je pense que nous devrions exercer beaucoup plus de pression pour que ça cesse et nous occuper beaucoup plus de nos propres professions ainsi que chez les infirmières et d'autres.

[Texte]

Dr. Lane: Dr. Rynard has brought up several quite key points, and as Mr. Geekie has pointed out, we have latterly been stressing the stopping of smoking in hospital areas. I have been interested to see a medical staff nearby a few years ago say, "No, if we take out the cigarette machine they will just send the orderly across the street to the corner store" and two years later say "We should take out the cigarette machine."

Not only that, but we now have a situation in that particular hospital and the other major hospital in my town where you may only smoke—the patient may only smoke—with the permission of the physician and all visitors are very clearly told they should not smoke. I think this is good. I have noticed very, very few physicians who smoke while making rounds. I think this is an increasing tendency.

On his other point about the vices and so forth, I think that we should make clear that the vice that is related to the private bedrooms of the nation is entirely unaffected by this. On the question of food and obesity, Jean Mayer of Harvard put it very nicely when he said that if you are worried that you may gain some weight when you stop smoking do not forget that one pack a day, as far as increasing your risk from cardiovascular disease is concerned, is the equivalent of being 80 pounds overweight.

Le président: Monsieur Fortin.

M. Fortin: Merci, monsieur le président. Je suis très satisfait du mémoire et j'apprécie la présence de l'Association médicale canadienne.

Je suis impressionné par les statistiques qui prouvent que la cigarette est un poison chronique pour le cœur et pour la santé en général. Monsieur le président, c'est peut-être un phénomène psychologique chez moi, mais à force d'entendre répéter que c'est un danger, je finis par considérer cela comme un leitmotiv. C'est vrai que c'est un danger, mais pour mon voisin, par pour moi. Je fume moi-même environ un paquet par jour, mais je n'arrive pas à me convaincre que je suis visé par les statistiques, par les recherches définitivement très concluantes.

Mes questions sont très brèves et très simples. L'un ou l'autre des spécialistes, que nous avons le plaisir de recevoir, ne pourrait-il pas insister sur les moyens qu'un individu peut prendre pour cesser de fumer? Quand même je lirais tous les jours dans le journal, ou je verrais à la télévision ou ailleurs, une publicité contre l'usage de la cigarette, cela devient chez moi comme une chose naturelle, normale, que d'entendre ces objections ou ces

[Interprétation]

M. Lane: Je pense que le D^r Rynard a soulevé plusieurs points clés, et comme l'a souligné M. Geekie, nous avons insisté sur l'arrêt de l'usage du tabac dans les zones d'hôpitaux. Et je suis heureux de voir que, près d'ici, le personnel a dit: «Non, si on enlève les machines à cigarettes, on a seulement à aller au coin.» Et deux ans plus tard quelqu'un a dit: «Non, il faut enlever la machine à cigarettes.»

Et maintenant nous avons dans cet hôpital et autres hôpitaux, d'où je viens, le patient peut fumer seulement avec la permission du médecin et tous les visiteurs se font dire très clairement qu'ils ne doivent pas fumer. Je pense que c'est excellent. J'ai remarqué que très très peu de médecins fument en faisant leur ronde. C'est une tendance qui s'accroît.

Pour ce qui est de l'autre point, je pense qu'il faudrait préciser que le vice lié aux chambres à coucher de la nation n'est pas affecté du tout par ce problème. Quant à la question de la nourriture et de l'obésité, Monsieur Jean Mayer, de Harvard, a bien exprimé la situation lorsqu'il a dit: «Si vous avez peur de gagner du poids en arrêtant de fumer, n'oubliez pas qu'un paquet de cigarettes par jour, par rapport à l'augmentation des difficultés cardio-vasculaires, équivaut à 80 livres d'embonpoint.»

The Chairman: Mr. Fortin.

M. Fortin: Thank you, Mr. Chairman. I am very happy with this excellent brief and I appreciate the presence of the Medical Association of Canada.

I am struck by the statistics proving that cigarettes are a chronic poison for the heart and for health in general. It may be a psychological phenomenon in me, Mr. Chairman, but the more I am told that this is a hazard, and by sheer aint of repetition, it ends up by becoming a leitmotiv in so far as I am concerned. It is true that it is a danger, but not for me, for my neighbour only. I smoke one pack a day myself, but I cannot really convince myself that I am the one to whom the statistics and the definitely very conclusive research are addressed.

My questions will be very brief and very simple. I wonder if one of the specialists, whom we are pleased to have among us today, could indicate specifically the means that an individual could use to stop smoking? Even if I read publicity against smoking every day in the papers, or see it on TV or elsewhere, it becomes normal, usual, a habit, in so far as I am concerned, to hear these objections or dangers psychologically, finally,

[Text]

dangers. Psychologiquement, on finit par s'adapter à cette publicité ou à ces dangers. A un moment donné, on est immunisé contre tout ce qu'on peut nous dire sur les dangers de la cigarette. Dans mon cas personnel, je n'arrive pas à me convaincre d'arrêter de fumer.

J'aimerais qu'on insiste sur le point de vue psychologique ou médical de différents moyens, artificiels ou autres, à employer pour convaincre cette catégorie de gens d'arrêter de fumer. Est-ce qu'on pourrait avoir certains détails là-dessus? Des études ont-elles été faites? Si oui, pourrait-on savoir en quoi elles consistaient, quelles en étaient les conclusions et dans quelle mesure les moyens proposés, s'il y en a eu, se sont avérés efficaces pour aider de majorité de nos concitoyens à arrêter de fumer. On dit dans le mémoire qu'il y a trois catégories de fumeurs: celui qui fume par plaisir, le fumeur qu'on appelle négatif et le fumeur psychologiquement habitué. Ce n'est pas un reproche, mais je remarque qu'on ne parle pas des moyens à prendre dans chacun de ces cas pour que ces gens cessent de fumer.

Monsieur le président, je le répète, moi-même je fume un paquet par jour. J'admets qu'il est prouvé que fumer est dangereux. J'ai toute la documentation voulue en main, mais plus de la majorité de mes concitoyens et moi-même, nous ne sommes pas convaincus. Je pense que je cours un danger et je me dis tout le temps que cette statistique est probable, mais pour mon voisin, pas pour moi. Est-ce qu'on pourrait donner des commentaires là-dessus?

Le président: Monsieur Morin.

M. Morin: Je remercie M. Fortin de ses questions. Je pense que M. Fortin a touché du doigt le point principal qui fait que les gens, effectivement, ne cessent pas de fumer. Il faut se convaincre soi-même du danger que l'on court, d'une part pour sa vie, et d'autre part, de devenir invalide. On n'a peut-être pas assez insisté sur l'aspect invalidité dans la publicité qu'on a faite autour de la cigarette.

Au point de vue statistique, chaque cigarette enlève 7.2 minutes à votre vie. Evidemment, on se dit, à 68 ans ou à 72 ans, qu'un an ou deux de moins n'a pas tellement d'importance. Mais il faut se dire de plus que notre temps d'invalidité pour maladie augmente d'un tiers, ce qui est beaucoup pour quelqu'un qui fume plus de 20 cigarettes par jour. Pour quelqu'un qui veut avoir une vie productive, pour quelqu'un qui a des responsabilités sociales, familiales et personnelles, ceci, à mon avis, devrait être l'argument essentiel pour arrêter de fumer.

[Interpretation]

we get used to this publicity or these dangers. There comes a time when we become immunized against anything that we can be told concerning the various dangers of cigarettes. In my own personal case I cannot convince myself to stop smoking.

I would like to see the stress put on the psychological or medical viewpoint of different means, whether artificial or other, to be used in order to convince this category of people to stop smoking. Could you give us some details on this? Have any studies been carried out? If so, what did they consist of what were the conclusions, and to what degree did the proposed measures, if there were any, prove efficient in helping the majority of our fellow citizens to stop smoking. The brief lists three types of smokers: those who smoke for pleasure; there are so-called the negative smokers and those who are psychologically accustomed to cigarettes. This is not a reproach, but I notice that no mention is made of the measures to be taken in each case to help these people to stop smoking.

Mr. Chairman, I repeat that I myself smoke one pack a day. I acknowledge that it has been proven that smoking is dangerous. I have all the necessary documentation in hand, but more than the majority of my fellow citizens and myself are not convinced. I think there is a danger for me and I keep telling myself that the statistics are conclusive, but not for me, for my neighbour. Could you comment on this, please?

The Chairman: Mr. Morin.

Mr. Morin: I thank Mr. Fortin for his questions. I think that Mr. Fortin put his finger on the main reason why people do not, in fact, stop smoking. You have to convince yourself of the risk you R.U.N., on the one hand, of endangering your life, and on the other hand of becoming an invalid. Perhaps that publicity regarding cigarettes has not put enough stress on the idea of infirmity.

From the viewpoint of statistics, each cigarette takes 7.2 minutes off your life. Naturally, people say: At 68 or 72, one or two years less is not important. But people ought to keep in mind that in addition to this the period of our disability through illness increases by one-third, which is a lot for a person who smokes more than 20 cigarettes a day. For someone who wants to have a productive life, for someone who has social, family or personal responsibilities, this should, in my opinion, be the essential argument to stop smoking.

[Texte]

Troisièmement, un autre point sur lequel je n'ai pas insisté tout à l'heure, c'est la question de la condition physique. Des études récentes ont été faites par M. Cooper, chez des membres de l'aviation américaine, et ont démontré qu'il y a une différence significative au point de vue endurance physique entre les gens qui fument et ceux qui ne fument pas.

Par conséquent, il y a trois raisons essentielles pour arrêter de fumer, en plus de l'aspect économique sur lequel je n'insiste pas. Il y a la question du danger à la vie, qui est réelle, la question d'invalidité et la question de la condition physique. Je pense que quelqu'un qui est conscient de ses responsabilités ne peut pas faire autrement, après avoir considéré cette évidence, que d'arrêter de fumer.

Je pense que le principal argument pour cesser de fumer est la motivation. Pour la grande majorité de mes patients si je leur dis d'arrêter de fumer, je suis toujours étonné, de voir chez les individus normaux, jusqu'à quel point il leur est facile d'arrêter de fumer. Il y a des exceptions à cela et j'y reviendrai.

Il n'y a pas de moyen magique pour arrêter de fumer. Les médicaments apparemment, ont peu de valeur. Le meilleur système est peut-être le système de groupes. Des unités ont été créées un peu partout aux États-Unis et au Canada, un genre de clinique pour cesser de fumer où la thérapeutique de groupe est mise en application, un peu comme pour les alcooliques anonymes, et où les gens s'encouragent les uns les autres.

Mon expérience personnelle m'indique que chez la très grande majorité des gens qui sont motivés, par exemple, chez des gens qui risquent, en fumant, d'être atteints d'une maladie de cœur, le fait de cesser de fumer est facile et les misères physiologiques qui en découlent ne durent en général pas plus de trois jours.

• 1235

Le président: Monsieur Fortin?

M. Fortin: Monsieur, pour finir sur une note plus gaie, notre témoin parlait de condition physique. Lors de la dernière partie de hockey contre l'équipe du Québec, par exemple, si l'équipe d'Ottawa a gagné 8 à 1 c'est parce que ses joueurs fumaient moins que ceux de l'équipe du Québec.

Le président: Monsieur Robinson?

Mr. Robinson: Mr. Chairman, before I get into a line of questioning could you tell me when we would be recessing? Would it be one o'clock?

The Chairman: It is impossible to adjourn until this afternoon. We have to finish this this morning.

[Interprétation]

There is a third point that I did not stress a while ago, namely physical conditions. Recent studies made by Mr. Cooper among members of the American Air Force showed that there is a significant difference between the physical endurance of those people who smoke and those who do not smoke.

Consequently, there are three basic reasons to stop smoking, apart from the economic factor which I am not stressing. There is the question of the danger to life which is real; the question of infirmity and the question of physical condition. I believe that someone who is aware of these responsibilities cannot help but stop smoking after having considered this evidence.

I think that the main argument to stop smoking is motivation. Where the great majority of my patients are concerned, when I tell them to stop smoking I am always surprised to see how easy it is to stop smoking for normal individuals. There are exceptions and I shall deal with them later.

There is no magic way to stop smoking. Apparently, drugs have little value. The best system is perhaps the group system. Units have been created here, there and everywhere, in the United States and Canada, sort of clinics to stop smoking—where group therapy is applied, somewhat along the same lines as the Alcoholics Anonymous, and where people encourage one another.

From my own personal experience, I have observed that in the great majority of people who are motivated, for instance, for those people who risk having a heart disease by smoking, it is easy to stop smoking and the physiological hardship resulting therefrom last, in general, no more than three days.

The Chairman: Mr. Fortin?

Mr. Fortin: To end on a more gay note, our witness mentioned physical condition. During the recent hockey game between Quebec and Ottawa, Ottawa won eight to one because its players do not smoke as much as those from Quebec.

The Chairman: Mr. Robinson?

M. Robinson: Monsieur le président, avant que je ne commence à poser des questions, pouvez-vous me dire si nous allons lever la séance à 1 heure?

Le président: Nous ne pouvons pas siéger cet après-midi. Cela est impossible. Nous devons donc terminer ce matin.

[Text]

Mr. Mather: Did you say when we plan to adjourn, Mr. Chairman?

Mr. Otto: At 12.35.

The Chairman: It is up to the Committee to decide if we want to go on, because we cannot come back this afternoon.

Mrs. MacInnis (Vancouver-Kingsway): Mr. Chairman, may I just raise a point. Would it not be possible to restrict questioners to an outside limit of ten minutes so that we could get a little more done?

Mr. Foster: How many more questioners are there?

The Chairman: Four.

Mr. Foster: So we have 30 minutes.

Mr. Otto: We all do not need ten minutes.

Mr. Foster: Mr. Chairman, perhaps you could cut us off when the time limit is reached.

Mr. Robinson: First of all, I would like to thank this panel for being here today. It is wonderful indeed to have such a tremendous amount of enthusiasm from such a group. I would like to congratulate Mr. Fortin on his personal testimony. I would hope he would receive some help with his problem from this panel before they leave.

I notice in the brief under Historical Review an indication of certain potential benefits that would be derived. What would these benefits be? Also, taking the case of Mr. Fortin, how would he benefit if he stopped his smoking habit?

Dr. Lane: I think that is most important, Mr. Chairman. I was going to suggest that if I were replying to a man of Mr. Fortin's age, I would state that the common thing he would notice, if he stopped smoking his pack a day, is that he would not cough. He will enjoy breakfast more because he will not have jungle mouth. He will find his endurance, as Dr. Morin suggested, somewhat improved; and I think his wife will find that he is nicer to live with in every way.

Mr. Otto: In every way? She might get him to smoke two packages!

The Chairman: Order, please.

Dr. Lane: In a longer-term sense, if the man is a businessman and does not want to lose days from work, it is quite easy to show now that one has fewer days off work, fewer days in bed—this type of things—from res-

[Interpretation]

M. Mather: Avez-vous dit à quelle heure vous songez ajourner, monsieur le président?

M. Otto: A midi 35.

Le président: Il appartient au Comité de décider si nous devons poursuivre, car nous ne pouvons pas revenir cet après-midi.

Mme MacInnis (Vancouver-Kingsway): Ne pourrions-nous pas peut-être limiter nos questions à dix minutes dans l'espoir d'en accomplir davantage?

M. Foster: Combien d'autres députés y a-t-il qui veulent poser des questions?

Le président: Quatre.

M. Foster: Et nous avons trente minutes.

M. Otto: Nous n'avons pas tous besoin de d x minutes.

M. Foster: Vous pourriez peut-être nous interrompre lorsque notre temps sera écoulé, monsieur le président.

M. Robinson: Je tiens d'abord à remercier notre groupe de témoins d'être venu nous voir aujourd'hui. Il est remarquable de voir l'enthousiasme qui anime ce groupe. Je tiens à féliciter M. Fortin de son témoignage personnel, et j'espère qu'il obtiendra de l'aide, au sujet de son problème, avant le départ de nos témoins. Je constate dans l'historique tracé dans le mémoire qu'on indique certains avantages éventuels qu'on peut en tirer. J'aimerais savoir quels sont exactement ces avantages. Si l'on prend le cas de M. Fortin, j'aimerais savoir comment il pourrait en profiter s'il arrêtait de fumer.

M. Lane: Je croi's cet aspect très important, monsieur le président. J'allais dire que si je m'adressais à un homme de l'âge de monsieur Fortin, la première chose qu'il remarquerait en arrêtant de fumer un paquet de cigarettes par jour, c'est qu'il cesserait de tousser. Et il apprécierait son déjeuner davantage parce qu'il n'aurait plus la «bouche bête». Et il aurait plus d'endurance, comme le docteur Morin l'a indiqué plus tôt. Je crois que sa femme trouverait que, sous tous les aspects, il serait plus agréable de vivre avec lui.

M. Otto: Vous avez bien dit, tous les aspects? Peut-être préférerait-elle alors qu'il fume deux paquets par jour.

Le président: A l'ordre, messieurs.

M. Lane: Je crois qu'à la longue, s'il s'agit d'un homme d'affaires qui ne veut pas s'absenter de son travail, qu'il est très facile de prouver que les absences ou le nombre de jours passés au lit sont moins nombreux pour

[Texte]

piratory illnesses and others if one does not smoke. This is an almost immediate effect. This is a large problem in occupational health, and it is quite important.

Mr. Robinson: There has been considerable emphasis in the questioning on the fact that the medical profession smokes a great deal, and I think this also pertains to the nursing profession, who are in contact with patients with certain problems which necessitate their giving up smoking. Would the medical association consider having a medical ethic that not only would the medical profession be requested, but that they actually abstain, from smoking during their professional duties?

Dr. A. F. W. Peart: Mr. Chairman, Mr. Geekie has already mentioned that our President a few years ago brought this to the attention of the medical profession in Canada and the Committee on Cancer of the C.M.A. has also brought in this recommendation.

Doctors are no different from any other group. They are subject to the influences of advertising, and so on. I do think, however, that we should keep hammering away at this point. As an Association we should keep stressing this to the doctors, as the nurses should to their professional group, and if we could eliminate the advertising as well we might get somewhere with doctors as well as with the rest of the public.

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Mr. Robinson: Mr. Chairman, I have a question for Dr. Morin. He mentioned that one milligram of nicotine would be considered dangerous. I assume he is speaking in terms of the production of a safe cigarette as indicated on page 2, item (e) where the recommendation of the Association is that

as an interim step in the production of an entirely safe cigarette,

Would Dr. Morin indicate to us what he would consider to be an acceptable tar and nicotine level in a cigarette?

Dr. Morin: I will leave the tar part to the pulmonary people, if you will, but I would like to insist on one aspect, that so far as the cardiovascular system is concerned we are not at all sure that nicotine is the sole culprit here. There is much evidence showing that carbon monoxide is responsible for a large proportion of patients presenting coronary insufficiency after smoking. There is also evidence that the cyanide which is present in

[Interprétation]

celui qui ne fume pas. Je crois que c'est là un effet immédiat.

M. Robinson: On a beaucoup insisté dans les questions, sur le fait que les médecins fument beaucoup. Il en va de même pour les infirmières, je crois, les infirmières qui sont en contact avec des patients, dont l'état de santé nécessite l'abandon de la cigarette. Est-ce que votre association pourrait, non seulement demander à ses membres de s'abstenir de fumer dans l'exercice de leurs fonctions, mais de les y obliger?

M. Peart: Monsieur le président, M. Geekie a déjà mentionné que notre président, il y a quelques années, avait porté cette question à l'attention des médecins au Canada. Le comité sur le cancer de l'Association a aussi présenté cette recommandation.

Les médecins, évidemment, sont des humains comme tous les autres. Ils sont sujets à l'influence de la réclame, mais je crois que nous devrions continuer à insister là-dessus. Comme Association, nous pouvons évidemment mettre cela sous les yeux des médecins. Les associations d'infirmières peuvent faire de même. Si nous pouvons aussi éliminer la réclame, nous pourrions peut-être convaincre les médecins tout autant que le public en général.

M. Robinson: J'ai une question que j'adresse au docteur Morin. Il a mentionné qu'un milligramme de nicotine peut être considéré comme dangereux. Je suppose qu'il parle de la production d'une cigarette plus sûre, comme on l'indique à la page 3, paragraphe (e), où l'association

recommande, comme étape provisoire dans la production d'une cigarette absolument sûre,

Le docteur Morin peut-il nous dire quelle quantité de goudron et de nicotine pourrait entrer dans une telle cigarette?

M. Morin: Je vais laisser la partie goudron à d'autres spécialistes, mais j'aimerais insister sur un aspect. En ce qui concerne le système cardio-vasculaire, nous ne sommes pas sûrs que la nicotine soit le seul coupable. Il a été prouvé que l'oxyde de carbone entraîne des insuffisances coronaires chez ceux qui fument. Il a également été prouvé que la cyanure, qui se retrouve dans la fumée de cigarette, peut jouer un rôle dans ces maladies.

[Text]

cigarette smoke may possibly play a role in this disease.

There are also other substances present in cigarette smoke, such as pyridine and certain volatile acids which act differently, which retain, at the kidney, salt and water and which are certainly deleterious in patients presenting with heart disease. Therefore, as a cardiologist, I am not sure that just lowering nicotine in a cigarette would settle the question. I will leave the tar part to somebody else, Mr. Chairman.

Dr. Bates: I think it is very important to stress the complexity of the interactions that occur between cigarettes and other things. I cannot speak for heart disease, but I would remind you of situations of an increased incidence of lung cancer, particularly in miners exposed to radiation, where there is radiation exposure and the cigarettes additive. It was shown in a study in a fluorspar mine in Newfoundland, in fact, that the high incidence of lung cancer in that mine was partly because the men were very heavy smokers but it was also because they were exposed, as was shown, to some slightly abnormal level of radiation.

The problem in assessing which part of the cigarette is responsible, therefore, is that you cannot merely say, "Well, tar will produce this effect in this experimental animal". You also have to take account of the fact that whatever factor you are now talking about has to have an additive effect with everything else, and this makes the position extremely complicated.

As you know, there are those who believe that polonium, which is a substance that comes into the tobacco leaf from the ground, may have something to do with it because it exists in a radioactive form in cigarette smoke. I do not know that many people hold that view now, but there are at least 10 scientific papers on that particular substance.

There are others who are concerned with hydrocarbons of different kinds in the lung, and there are others who point out that because it is a combination of particles and chemicals it may be the oxides of nitrogen that are absorbed on to the particles that are really doing the damage because you can damage the lung extensively by absorbing gases on to very small particles and breathing them in.

I mention all this because I do not think anybody can put their finger on a single factor and because there is a general presumption that the total tar and nicotine that comes out of a cigarette when it is smoked under standard conditions must have something to

[Interpretation]

Il y a aussi d'autres substances qui sont présentes dans la fumée de la cigarette, la pyridine et certains acides volatiles qui retiennent, dans les reins, le sel et l'eau qui peut avoir certains effets dangereux pour les patients qui souffrent de déficience cardiaque. Comme cardiologue, par conséquent, j'ignore si la diminution de la nicotine dans une cigarette réglerait cette question. Je laisserai l'aspect goudron à un autre témoin.

M. Bates: Je crois qu'il est très important d'appuyer sur la complexité des liens qui existent entre la cigarette et les autres éléments. Je ne puis parler de la question de déficiences cardiaques mais je vous signalerai l'augmentation enregistrée dans le nombre des cas de cancers du poulmon, particulièrement chez des mineurs qui étaient exposés à la radiation mais où la cigarette entraînait également en ligne de compte. Une enquête menée dans une mine de Terre-Neuve a démontré que le taux élevé du cancer du poulmon à cet endroit venait de ce que les mineurs étaient de gros fumeurs mais aussi de ce qu'ils étaient exposés à un degré légèrement anormal de radiation. Le problème qui se pose lorsqu'on essaie de déterminer quelle partie de la cigarette est responsable vient du fait qu'on ne peut dire que le goudron produit tel effet sur tel animal soumis à une expérience. Il faut également tenir compte du fait que d'autres facteurs entrent en ligne de compte, ce qui complique la situation.

D'aucuns croient que le polonium, cette substance qui passe de la terre à la feuille de tabac, peut également jouer un rôle ici, parce qu'il existe sous une forme radioactive dans la fumée de tabac. J'ignore s'ils sont nombreux ceux qui partagent encore cette opinion mais il existe au moins 10 documents scientifiques sur le sujet.

Certains gens s'inquiètent de la présence d'hydrocarbures de toute sorte dans les poulmons, d'autres qui disent que, parce qu'il s'agit d'un mélange de particules et de produits chimiques, ce sont peut-être ces oxydes de nitrogène qui s'accrochent aux particules qui causent réellement les dégâts; parce qu'il est impossible d'endommager le poulmon en respirant ces gaz.

Je mentionne tout cela car je ne pense pas qu'on puisse pointer du doigt un seul facteur plus responsable que les autres, et parce qu'on suppose d'une façon générale que la proportion de goudron et de nicotine qui vient de la cigarette, fumée dans des condi-

[Texte]

o with the levels of all the ambient substances with the exception, I think, of carbon monoxide which is virtually unaffected by a filter or anything else.

I think it is very important to stress the complexity of the unravelling problem with which people are faced rather than simply to point to one experiment concerned with tar, or one concerned with polonium, or one concerned with oxides of nitrogen. You just have to admit the complexity and the uncertainty of pinning down the influence of these individual agents.

Mr. Robinson: I appreciate, Mr. Chairman, that there are other substances that may be harmful to the individual, but the recommendation here is that cigarettes of lower tar and nicotine content be produced and that the content of these substances be described on each cigarette package.

I wish to refer to a bill I was proposing that would lay down that the tar content of

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the cigarette manufactured and sold in Canada shall not exceed eight milligrams and that the nicotine content of the cigarette manufactured and sold in Canada shall not exceed 0.5 milligrams.

Can any of the members of this panel indicate if this would be considered a preliminary step in the right direction, of reducing the level of tar and nicotine relative to producing a safer cigarette?

Dr. Peart: Mr. Chairman, this was a recommendation of our Association back in 1963 to the Conference on Smoking and Health referred to in our brief. Since that time I believe the cigarette manufacturers have been working on this very problem and have introduced filters, and so on. Therefore, I think the principle of this recommendation still applies, and we would hope that those concerned would work in this direction. It was a recommendation in 1963.

Mr. Robinson: I realize I have very little time left, Mr. Chairman, because of your ruling, but I wish to ask a further question relative to page 3, regarding the relation, if any, between cancer of the bladder and the smoking of cigarettes.

Dr. Matthews: Mr. Chairman, this is one area that has been very well established during the last few years by some experimental

[Interprétation]

tions normales, doit avoir quelque chose à faire avec le niveau de toutes les substances, sauf peut-être avec l'oxyde de carbone qui n'est pas touché par le filtre ou quoi que ce soit.

Je crois qu'il importe d'insister sur la complexité des problèmes plutôt que de ne mentionner qu'une expérience relative au goudron, une autre touchant le polonium, ou une autre reliée au problème des oxydes de nitrogène. Vous devez admettre l'existence de cette complexité et de la quasi-impossibilité de délimiter l'influence de chacun de ces agents.

M. Robinson: Je sais, monsieur le président, qu'il y a d'autres substances qui peuvent être nuisibles à l'individu, mais on réclame ici la fabrication de cigarettes dont le contenu en goudron et nicotine serait moins élevé et on demande qu'on en indique la teneur sur le paquet. J'aimerais signaler un bill que j'ai présenté, savoir que les cigarettes fabriquées et vendues au Canada ne devraient pas dépasser 8 milligrammes de goudron et 0.5 milligramme de nicotine.

Je me demande si les membres du groupe qui vient témoigner, ce matin, peuvent nous

dire si ce serait un pas dans la bonne voie que de réduire la teneur en goudron et nicotine en vue de la fabrication d'une cigarette plus sûre?

M. Peart: C'est une recommandation que notre Association a faite, en 1963, au cours de la Conférence sur la santé et le tabac. Depuis ce moment-là, je crois que les fabricants de cigarettes s'occupent précisément de ce problème. Ils ont, entre autres, introduit les filtres. Je crois donc que le principe de cette recommandation est toujours valable et nous espérons que les intéressés travailleront en ce sens. C'est une recommandation qui remonte à 1963.

M. Robinson: Je sais, monsieur le président, qu'il me reste peu de temps, mais j'aimerais poser une autre question quant au rapport qui existe, s'il en existe un, entre le cancer de la vessie et la cigarette?

M. Matthews: Cet aspect a été étudié à fond, ces dernières années, au cours d'expériences réalisées à l'université de Toronto. Il

[Text]

work at the University of Toronto. There is a carcinogenic substance that is excreted in the bladders of cigarette smokers.

Mr. Robinson: If I may, I have one further question, Mr. Chairman, of Dr. Bates. Could he expand a little on the reasons for smoking and the reasons for not smoking?

Dr. Bates: If I may answer your last question, there is a very good synopsis of the influence of cigarettes on cancer of the bladder on page 104 of the document I was talking about. I was just looking at the data, if this is of particular interest to the questioner: on the U.S. data it has gone up 75 per cent in the years 1950 to 1964.

I do not think I have anything original to say in answer to your question, but I would couple it with an answer to the question Mr. Rynard asked. There are two ways you can approach this problem in talking to an individual patient: the first is to make sure that he understands the implications of continuing smoking and that the physician has this in the right perspective; this is sometimes not easy but nevertheless is the first point. The second is, of course, the confidence relationship between these two people. It is critical. Here the fact that the physician is still smoking cigarettes, as far as I am concerned, destroys the confidence in regard to this discussion between the patient and the physician.

So that, the only point I would respond to is that it is helpful to do two things. It is remarkable to me that pipe smoking and cigar smoking, with the exception of the mini-cigars that were mentioned a moment ago, are not associated with the tremendous increases of mortality as are cigarettes, and many people can make the switch and should be helped to do so. The other thing is that it is helpful to try and gear a change of habit—and this is after all that—to a switch in other directions. I have found many people who can stop smoking when they set out on holiday and never pick it up again.

Another point is that an episode of influenza has a profound effect on smoking habits and I was noticing this week the effects of the Hong-Kong influenza in the United States on cigarette smoking there. For three weeks after a major epidemic cigarette consumption falls absolutely precipitously; there is a real dislike of cigarettes and an alert physician

[Interpretation]

y a une substance cancérigène excrétée dans la vessie par suite de l'usage du tabac.

M. Robinson: Et si vous me permettez de poser une autre question, monsieur le président, je l'adresserai au docteur Bates. Pourrait-il nous donner quelques détails sur les raisons qui militent en faveur de la cigarette et contre son usage? Je me demande si vous pouvez nous exposer les raisons pour lesquelles certaines personnes fument et d'autres ne fument pas?

M. Bates: Si vous me permettez de répondre à votre dernière question, il y a un excellent exposé de l'incidence de la cigarette sur le cancer de la vessie, à la page 104 du document que j'ai en main. Si cela vous intéresse, j'ai relevé certaines statistiques; d'après les statistiques américaines, il y a eu une augmentation de 75 p. 100 de 1950 à 1964.

Je ne pense pas pouvoir donner une réponse originale à votre question, mais j'en vais en profiter pour répondre à la question de M. Rynard, en même temps. Il y a deux façons d'aborder cette question lorsqu'on essaie de convaincre un patient; d'abord s'assurer qu'il comprend les répercussions qu'aura sur sa santé l'usage continu de la cigarette, et que le médecin place cela dans une bonne perspective; ce n'est pas toujours facile, mais, néanmoins, c'est le premier point. Le deuxième point, c'est, bien sûr, la confiance que ces deux personnes se témoignent. C'est le point critique. Le fait que le médecin fume encore des cigarettes détruit, selon moi, le sentiment de confiance qu'aura le malade à l'égard de ses conseils ou de ses avis.

Par conséquent, tout ce que je peux signaler, c'est qu'il est utile de faire deux choses. Il me semble remarquable que l'usage de la pipe ou du cigare, à l'exception du mini-cigare auquel on vient de faire allusion, ne soit pas associé à la forte augmentation du taux de mortalité, comme la cigarette; un bon nombre de gens peuvent passer de l'une à l'autre et on devrait leur aider à le faire. Il est toujours utile d'essayer de changer d'habitude, mais plus facile peut-être de remplacer l'habitude par un substitut. Bien des gens peuvent arrêter de fumer lorsqu'ils sont en vacances, par exemple. Autre chose, les épidémies de grippe ont de grandes répercussions sur l'usage du tabac; j'ai pris connaissance, cette semaine, des répercussions de l'épidémie de grippe de Hong-Kong, aux États-Unis, sur l'usage de la cigarette. Pendant trois semaines, après une forte épidémie, la consommation de cigarettes baisse radicalement. On est moins porté à fumer, et je crois qu'un méde-

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an take an opportunity here to try to prevent the subject from restarting.

I do not think any of these are original. It is an ongoing problem and I have not anything particularly helpful to add.

Mr. Robinson: I have a supplementary to that, Mr. Chairman. On page 5 of the brief you deal with giving up the habit. On the question of smoking as a release from stress, there any suggestion by the medical profession as to how this release from stress can be achieved without smoking?

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The Chairman: Perhaps Dr. Delarue could comment on this.

Dr. Delarue: I should like to go back very briefly if I may, Mr. Chairman, to the previous question as to why people start smoking.

I think that the exemplar responsibility by parents, teachers, doctors, athletes, public figures, legislators—and not necessarily in that order, may I say, sir—is a factor which we perhaps have not appreciated. This is why the Department of Health here in your own area has been so insistent that any educational campaign be directed at all ages, not just children.

It is admittedly easier to prevent a habit before it starts than to stop it once it is established, but the fact of the matter is that in the case of a home in which neither parent smokes, only one child of five smokes. Whereas in a home in which one or other or both parents smoke, four or five of the children smoke. This exemplar response means that we simply must never neglect adults by concentrating on children.

I, personally, believe that the discontinuation of the habit will be greatly accelerated when an exemplar group is created which seems more favourable to children than the cigarette-smoking counterparts. So that, this is an important reason why children take up smoking and one which we must not neglect in our approach to the problem. I am embarrassed to say that I have forgotten the question you asked me to answer, sir.

The Chairman: I think it has been covered, thank you.

Mr. Robinson: Thank you, Mr. Chairman.

Mrs. MacInnis (Vancouver-Kingsway): Mr. Chairman, I am greatly impressed and agree very much with the tough, direct approach of this brief. Obviously the Canadian Medical

[Interprétation]

cin vigilant peut saisir cette occasion pour essayer d'empêcher ses clients de recommencer à fumer.

Je ne pense pas que ce soit là des solutions originales. C'est un problème courant et je n'ai rien de vraiment utile à ajouter.

M. Robinson: J'ai une question supplémentaire à poser, monsieur le président. A la page 5 du mémoire, vous parlez de l'abandon de l'habitude de fumer. Au sujet de cette habitude susceptible de relâcher la tension, que proposent les médecins pour relâcher cette tension sans qu'on ait à fumer?

Le président: Je pense que le D^r Delarue pourrait répondre à votre question.

M. Delarue: Monsieur le président, je vais d'abord revenir à la question précédente, très brièvement. Pourquoi les gens commencent à fumer? Il me semble que la responsabilité exemplaire des parents, des instituteurs, des médecins, des athlètes, des législateurs, des hommes publics—peut-être pas nécessairement dans cet ordre—est un facteur dont nous n'avons peut-être pas tenu compte. C'est pourquoi le ministère de la Santé a insisté pour que les campagnes d'éducation soient destinées à tous les groupes d'âge, non seulement aux enfants.

Il est certainement plus facile de prévenir une habitude que de s'en défaire une fois qu'elle est contractée. Mais il reste que, dans les foyers où les parents ne fument pas, un seul enfant sur cinq fume alors que dans les foyers où l'un des deux conjoints fume, quatre enfants sur cinq fument. Cet exemple démontre que nous ne devons pas négliger les adultes pour nous concentrer sur les enfants.

Je crois qu'on abandonnera de plus en plus l'habitude de fumer lorsqu'on aura un groupe exemplaire qui aura plus d'influence sur les enfants que les fumeurs de cigarettes. Voilà une des principales raisons pour laquelle les enfants commencent à fumer et nous ne devons pas négliger cela lorsque nous envisageons le problème. Je regrette, Monsieur, mais j'ai oublié la dernière question que vous m'avez posée.

Le président: Je crois que vous y avez répondu. Merci.

M. Robinson: Merci, monsieur le président.

Mme MacInnis (Vancouver-Kingsway): Monsieur le président, je suis très impressionnée, et je suis d'accord avec la façon directe dont votre mémoire aborde le pro-

[Text]

Association must have gone into the fact that these recommendations will make dislocations in the economy. There is the smokers themselves, the tobacco growers, the advertisers, and government revenue. All these things will be upset if these recommendations are implemented.

I do not see how you are going to do it, but my question is, do you think that the Canadian people are now prepared for the tough recommendations recommended in this brief, or will we have to wait a while before we can get this thing achieved? In other words, can this Committee get away with recommending the elimination of advertising of all cigarettes by all media and at the point of sale? Can we get away with—the labelling and packaging, yes—the governments being encouraged to discontinue financial support and other subsidies to the tobacco industry, to mention only a few? Do you think we can do that now?

Dr. Lane: Mr. Chairman, I understand the “in” words these days are “planning, programming, budgeting” or something, and “cost benefit analysis”, and I can assure you without any shadow of a doubt that the saving in costs to the Canadian people, if people stop smoking cigarettes, will be much greater than the present costs that you mentioned, such as the income governments get from advertising and so forth. You would hardly suggest that a highly harmful and toxic substance such as opium poppies should be grown just because we could put a good tax on it. I suggest that what we are saying here this morning is just about in that class.

Mrs. MacInnis (Vancouver-Kingsway): This is exactly what I wanted to bring out. The medical profession considers that this matter is so serious that regardless of what dislocations or expense are involved in carrying out the recommendations, they should be done. Is that correct?

Dr. Matthews: Mr. Chairman, we think that is so, and we hope the public is ready for it. Obviously, this Committee is closer to public opinion than we are, but we hope the public is ready for it and we do not feel that we of the medical profession would be true to our precepts if we did not encourage you to do everything you could along this line.

[Interpretation]

blème. Apparemment, l'Association médicale canadienne a dû en venir au fait que ces recommandations vont certainement causer certaines perturbations dans l'économie. Il y a les fumeurs eux-mêmes, les producteurs de tabac, les publicitaires et les recettes du gouvernement. Tout cela serait bouleversé si ces recommandations étaient appliquées.

Je ne sais pas comment vous allez vous y prendre, mais pensez-vous que la population canadienne est prête dès maintenant pour les recommandations assez dures que vous faites dans ce mémoire, ou qu'il nous faudra attendre encore un peu avant de pouvoir les mettre en pratique? Autrement dit, notre Comité peut-il se permettre de recommander l'élimination de la publicité pour toutes les cigarettes que ce soit par les organes d'information ou au point de vente? Peut-il imposer certaines normes d'étiquetage et d'emballage, et encourager le gouvernement à cesser d'accorder une aide financière ou des subventions quelles qu'elles soient, à l'industrie du tabac pour ne citer que quelques exemples?

M. Lane: Monsieur le président, je sais qu'on parle beaucoup, de nos jours, de planification, de programmation, de budgétisation et d'analyses de rentabilité et je puis vous assurer, sans l'ombre d'un doute que les économies que réaliseraient les Canadiens s'ils cessaient de fumer seraient bien plus considérables que le coût dont vous parlez par exemple, la perte des recettes que retirent les gouvernements de la publicité, et ainsi de suite. Vous ne recommanderiez assurément pas que l'on produise une substance aussi dangereuse et toxique que le pavot somnifère sous prétexte que cela rapporterait des sommes importantes sous forme de taxe. Il me semble que ce que nous disons ce matin entre dans le même ordre d'idées.

Mme MacInnis (Vancouver-Kingsway): Voilà exactement ce dont je voulais parler. La profession médicale considère donc ce problème comme étant si sérieux qu'indépendamment des perturbations ou des pertes financières qu'entraînerait l'application des recommandations, il ne faut pas hésiter. Est-ce bien cela?

M. Matthews: Monsieur le président, nous le pensons, en effet, et nous espérons que le public est prêt à accepter la chose. De toute évidence, le Comité est plus proche que nous de l'opinion publique, mais nous espérons sincèrement que le public est prêt à accepter ces changements, et nous estimons que nous manquerions à notre devoir de médecins si nous ne vous encourageons pas à faire tout votre possible dans ce domaine.

[Texte]

[Interprétation]

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Mrs. MacInnis (Vancouver-Kingsway): This is good. The next thing I want to ask is this: the doctors and the teachers have both been mentioned as being very desirable groups to set examples. Now, there is one place where concealment is quite impossible, and that is the home. You cannot go into a room such as the bathroom and close the door and deceive everyone. Yet we have learned that the children of non-smokers and of families where there is only one parent who smokes are far less liable to start smoking themselves.

Could the medical profession recommend something with a view to having parents absolutely stop smoking? Parents cannot have a room where they can go and dissemble. The children know what is going on in the home. Is the medical profession able to impress upon parents now, to any degree, the absolute necessity of stopping smoking or not starting?

Dr. Matthews: Again is this not just the question of continuing your program of continual education with the sort of reinforcement that we have advised? The message to the parent is "Your smoking is going to prejudice the life expectancy of your children." But you have to beam that to the parent, not to the child.

Mrs. MacInnis (Vancouver-Kingsway): I am just wondering if the medical profession is able to do a great deal in reaching parents with that motivation now.

Dr. Bates: If I may respond to this, Mr. Chairman, the television set in the home, after all, is very well described as the third parent. I think the most powerful influence in the home that you can do something about is the television set, without any question at all at the moment.

Mrs. MacInnis (Vancouver-Kingsway): Even more important than the parents' own example?

Dr. Bates: It rather depends on the child's image of the parents. If the child has, say, a better image of Patrick Watson than his father then I dare say it is more important that he stops smoking.

These are value judgments of course and I am being ridiculous, but I do not think you can overemphasize the importance of the television set in the media of the child. This of course is the very point that we are after, and if you are serious about this influence

Mme MacInnis (Vancouver-Kingsway): J'approuve. J'aimerais poser une autre question: on a cité les médecins et les enseignants comme étant réellement des groupes propres à donner l'exemple. Or, il est un endroit où il est impossible de se cacher: et c'est à la maison. On ne peut s'enfermer dans la salle de bains pour fumer et déjouer tout le monde. On nous a bien dit que les enfants de non-fumeurs, ou ceux dont un seul parent fume, sont moins portés que les autres à commencer à fumer.

Est-ce que la profession médicale pourrait recommander quelque chose pour que les parents abandonnent complètement l'usage du tabac? Les parents n'ont pas de pièce où se cacher pour fumer. Les enfants savent ce qui se passe à la maison. La profession médicale peut-elle convaincre les parents de la nécessité absolue de cesser de fumer ou de ne pas commencer?

M. Matthews: Ne s'agit-il pas, là encore, de poursuivre votre programme constant d'éducation, en insistant sur les points supplémentaires que nous avons recommandés? Il faut dire aux parents qu'en fumant, ils misent à la longévité de leurs enfants. Mais c'est aux parents qu'il faut le répéter, non aux enfants.

Mme MacInnis (Vancouver-Kingsway): Je me demande simplement si la profession médicale peut faire quoique ce soit, à l'heure actuelle, pour convaincre les parents avec des motifs pareils.

M. Bates: Me permettez-vous de répondre à cela, monsieur le président? La télévision au foyer est très bien décrite comme le troisième parent, peut être considérée comme le troisième parent au foyer. Je crois que l'influence la plus puissante au foyer c'est l'appareil de télévision, sans aucun doute à l'heure actuelle.

Mme MacInnis (Vancouver-Kingsway): Même plus importante que l'influence des parents?

M. Bates: Cela dépend de la façon dont l'enfant voit ses parents. Si l'enfant aime mieux Patrick Watson que son père, je dirais qu'il est plus important que Patrick Watson arrête de fumer plutôt que son père.

Ce sont là des jugements de valeur, mais je ne pense pas qu'on puisse exagérer l'importance des appareils de télévision dans le milieu dans lequel l'enfant est élevé, et si vous voulez contrecarrer sérieusement cette influence, il faut tenir compte de ces moyens

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then you have to look at this medium very closely. Some of the parents will respond, but you can start with the one thing you can deal with.

Mrs. MacInnis (Vancouver-Kingsway): You mention in your brief that women who are heavy smokers often have smaller babies than non-smokers. We have also asked the question whether there are any deleterious effects. I gather smallness is not necessarily a harmful thing. I am looking for motivations that might work with women. Are there deleterious effects on children as the result of the mothers smoking during pregnancy?

Dr. Lane: The risk of prematurity is much greater and the premature child, as you know, has a poorer life expectancy than the normal child. This is fairly recent material too, some of it Canadian.

Dr. Delarue: I might add that the Ontario figures, well guarded and now well publicized, show there is a 50 per cent increase in perinatal mortality for the premature infant. These figures are from Ontario.

Mrs. MacInnis (Vancouver-Kingsway): Thank you very much, Mr. Chairman.

The Chairman: Dr. Yewchuk?

Mr. Yewchuk: Mr. Chairman, the topic of replacing cigarettes with cigars and pipes has been touched on. We have had figures presented to this Committee in the past which seem to indicate that people who smoke a combination of cigars and pipes might even live longer than non-smokers. Statistically, I think these were insignificant figures, but in any case that is how it was presented.

Have there been any comparative studies on the relative content of tar, nicotine and gaseous substances between cigarettes and cigars that might be useful to present to the Committee, and are these various aspects blamed for particular diseases—for example, nicotine for vascular diseases, tar for cancer, and that sort of thing?

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Dr. Morin: I think that as far as vascular and coronary artery disease is concerned there is not a higher incidence of these diseases in people who do smoke either tobacco or cigars. I would not be able to answer the question regarding the content of nicotine or other gaseous substances.

[Interpretation]

très sérieusement. Certains des parents répondront: «Mais vous commencez avec une chose évidemment.»

Mme MacInnis (Vancouver-Kingsway): Dans votre mémoire, vous signalez que les femmes qui sont de grosses fumeuses ont souvent des bébés plus petits que les autres, que les non-fumeuses. Nous avons déjà demandé s'il y avait des effets délétères. Je comprends que la petitesse n'est pas nécessairement un mal en elle-même. Je cherche à trouver des motifs qui me permettraient de motiver les femmes. Est-ce qu'il y a des effets délétères qui peuvent attaquer l'enfant par suite de l'usage du tabac chez la femme enceinte?

M. Lane: Le risque de naissance prématurée est beaucoup plus considérable et l'enfant prématuré a une espérance de vie réduite par rapport aux autres. Ce sont là aussi des découvertes assez récentes, certaines ont été faites au Canada.

M. Delarue: Je pourrais ajouter que les chiffres de l'Ontario, déjà très bien gardés sont maintenant bien publiés, montrent qu'il y a une augmentation de 50 p. 100 des mortalités prénatales. Ces chiffres s'appliquent à l'Ontario.

Mme MacInnis (Vancouver-Kingsway): Merci beaucoup, monsieur le président.

Le président: Monsieur Yewchuk?

M. Yewchuk: La question de remplacer la cigarette par un substitut comme le cigare et la pipe a été déjà abordée. On nous a présenté des chiffres dans le passé qui semblent indiquer que les gens qui fument même les deux, les cigares et la pipe, peuvent vivre encore plus longtemps que les non-fumeurs.

Je me demande s'il y a eu des études comparatives de la teneur de goudron, de nicotine et de substances toxiques entre le cigare et la cigarette, données qui seraient utiles au Comité. Je me demande si ces divers éléments ou ces aspects peuvent être responsables, par exemple, nicotine pour les maladies cardio-vasculaires, le goudron pour le cancer, etc.

M. Morin: Eh bien, en ce qui concerne, je crois, les maladies vasculaires, coronaires ou artérielles, il n'y a pas d'incidences plus considérables chez ceux qui fument le tabac ou le cigare. Je ne puis pas répondre au sujet de la teneur de la nicotine ou d'autres substances gazeuses.

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Dr. Bates: I can give a partial answer to that. The most striking difference between cigarettes and the other two is the temperature at which the tobacco burns. It is 300 degrees hotter in the case of cigarettes. The first thing you have to say is that it is not so much what is in the tobacco originally, but this temperature difference. And the other thing one has to say, and I think I mentioned this earlier, is that we are not at a stage when you can pick out an ingredient of the smoke and pin a particular entity on it. Nor is there yet the data which enables one to be sure of the answer to the question about why pipes and cigars do not have these effects.

Mr. Yewchuk: Sir, do I take it that the Canadian Medical Association suggests switching from cigarettes to cigars if you cannot stop.

Dr. Bates: I am not in a position to speak for several thousand doctors.

Dr. Lane: Let me put it this way: it would be an improvement. And indeed if you had asked me the question a half a dozen years ago I would have suggested it as one way of going about it because for many people what it really does is cut down on the amount that they smoke. The person who smokes cigars finds that he smokes, when you get right down to it, many fewer minutes per day.

But the more recent data which Dr. Morin has been stressing on the cardiovascular side shows that the risk of coronaries and deaths from coronaries is up, and even if it is up fractionally, if it is 1.2 instead of 1 type of thing, this is our main cause of death in this country and, hence, I think it is very important to just say "absolutely no" along this line. The risk for example of lung cancer, if you smoke up to ten cigarettes a day, is there, sure, but lung cancer does not kill that many people even yet, sad as it is. But the risks from dying of coronaries is just such a big part of our total mortality that even a fractional gain here I think is worth mentioning. Hence I tell people, although my field is chest diseases, to stop because it will help their heart.

Mr. Yewchuk: That brings up my next question, other tobacco products. I am referring to things like chewing tobacco and snuff. I have heard it said in the past that people who quit smoking seem to get similar satisfaction from these chewing products. Is there

[Interprétation]

M. Bates: Je puis donner une réponse partielle. La différence la plus frappante entre la cigarette et les deux autres est la température de combustion du tabac. Elle dépasse 300 degrés dans le cas de la cigarette. C'est la première chose dont il faut tenir compte. Ce n'est pas tellement ce qu'il y a dans le tabac mais c'est cette différence de température. Une autre chose dont il faut tenir compte, et je crois l'avoir mentionnée plus tôt, c'est qu'on ne peut pas peut-être attribuer une responsabilité à un élément particulier, une substance particulière de la fumée. On ne peut pas départager le rôle des substances. Il est donc difficile de répondre à la question de savoir pourquoi la pipe et le cigare n'ont pas les mêmes effets.

M. Yewchuk: Dois-je donc croire que l'Association médicale canadienne recommande la substitution du cigare à la cigarette, si on ne peut arrêter?

M. Bates: Je ne suis pas en mesure de me faire le porte-parole de plusieurs milliers de médecins.

M. Lane: Il me semble que ce serait là une amélioration et si vous m'aviez posé la question il y a six ans, j'aurais dit que c'était une façon de procéder, car pour bien des gens, cela réduit la quantité de tabac consommé. Celui qui fume des cigares évidemment fume moins de cigares que de cigarettes.

Mais les données les plus récentes que le docteur Morin a présentées, sur le côté cardio-vasculaire, montrent que les risques de maladies cardio-vasculaires et de décès augmentent même si c'est seulement de 1.2 au lieu de 1, c'est là la principale cause de mortalités au pays. Je crois qu'il est important de répondre «absolument non» à ce sujet. Les risques, par exemple, du cancer du poumon existent si vous fumez jusqu'à dix cigarettes par jour. Mais le cancer du poumon ne cause pas autant de mortalités, alors que, dans le cas des maladies cardio-vasculaires, ce risque est beaucoup plus important. Je dis aux gens d'arrêter de fumer parce que cela va aider leur cœur à bien fonctionner.

M. Yewchuk: Cela m'amène à l'autre question des autres produits du tabac. Je veux parler du tabac à chiquer, du tabac à priser. J'ai entendu dire, dans le passé, que les gens qui arrêtaient de fumer pouvaient peut-être obtenir une certaine satisfaction avec ces produits

[Text]

any information whether these products are equally harmful, less harmful or not harmful at all?

Mr. Mather: There are no spittoons.

Dr. Lane: Too little data, I think, is the problem.

Mr. Yewchuk: Those are all the questions I want to ask, Mr. Chairman.

The Chairman: Mr. Foster?

Mr. Foster: First of all I would like to compliment the delegation from the C.M.A. that we have before us this morning, especially because they have presented specific recommendations. This is very important because at the end of all our discussions this Committee will have to sift through these recommendations and decide which ones we are going to endorse and recommend back to the House.

Mr. Geekie, you are with Public Relations for the C.M.A.?

Mr. Geekie: Yes.

Mr. Foster: Could you tell us what your public relations program is in this matter. Does your program just keep your profession advised of the dangers of cigarette smoking, or is it directed more towards the general public?

Mr. Geekie: You have raised three or four questions. First, I think it should be pointed out that the public education in this area has been done very largely by the Department of National Health and Welfare, the Canadian Cancer Society which was formed originally by the C.M.A.—this was one of the major purposes of forming this organization originally—and one or two other voluntary health agencies. The C.M.A. itself has concerned itself primarily with educating the profession, as it were, both in terms of the scientific materials and also its role relative to the general public.

It might be of interest to this Committee to know that since early 1960, *The Canadian Medical Journal* has published in excess of 400 pages of material relative to this particular subject. We have continued to work in co-ordination with the Canadian Cancer Society on the production of a number of their materials for public distribution. The C.M.A. has worked with the Department of National

[Interpretation]

dérivés. Est-ce qu'ils causent moins de tort ou pas de tort du tout?

M. Mather: Il n'y a pas de crachoirs.

M. Lane: Je crois que nous avons trop peu de données là-dessus.

M. Yewchuk: C'est tout ce que je voulais demander, monsieur le président.

Le président: Monsieur Foster?

M. Foster: Tout d'abord, je tiens à féliciter la délégation que nous avons ici ce matin, surtout pour avoir présenté des recommandations précises. Je crois que cela est important, car à l'issue de nos discussions, le Comité devra décider quelles recommandations il va adopter. Monsieur Geekie, vous vous occupez des relations publiques pour l'Association médicale canadienne, n'est-ce pas?

M. Geekie: Oui.

M. Foster: Pouvez-vous nous dire quel est exactement votre programme aux termes des relations publiques à ce sujet. Votre programme ne fait-il qu'aviser votre profession des dangers de la cigarette ou s'agit-il plutôt d'un programme qui vise le public en général?

M. Geekie: Vous avez soulevé trois ou quatre questions. D'abord, je crois qu'il convient de signaler que le programme d'éducation publique dans ce domaine a surtout été fait par le ministère de la Santé nationale et du Bien-être social, l'Association du cancer du Canada qui a été instituée par notre association surtout, et c'est là le début de cette institution, avec deux ou trois autres services bénévoles de santé. L'Association s'est surtout préoccupée d'éduquer les membres de la profession sous forme de documentation scientifique et a aussi tenu compte de son rôle envers le grand public.

Depuis les premières années 1960, le *Canadian Medical Journal* a publié à peu près 400 pages de documentation sur ce sujet. Nous continuons à travailler en collaboration avec la Société du cancer du Canada en vue de mettre au point de la documentation qui doit être distribuée au public. Nous avons collaboré avec le ministère de la Santé nationale et du Bien-être social, notamment le docteur

[Texte]

Delarue who sits on the Technical Advisory Committee to the Department. We have co-operatively produced some pamphlets, for example, and quite a bit of material. But the C.M.A. itself has not been directly involved in public education other than to provide individuals for technical programs and to assist, for example, the CBC and other television broadcasting agencies by personnel appearing and presenting material on television programs.

Mr. Foster: Thank you very much. My next question is to Dr. Delarue. I believe Dr. Delarue has suggested that we not just associate cigarette smoking with lung cancer but rather with emphysema, bronchitis and cardiovascular disease.

One of the previous witnesses suggested that about 90 per cent of lung cancer was perhaps due to cigarette smoking and that the number of deaths is slightly over 4,000 per year. I think it would be very useful if the medical profession could give us, if they cannot give us exact projections, an estimate of the number of cardiovascular deaths or deaths due to bronchitis and pulmonary emphysema a year through cigarette smoking.

Dr. Delarue: Mr. Chairman, I should like to refer briefly to American statistics, if I may, because we are aware of the fact that Canadian statistics are turning out to be about one-tenth of American statistics on a straight population standard. They have actually done this by assembling data to indicate how many people would be expected to be alive each year in the United States were there no smokers.

If you compare that with the actual number of people that are alive, you have the rather amazing statistic that 250,000 people die each year in the United States, presumably because of some relationship with smoking. To supplement your specific figure of 90 per cent deaths from lung cancer being due to cigarette smoking—and that is a very conservative estimate, by the way—Dr. Bates and I would agree, I think, that 80 per cent of major illnesses due to emphysema are primarily related to cigarette smoking. It is simple to do the mathematics, which I have not done to date, but it is said that 50 per cent of the excess deaths in smokers are from heart disease. So that, again you could accumulate those statistics were you to sit down simply and take the death rates from the various sources. This would, in the three

[Interprétation]

technique du ministère. Nous avons donc aidé à préparer certaines brochures. L'Association médicale comme telle ne s'est pas directement occupée d'éducation du public, sauf de présenter des documents techniques et d'aider, par exemple, Radio-Canada et d'autres agences de télévision en fournissant du personnel qui présente des renseignements à la télévision.

M. Foster: Merci beaucoup. Ma question suivante, je l'adresse au docteur Delarue. Je crois, docteur Delarue, que vous avez dit que nous ne devrions pas rattacher nécessairement la cigarette au cancer du poumon, mais plutôt à l'emphysème, à la bronchite, aux maladies cardio-vasculaires.

Un des témoins précédents a suggéré qu'environ 90 p. 100 des cancers du poumon étaient peut-être attribuables à la cigarette et qu'il y a plus de 4,000 morts par année causées par le cancer du poumon. Je crois qu'il serait utile que la profession médicale puisse nous donner une évaluation, si elle ne peut pas nous donner des projections exactes, du nombre de décès par année dus à des maladies cardio-vasculaires ou à la bronchite et à l'emphysème pulmonaire et causés par la cigarette.

M. Delarue: Monsieur le président, j'aimerais me reporter brièvement aux statistiques américaines, si vous me le permettez, nous savons que les données statistiques canadiennes représentent environ un dixième des statistiques américaines, compte tenu de nos populations respectives. On a pu colliger des données pour indiquer combien de gens seraient encore en vie aux États-Unis s'il n'y avait pas de fumeurs.

Si vous comparez cela au nombre de gens qui vivent, vous avez le résultat renversant que 250,000 personnes meurent chaque année aux États-Unis et que cette mortalité est probablement causée par les effets nocifs du tabac. Vous avez mentionné un taux de 90 p. 100 de mortalités attribuables au cancer causé par l'usage de la cigarette. C'est là une évaluation très modérée. Nous croyons que 80 p. 100 peut-être des principales maladies attribuables à l'emphysème sont surtout rattachées à l'usage du tabac. On peut facilement faire le calcul, mais je ne l'ai pas encore fait. On dit que 50 p. 100 du taux excessif de maladie chez les fumeurs provient des maladies cardiaques. On peut donc additionner ou accumuler toutes ces statistiques et on voit qu'il y a une incidence de mortalité provenant de ces diverses sources. On obtiendra des sta-

[Text]

major areas, provide the—I have used the word “staggering” estimates of the risk, and I would propose to you that the risks are nothing less than staggering.

Mr. Foster: You have suggested 250,000 in the United States. Can we take 10 per cent of this, project it to Canada and say, there are roughly, 20,000 to 25,000 deaths per year from cigarettes?

Dr. Delarue: To my knowledge, and the Department of Health may have figures on this, we have not developed those figures in

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Canada. At least, I have not seen them, and I would not be prepared, before this august group, to put my neck out too far in that regard.

Mr. Foster: Thank you very much. My other question is for Dr. Morin, who suggested that one milligram of nicotine in the human body is toxic. What amount of smoking and what period of time would result in a person who inhales reaching this level?

Dr. Morin: I would not say that one milligram is toxic. What I meant to say was that one milligram injected will determine certain changes in the cardiovascular system which are quite noticeable. For example, the heart rate will increase, the cardiac output, which is the amount of blood which is injected by the heart, will increase, the peripheral resistance will also increase, which will mean that the blood pressure will go up. Also there will be a noticeable change in the skin blood flow. The skin blood flow will drop by a very important amount. For one cigarette, of course, this has very little consequences. What we feel is that this repeated for several years may well be one of the factors—not using the word “cause”—that may be responsible for the increased incidence of coronary artery disease in smokers. One milligram of nicotine would be one deeply inhaled cigarette as far as the amount is concerned.

Mr. Foster: That is a very graphic description. Thank you very much. Mr. Chairman, since we have the C.M.A. here, it seems to me that one useful thing this Committee might do, as we already have a person who has given an excellent testimonial and we have the press sitting back here, is that the three could combine to carry out an example for all Canadian people. Mr. Fortin would be willing to volunteer and we would put him through the same tests as are carried out at Dr. Moss's clinic in Toronto and see what his reaction is. If the press could keep this publicized, with

[Interpretation]

tistiques renversantes. Le risque est tout à fait fantastique.

M. Foster: Vous avez parlé de 250,000 personnes aux États-Unis. Pourrions-nous diviser cela par dix et l'appliquer au Canada? Dire qu'il y a de 20,000 à 25,000 mortalités attribuables à la cigarette au Canada.

M. Delarue: Selon les renseignements que je possède, le ministère de la Santé nationale et du Bien-être social a peut-être des chiffres

à ce sujet, nous n'avons pas ces données au Canada et je ne suis pas disposé à faire des prédictions extrêmes.

M. Foster: Merci beaucoup. J'aimerais poser une autre question au Dr. Morin. Vous avez dit, Dr. Morin, que la présence d'un milligramme de nicotine dans le corps humain constituait un toxique. Au bout de combien de temps, un fumeur peut-il atteindre ce degré?

M. Morin: Je ne dirais pas qu'un milligramme de nicotine est toxique, je voulais dire que la présence d'un milligramme de nicotine peut déterminer certains changements du système cardio-vasculaire qui sont très remarquables. Par exemple, le cœur va pomper davantage, la résistance périphérique va augmenter, ce qui veut dire que la pression sanguine va s'accroître et il y aura changement considérable quant à l'écoulement du sang. Une cigarette, naturellement, n'entraînera que peu de conséquences. Ce que nous redoutons c'est que l'usage abusif au cours des années soit un facteur, une des causes responsables de l'incidence accrue des maladies cardiovasculaires. Un milligramme de nicotine correspond à une cigarette aspirée profondément.

M. Foster: C'est une description graphique, merci beaucoup. Monsieur le président, puisque nous avons ici des représentants de l'Association médicale canadienne, il y a une chose utile que le Comité pourrait faire. Comme nous avons déjà eu d'excellents témoignages et que nous avons des journalistes avec nous, tous pourraient se donner la main et entreprendre une campagne de publicité afin de donner le bon exemple aux Canadiens. Si M. Fortin voulait bien consentir à subir le même test que le Dr. Moss à Toronto pour voir quelle serait sa réaction. Si la

[Texte]

this Committee meeting over a period of the next year or so, we could follow his progress in the press and this would be useful, not only for the Committee but for the whole Canadian population.

The Chairman: Have you any other comments? Mr. McBride?

Mr. McBride: Mr. Chairman, due to the time I will intentionally pass but I want to make one observation, and that is, I see there are eight members in the Delegation from the C.M.A. If I assume that they are all non-smokers, there should have, in fact, been 2.6 of them who were smokers. Therefore my question is, perhaps to Dr. Matthews, then, is this a packed delegation? I am really quite serious on this because I know medical doctors who are up and coming practitioners, in my humble estimation, and as recently as last week they just laugh at this whole business. They will not take it seriously at all. They are in the 35 per cent, but where is the 35 per cent in this delegation?

Dr. Matthews: I suppose, Mr. Chairman, the problem is who is the smartest, the person who has given it up or the person who never started? I have not polled this delegation. I used to smoke. I do not know that it would prove anything though, Mr. Chairman.

Mr. McBride: No. Thank you. It was just an interesting thought.

The Chairman: Have you any comments, Dr. Delarue?

Dr. Delarue: Just very briefly. I would take issue with your statement and I think this might be misleading, sir, if I may. Doctors who continue smoking do not, in general, deny the risk. In other words, better than 95 per cent of Canadian doctors who continue smoking admit—all doctors admit the risk, and this is from a graded sampling of Canadian doctors. I think the person who laughs at the risk is a very unusual member of the Canadian medical profession at the moment. I would not want your statement to go unchallenged.

Mr. McBride: The argument usually goes, "It is nothing compared to the danger of eating animal fat so why worry about it?"

Dr. Delarue: This would be a ridiculous statement.

Dr. Peart: If Mr. McBride really wants to know the composition of our delegation, it is purely by chance that none of us smoke—well, these cigarettes.

[Interprétation]

presse faisait de la publicité, nous pourrions peut-être suivre ces progrès et cela serait utile non seulement pour nous-mêmes mais pour toute la population.

Le président: Avez-vous d'autres questions ou d'autres commentaires à faire?

M. McBride: Je voudrais faire une observation. Comme le temps presse, je ne poserai pas de questions. Je vois qu'il y a huit membres de la délégation de l'Association médicale du Canada. Je suppose qu'ils sont tous des non-fumeurs. S'il y avait 2.6 d'entre eux qui seraient fumeurs, cela répondrait peut-être à la question du Dr. Matthews: S'agit-il donc d'une délégation qui a été préparée en conséquence, préparée à dessein? Je connais bien des médecins qui fument. Ils sont d'excellents médecins et aussi récemment que la semaine dernière, ils ont ri de tout cela. Ils ne représentent peut-être que 35 p. 100 de profession médicale.

M. Matthews: Il s'agit de savoir si ce sont des personnes qui ont arrêté de fumer ou qui n'ont jamais fumé. Moi-même, j'avais l'habitude de fumer et j'ai cessé. C'était simplement une question de hasard.

M. McBride: Merci, c'était bien pensé.

Le président: Avez-vous des commentaires, Dr. Delarue?

M. Delarue: Un mot seulement. Je n'aime pas votre déclaration et je crois que cela peut induire en erreur. Les médecins qui continuent à fumer ne peuvent pas nier les risques. Autrement dit 95 p. 100 des médecins qui continuent à fumer admettent, avouent et reconnaissent les risques. Je crois donc que le médecin qui ne prend pas cela au sérieux, qu'il est un membre très original au sein de la profession médicale au Canada à l'heure actuelle. Je ne voudrais pas que votre déclaration passe inaperçue.

M. McBride: Il me semble que ce n'est rien comparativement aux dangers d'absorber des graisses animales.

M. Delarue: Non, non, cela est tout à fait ridicule.

M. Peart: Si M. McBride désire vraiment connaître la composition de notre délégation, c'est par pur hasard que personne d'entre nous ne fume la cigarette.

[Text]

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Dr. Matthews is here because he is the President-Elect. Dr. Delarue is representing the C.M.A. on Technical Advisory Committee on Smoking and Health. We have two experts, one in cardiology and one in chest physiology. They were the best people we could get hold of. Dr. Lane is the Chairman of the C.M.A. Standing Committee on Public Health and it was thought he would be a logical person to be here. Dr. Maclean is Chairman of the C.M.A. Standing Committee on Cancer and he was the logical person to be here. Mr. Geekie and I are staffers. So I think it is just by chance that we just do not represent more smokers in our delegation.

Mr. McBride: I would commend you for your five recommendations. I think they are excellent. Thank you, Mr. Chairman.

Mr. Geekie: I am sorry the Devil's advocate left before I got a chance to say this because I think he was earlier in his remarks making a very important point. He was getting across the point—and I am very pleased and proud of the health educator—that people have been able to achieve the degree of success they have in stopping the rapid increase of smoking that was going on for some time, and in some areas reducing it. I think what Mr. Otto was getting across is that we cannot do the job by education alone; that we have got to attack it from as many different avenues as possible including legislation. This is really the point of this.

The Chairman: Thank you, Mr. Geekie. Gentlemen on behalf of all the members way I commend you, and the Canadian Medical Association very much for sending, as witnesses before us, such a distinguished group. If it was not very clear in the minds of those who laughed when I said that you represented one of the most distinguished groups in Canada I think they now have proof that you do. I commend all of you, and thank you very much for coming.

The meeting is adjourned until Monday at 3:30 o'clock, on Bill S-26.

[Interpretation]

Le Dr Matthews est avec nous parce qu'il est le président élu. Le Dr Delarue représente le comité consultatif technique sur la cigarette et la santé de l'Association médicale du Canada. Nous avons deux experts, un cardiologue et un physiologiste pulmonaire. Ce sont donc les deux meilleurs spécialistes que nous ayons trouvés. Le Dr Lane est le président du Comité permanent de la santé publique de l'Association, et nous avons pensé qu'il serait bon l'avoir avec nous. Le Dr McLean est le président du Comité permanent sur le cancer, de l'Association, et, par conséquent, il lui appartenait d'être ici. M. Geekie et moi-même sommes membres du personnel. C'est un pur hasard que nous ne représentons pas une proportion plus élevée de fumeurs.

M. McBride: Je vous félicite de vos recommandations. Elles sont excellentes. Merci, monsieur le président.

M. Geekie: Je regrette que l'avocat du diable soit parti avant d'avoir eu la chance de dire ce que j'en pensais. Car, je crois que dans ses remarques du début, il a soulevé un point important. Il a attaqué la question directement et je suis fier que, par l'entremise de notre éducateur en santé, la collectivité ait pu obtenir un certain succès pour diminuer ou mettre fin à la popularité de la cigarette. Il faut que nous attaquions ce problème sur tous les fronts possibles, y compris le front législatif.

Le président: Merci beaucoup, monsieur Geekie.

Messieurs, au nom de tous les députés, je dois maintenant vous féliciter et vous remercier beaucoup. Je remercie beaucoup l'Association médicale du Canada de nous avoir envoyé comme témoins des gens aussi compétents, un groupe aussi distingué.

Et ceux qui ont ri, lorsque j'ai dit que vous représentiez l'une des associations les plus distinguées du Canada, ont vu que j'avais tout à fait raison, que je ne me trompais pas.

Je vous remercie de nouveau.

La séance est levée jusqu'à lundi, à 3 heures et demie, pour l'étude du Bill S-26. Merci.

APPENDIX H

THE CANADIAN MEDICAL
ASSOCIATION BRIEF
RE: SMOKING AND HEALTH
TO

THE HOUSE OF COMMONS STANDING
COMMITTEE ON HEALTH, WELFARE
AND SOCIAL AFFAIRS

THURSDAY, FEBRUARY 27, 1969

Mr. Chairman, Mrs. MacInnis, Members of
the Committee, Ladies and Gentlemen,

HISTORICAL REVIEW

The Canadian Medical Association, representing over 20,000 physicians from all branches and disciplines of medicine, is pleased to have this opportunity to present to this Committee and the people of Canada its views regarding the major problems created by the use of tobacco and, in particular, the smoking of cigarettes. For over 100 years the Association has served Canadian medicine as the base of the profession's traditional voluntary self government. The traditional scientific discipline of medicine, combined with the responsibility of serving as the public voice of the profession has resulted in our normally issuing guarded or conservative public statements. The Committee is reminded of this position of the Association to emphasize the importance and seriousness that it attaches to the subject at hand. The story of the health hazard created by cigarette smoking represents an unrivalled tale of illness, disability and death. The potential benefits to be derived from the cessation of smoking place it at a level of importance in preventive medicine with pasteurization of milk, the purification and chlorination of water, and immunization.

The hazards of cigarette smoking have been under almost continuous study by the C.M.A. since 1959. Original concern was related to the increase in lung cancer; however, as early as 1960 the Association's Committee on Public Health voiced concern re. "a growing impression throughout the medical profession, though as yet (1960) poorly documented, that a relationship exists between tobacco smoking and bronchitis, bronchiectasis, emphysema and coronary disease". In 1961, the Association expressed publicly for the first time its belief that a direct relationship exists between smoking and lung cancer. In direct-

APPENDICE H

MÉMOIRE DE L'ASSOCIATION
MÉDICALE CANADIENNE
SUR LE TABAC ET LA SANTÉ
PRÉSENTÉ AU COMITÉ PERMANENT
DE LA CHAMBRE DES COMMUNES
SUR LA SANTÉ, LE BIEN-ÊTRE
ET LES AFFAIRES SOCIALES

Le jeudi 27 février 1969

M. le président, M^{me} MacInnis, MM. les membres du Comité, Mesdames et Messieurs,

HISTORIQUE

L'Association médicale canadienne, qui représente plus de 20,000 médecins de toutes les branches et les disciplines médicales, est heureuse de pouvoir présenter au Comité et à la population du Canada ses propres vues sur les problèmes sérieux qu'entraîne l'usage du tabac et, plus particulièrement, celui de la cigarette. Depuis plus de 100 ans, l'Association a été le fondement sur lequel repose l'autogouvernement volontaire traditionnel de la médecine canadienne. La discipline scientifique traditionnelle de la médecine, alliée à la responsabilité de servir de porte-parole à la profession, a eu comme résultat de n'inspirer normalement que des déclarations publiques prudentes et circonspectes. Nous désirons rappeler au Comité cette attitude de l'Association afin de souligner l'importance et le poids que nous attachons au sujet dont nous allons parler. L'ensemble des dangers auxquels la cigarette expose la santé offre un tableau sans pareil de maladie d'invalidité et de mortalité. Les bénéfices que l'on peut envisager lorsqu'on décide d'abandonner le tabac placent cette décision dans le cadre de la médecine préventive, au même niveau que la pasteurisation du lait, la purification et la chloruration de l'eau et l'immunisation.

Depuis 1959, l'A.M.C. a presque continuellement étudié les dangers de la cigarette. C'est l'augmentation des cancers du poumon qui a fait naître notre première inquiétude; dès 1960, toutefois, le Comité d'hygiène publique de l'Association s'inquiétait de ce «qu'une impression grandissante, bien qu'encore très peu documentée (1960), dans toute la profession médicale, voulait qu'il existât un lien entre l'usage du tabac et la bronchite, la bronchiectasie, l'emphysème et les maladies coronariennes». Pour la première fois, en 1961, l'Association a publiquement exprimé la conviction qu'il existait un rapport direct

ing its Committee on Cancer to study ways and means whereby the physician as an individual and the Association could effectively educate the profession and the public re. the relationship of cigarette smoking and lung cancer, the Association accepted "the weight of evidence implication cigarette smoking as the principal causal factor in the increased incidence of lung cancer in Canada".

A widespread professional and public education program was launched by Dr. M. R. MacCharles, President of the Association, in an open letter to all physicians on March 16, 1963. In an unprecedented move, he called upon Canadian physicians to set an appropriate public example. For those who felt unable to discontinue their smoking habit he requested that they "abstain when exercising professional duties—especially in their offices and in hospital".

The position of the Canadian Medical Profession was clearly outlined in a Brief submitted to the National Conference on Smoking & Health convened by the former Minister of National Health & Welfare, the Honourable Judy LaMarsh on November 25 and 26, 1963. For the record, may we read into the records of this Committee a brief summary of that 1963 Brief:

"There has been a marked increase in the mortality due to lung cancer in Canada in the past 30 years. The increase has been greatest in males.

"Prospective and retrospective studies in humans have established a causal, though not necessarily an exclusive relationship between this disease and the smoking of cigarettes.

"Not only the mortality rate due to lung cancer but also the total death rate is much higher in smokers than in non-smokers; a major contribution to the total increase is made, by coronary artery disease.

"The annual consumption of cigarettes per person over the age of 15 in Canada has increased four-fold since 1935.

"As measures designed to reduce this public health problem, The Canadian Medical Association:

(a) will carry out a concerted program of professional education for its members;

entre l'usage du tabac et le cancer du poumon. En demandant à son Comité sur le cancer d'étudier des moyens qui permettraient aux médecins, à titre personnel, aussi bien qu'à l'Association elle-même, de renseigner efficacement les membres de la profession et le public sur cette relation entre l'usage de la cigarette et le cancer du poumon, l'Association acceptait d'avance «tout le poids de la preuve faisant de la cigarette le principal facteur d'augmentation des cancers du poumon au Canada».

Le 16 mars 1963, le président de l'Association, le Dr M. R. MacCharles, dans une lettre ouverte à tous les médecins, lançait un vaste programme d'éducation à l'intention des membres de la profession et du public. Dans un geste sans précédent, il invitait les médecins canadiens à donner l'exemple. À ceux qui se sentiraient incapables d'abandonner le tabac, il demanda de «s'abstenir de fumer dans l'exercice de leur profession, surtout dans leur cabinet ou à l'hôpital».

L'attitude de la profession médicale au Canada a été clairement établie dans un mémoire soumis à la Conférence nationale sur le tabac et la santé qui eut lieu à la demande de l'ex-ministre de la Santé nationale et du Bien-être social, l'honorable Judy LaMarsh les 25 et 26 novembre 1963. Il convient de consigner ici un bref résumé de ce mémoire de 1963 qui figure aux dossiers du Comité:

«Il y a eu au Canada, depuis 30 ans, une augmentation notable de la mortalité attribuable au cancer du poumon. Cette augmentation se constate surtout chez les hommes.

«Des études prospectives et rétrospectives, chez les humains ont établi une relation de cause à effet, bien que cette relation ne soit pas nécessairement exclusive entre cette maladie et l'usage de la cigarette.

«Non seulement le taux de mortalité attribuable au cancer du poumon, mais le taux global de mortalité est beaucoup plus élevé chez les fumeurs que chez les non-fumeurs; la maladie coronarienne contribue largement à cette différence.

«La consommation annuelle de cigarettes par personne de plus de 15 ans a quadruplé au Canada depuis 1935.

«À titre des mesures propres à ce problème d'hygiène publique, l'Association médicale canadienne:

(a) exécutera un programme concerté d'information professionnelle destiné à ses membres;

(b) requests the Federal Government to provide the stimulus for an all-important program of public education by publicly recognizing the relationship between lung cancer and the smoking of cigarettes;

(c) requests the Department of National Health and Welfare to make educational material available on the dangers to health of cigarette smoking, and to encourage similar activity at provincial and municipal levels;

(d) recommends that research on the nature of tobacco habituation be initiated;

(e) recommends that, as an interim step in the production of an entirely safe cigarette, cigarettes of lower tar and nicotine content be produced, and that the content of these substances be described on each cigarette package;

(f) recommends that, in general, the content of advertising be altered to promote moderation and to discourage the use of the product by children and young adults;

(g) recommends that certain provisions of the Tobacco Restraint Act be enforced;

(h) recommends that ways and means of encouraging the use of less dangerous forms of tobacco be explored."

During the past five years, the Association has conducted a professional education program, had a representative on the Department of National Health and Welfare's Technical Advisory Committee on Smoking and Health, and continued to study the extensive scientific evidence published on this subject. We have not appended that material nor a complete bibliography that in itself would constitute several pages. Should the Committee desire the material or the bibliography we would be pleased to provide it. We believe it sufficient to point out that there is no longer any scientific controversy regarding the risk created by cigarette smoking. The original statistical observations have been validated by clinical observation and the evidence is now accepted as fact by Canadian medicine. We believe the Association can be of most service to this Committee by providing a brief review of the medical facts related to smoking.

(b) prie le gouvernement fédéral de stimuler un dynamique programme d'information populaire en reconnaissant publiquement le lien qui existe entre le cancer du poumon et l'usage de la cigarette;

(c) prie le ministère de la Santé nationale et du Bien-être social de préparer la documentation éducative sur les dangers de la cigarette pour la santé, et d'encourager cette activité aux niveaux provincial et municipal;

(d) recommande qu'on entreprenne des recherches sur la nature de l'habitude du tabac;

(e) recommande, comme étape provisoire dans la production d'une cigarette absolument sûre, que l'on fabrique des cigarettes contenant moins de goudron et de nicotine, et que la quantité de ces substances soit inscrite sur chaque paquet;

(f) recommande qu'en général la publicité soit modifiée de manière à encourager la modération et à décourager l'emploi du produit chez les enfants et les jeunes adultes;

(g) recommande que certaines dispositions de la Loi sur la répression de l'usage du tabac chez les adolescents soient mises en vigueur;

(h) recommande qu'on étudie les moyens d'encourager l'emploi du tabac sous des formes moins dangereuses."

Depuis cinq ans, l'Association a mis sur pied un programme d'éducation professionnelle, elle a nommé un représentant au Comité consultatif technique sur le tabac et la santé, du Ministère de la Santé nationale et du Bien-être social, et elle a continué d'étudier l'amoncellement de la preuve scientifique publiée sur cette question. Nous n'avons pas mis cette documentation en annexe ni fourni de bibliographie complète; à elle seule, celle-ci couvrirait plusieurs pages. Toutefois, si le Comité exprime le désir de voir cette documentation ou toute la bibliographie, nous serions heureux de donner suite à sa requête. Nous croyons suffisant de souligner qu'il n'existe plus de controverse scientifique à l'égard des risques qu'entraîne l'usage de la cigarette.

Les premières observations de la statistique ont été confirmées par l'observation clinique et la preuve est maintenant acceptée comme un fait par la médecine canadienne. Nous croyons que l'Association pourrait rendre service au Comité en passant brièvement en revue les faits médicaux qui sont reliés au tabac.

Chronic Bronchitis and Emphysema

These chronic respiratory diseases are among Canada's most rapidly increasing health problems. While these diseases appear in both smokers and non-smokers, the more severe, debilitating, lung crippling cases are invariably found among smokers. Emphysema is so closely related to smoking that it is frequently referred to by physicians as the "smokers' disease". Recognizing the rapid increase in these conditions and their chronic nature, (emphysema is second only to heart disease as a cause of disability), it is conceivable that they will prove to be the most costly medical consequences of cigarette smoking—in terms of disability, premature loss of life in the productive years of life, and hospital and medical care. While traditionally not considered a major cause of death in Canada, it is interesting to note that the death rate per 100,000 population due to emphysema has increased from 2.0 in 1950 to 3.6 in 1955, 7.2 in 1960, 12.7 in 1965 and 14.6 in 1967. There is no doubt that the increasing number of people suffering from chronic bronchitis and emphysema is an additional factor in our increasing heart disease death rate.

Lung Cancer

Over 4,400 Canadians died of lung cancer in 1967. The statistical evidence relating this disease to smoking is so well known and readily available, it does not warrant repetition. Suffice it to say that we now recognize that there is a definite relationship between the probability of your dying from lung cancer and the degree of smoking exposure. The earlier one begins smoking, the more one smokes, the more one inhales and the longer one smokes, the greater the risk.

Other types of Cancer

The incidence of cancer of the mouth, throat and bladder are increased by cigarette smoking. The obvious direct exposure to smoke increases the risk of death from cancer of the mouth and throat by 500%.

Heart Disease

The fact that heart disease is the leading cause of death, claiming over 45,000 Canadians every year—many of them at the peak of their productive capacities, is well known. The fact that the mortality rate in the age group 35-54 from coronary heart disease in cigarette smokers is 5 to 10 times higher than

Bronchite chronique et emphysème

Ces affections respiratoires chroniques représentent les problèmes d'hygiène qui augmentent le plus rapidement au Canada. Bien qu'elles se manifestent aussi bien chez des non-fumeurs que chez des fumeurs, c'est invariablement chez les fumeurs que nous découvrons les maladies de poumons les plus graves, les plus affaiblissantes. L'emphysème est si étroitement lié à l'usage du tabac que les médecins le nomment souvent «la maladie des fumeurs». Si l'on admet l'augmentation rapide de ces cas et leur nature chronique (l'emphysème ne le cède qu'aux maladies du cœur comme facteur d'invalidité), on peut envisager, du point de vue médical, en termes d'invalidité, de mort prématurée durant les années les plus productives et de soins hospitaliers et médicaux, qu'elles se révéleront les plus coûteuses conséquences de l'usage de la cigarette. Bien qu'on n'ait jamais considéré l'emphysème comme l'une des principales causes de décès au Canada, il est intéressant de noter que son taux de mortalité par 100 000 de population est passé de 2.0 en 1950 à 3.6 en 1955, 7.2 en 1960, 12.7 en 1965 et 14.6 en 1967. Il ne fait aucun doute que ce nombre croissant de personnes souffrant de bronchite chronique et d'emphysème représente un facteur additionnel dans l'augmentation du taux de mortalité des maladies du cœur.

Cancer du poudon

Plus de 4,400 Canadiens sont morts de cancer du poudon en 1967. La preuve statistique reliant cette maladie à l'usage du tabac est si bien connue et si facile à obtenir qu'il n'est pas nécessaire d'insister. Qu'il suffise de dire que nous reconnaissons désormais une relation définie entre les probabilités de décès des suites d'un cancer du poudon et le degré d'utilisation du tabac. Plus on commence à fumer tôt, plus on fume; plus on inhale du fumée et plus on fume longtemps, plus on s'expose à ce risque.

Autres types de cancers

L'usage du tabac accroît la fréquence des cancers de la bouche, de la gorge et de la vessie. Le fait d'être directement exposé au tabac augmente de 500 pour cent le risque de décès des suites d'un cancer de la bouche et de la gorge.

Maladies du coeur

On sait que les maladies du cœur, qui entraînent chaque année la mort de plus de 45,000 Canadiens, dont plusieurs sont au sommet de leur activité productrice, sont la première cause de décès. Mais on n'a pas fait autant de publicité au fait que le taux de mortalité des suites d'une maladie corona-

or the comparable age group in non-smokers has been less publicized. For the individual offering high blood pressure, the risk of dying from heart disease created by smoking is increased by 200%. The overall probability of death caused by heart disease is increased by 70% in cigarette smokers.

Other Conditions

While the relationship to smoking has not been so clearly established, the Medical Profession in Canada has also noted its concern with the increased rate of sinusitis, peptic and gastric ulcers, and cerebrovascular accidents among smokers.

The 100% increase in premature birth, and the resultant increased risks to both the infant and mother, among women who smoke has been well documented. We have known for some years that the mother who smokes gives birth to a smaller baby.

The sentence, "Tobacco should never be used in any form", is standard in most medical text books dealing with the treatment of many disorders of the peripheral circulation, including peripheral arteriosclerosis and thrombophlebitis obliterans—frequently referred to as Buerger's Disease.

As an associated hazard, it may be mentioned that members of the Canadian medical profession are all too frequently involved in the treatment of accidental burns arising from smoking mishaps. The U.S. Surgeon General's Report of 1967 suggests that smoking and the associated use of lighters and matches is involved in some 20-25% of total fire losses in that country.

Sickness, Disability and Premature Death

In summary, cigarette smoking has a negative effect on both the quantity and quality of living. To cite specific examples, the average 35 year old man who smokes two packs of cigarettes per day will give up 8.2 years of his life to do so. In short, it will cost him approximately 7.4 minutes of life for every cigarette he smokes. He will also enjoy less pleasurable productive living due to a $\frac{1}{2}$ increase in loss of gainful employment time—and the resultant reduced income. Even in teenage children, severe respiratory infections occur nine times as frequently in regular smokers.

The cost to the community or country is also significant. The cost of lost productive

work in the comparable age group in non-smokers is 5 to 10 times as high as for the non-smokers of the same age. For the individual who suffers from high blood pressure, the risk of dying from heart disease created by smoking is increased by 200%. The overall probability of death caused by heart disease is increased by 70% in cigarette smokers.

Autres risques

Les médecins canadiens ont déjà fait part de leurs inquiétudes relativement au taux croissant des sinusites, ulcères gastriques et duodénaux et accidents cérébrovasculaires chez les fumeurs, bien qu'on n'ait pu établir aussi clairement les relations de ces affections avec l'usage du tabac.

Une importante documentation révèle l'augmentation de 100 pour cent des naissances prématurées, avec les risques accrus qui en résultent, et pour l'enfant et pour la mère, chez les femmes qui fument. Nous savons depuis plusieurs années que la mère qui fume donne naissance à de plus petits bébés.

La phrase «Ne jamais faire usage de tabac sous aucune forme» est une phrase courante dans la plupart des manuels de médecine où il est question du traitement des affections de la circulation périphérique, y compris l'artériosclérose et la thrombo-angéite oblitérante, fréquemment appelée la maladie de Léo Buerger.

On peut mentionner également que les membres de la profession médicale sont trop fréquemment appelés à traiter des brûlures accidentelles dont les fumeurs peuvent être victimes. Le rapport du «Surgeon General» des États-Unis en 1967 donne à entendre que l'usage du tabac, qui entraîne l'utilisation de briquets et d'allumettes, est à l'origine de 20 à 25 pour cent de toutes les pertes dues à l'incendie aux États-Unis.

Maladie, invalidité et mort prématurée

Pour résumer, l'usage de la cigarette exerce un effet négatif aussi bien sur la quantité que sur la qualité de vie. L'homme de 35 ans, par exemple, qui fume deux paquets de cigarettes par jour, ruine ainsi 8.2 années de sa vie. Bref, chaque cigarette qu'il fume lui coûte environ 7.4 minutes de vie. Il y perdra également dans sa vie productive, en raison d'une perte (accrue du tiers) de son temps de travail rémunéré, et de la diminution de revenu qui en résulte. Même chez les adolescents, ceux qui fument régulièrement ont neuf fois plus souvent d'infections respiratoires graves.

Ce que l'usage du tabac coûte à la communauté aussi bien qu'au pays est également

life and premature death, the unnecessary expenditures required to provide hospitalization and medical care is staggering to the imagination. In the words of Dr. Luther L. Terry, former Surgeon General of the United States Public Health Service, "we have come to the end of an era in the smoking and health field. The period of uncertainty is over. While science will continue to probe the reason where there is no longer any doubt that cigarette smoking is a direct threat to the user's health, we know for certain that lung cancer, which has climbed to almost epidemic proportions throughout the world, is directly associated with cigarette smoking. We know that the rising number of deaths from heart disease among men and women in the prime of life is related to cigarette smoking. We know that the toll from bronchitis and emphysema can be traced to cigarette smoking and we know that a considerable amount of chronic disability is resulting annually from cigarette smoking".

Giving up the habit

While it is recognized that many individuals have great difficulty in giving up cigarettes, it is the opinion of the medical profession that this has been overemphasized in the past, and has resulted in discouraging cigarette smokers from making the attempt to stop. It should be recognized that there are many different types of cigarette smokers who have different reasons for smoking and who, in turn, encounter different degrees of difficulty trying to discontinue the practice. The individual who smokes simply for pleasure, is most readily persuaded to make the attempt and it is from this group that the highest success rates have been obtained in the anti-smoking clinics. The so-called negative effect smoker—who finds cigarette smoking a release from stress is the most hesitant to attempt to give up his habit. These people are fundamentally ill at ease with society and their particular role in society—utilizing cigarette smoking as a release from their basic tension. It is this group that are most susceptible to the insidious stimulus of cigarette advertising and who most need continual reinforcement if they are to be successful in their efforts to give up cigarettes. For the psychologically habituated smoker the cigarette smoking habit has become more important than the stress which led to his habit in the first place. It is from this group that the most difficult but "permanent cures from the habit" are obtained.

important. Le coût de la perte prématurée d'une vie productrice et les dépenses inutile qu'entraînent l'hospitalisation et les soins médicaux dépassent l'imagination. Dans les termes du Dr Luther L. Terry, qui fut chirurgien général du Service d'hygiène publique des États-Unis, « nous en sommes arrivés à la fin d'une période en ce qui touche le tabac et la santé. Finie la période d'incertitude. Même si la science continue de chercher les raisons pour lesquelles il n'y a plus aucun doute que la cigarette menace directement la santé du fumeur, nous savons d'une manière certaine que le cancer du poulmon, qui a pris des proportions presque épidémiques dans le monde entier, est directement relié à l'usage de la cigarette. Nous savons que la croissance des décès d'hommes et de femmes en pleine vigueur, attribuables aux maladies du cœur est en proportion directe de l'usage de la cigarette nous savons que les pertes attribuables à la bronchite et à l'emphyseme peuvent découler de l'usage de la cigarette et nous savons qu'un nombre considérable d'invalidités chroniques résultent annuellement de l'usage de la cigarette ».

Abandon de l'usage du tabac

Bien qu'on se rende compte qu'on éprouve souvent de grandes difficultés à abandonner l'usage de la cigarette, la profession médicale est d'avis qu'on a exagéré ces difficultés et qu'il en est résulté chez les fumeurs un certain découragement à la seule pensée d'abandonner la cigarette. Il faut admettre qu'il y a différents types de fumeurs de cigarettes et chacun a des raisons différentes de fumer, ce qui fait que chacun éprouve des difficultés qui se situent à des niveaux différents lorsqu'il essaie d'abandonner cette pratique. Celui qui fume uniquement par plaisir est plus facilement persuadé de faire cette tentative et, dans les cliniques contre l'usage du tabac c'est avec ce groupe qu'on obtient le taux de succès le plus élevé. Le fumeur que l'on appelle « négatif », celui qui trouve dans la cigarette une détente contre la tension, est le plus hésitant à essayer de mettre fin à ses habitudes. Ces personnes, fondamentalement mal à l'aise dans la société, particulièrement dans le rôle qu'elles jouent dans cette société, se servent de la cigarette comme pour se libérer de leur tension fondamentale. C'est le groupe le plus exposé au stimulant insidieux de la réclame des cigarettes et qui a le plus besoin d'un appui continu pour réussir à se débarrasser de l'habitude de la cigarette. Pour le fumeur de cigarettes psychologiquement habitué, son habitude est devenue plus importante que la tension qui l'a produite. Ce groupe où l'on éprouve les plus grandes

One frequently hears comment that the health hazards resulting from giving up the smoking habit may be more severe than those eliminated. There is no scientific evidence to support this supposition. The weight increase experienced by many who give up smoking does constitute a problem relative to obesity and personal appearance. However, for the normal individual, the health hazard resulting from this weight increase is miniscule in comparison to that accruing from smoking cigarettes. While the stress that an individual undergoes while giving up cigarette smoking is obvious, there is no scientific evidence that it is of long term or creates any major health hazard.

It should be recognized that effecting a major change in the smoking habits of the population is a difficult undertaking. There is ample evidence to show that a simple dissemination of information on the health hazards created by smoking does not materially affect smoking habits. This is perhaps most dramatically indicated in a study published in the C.M.A. Journal issue of November 16th, 1968. The study showed that the proportion of doctors who smoke is on the decline, but 35.4% of Canadian physicians still smoke cigarettes regularly. While this compares very favourably with the fact that 65.3% of the profession reported that they had smoked regularly and that 53.6% of all adult Canadian males smoke, it is difficult to understand why even $\frac{1}{3}$ of Canadian physicians continue to smoke having ample access to the evidence relating cigarette smoking to cardiovascular and bronchopulmonary disease.

Recommendations

In view of the extensive evidence indicting cigarette smoking as a major health hazard and in an effort to reduce this major public health problem, the Canadian Medical Association is pleased to support the intent of the private members bills currently before this Committee, and the presentation of the Honourable John Munro, Minister of National Health and Welfare, to the Committee on December 19, 1968. The Association offers the following recommendations for your consideration:—

difficultés est celui où l'on obtient également «les cures les plus permanentes».

Souvent on entend dire que le risque d'abandonner le tabac pourrait être plus grave que les risques qu'on élimine en l'abandonnant. Il n'existe aucune preuve scientifique à l'appui de cette prétention. L'augmentation de poids que plusieurs constatent après avoir abandonné la cigarette pose un problème relatif à l'obésité et à l'aspect personnel. Toutefois, pour toute personne normale, le risque auquel cette augmentation de poids expose sa santé est infime si on le compare aux risques résultant de l'habitude de la cigarette. La tension que doit supporter une personne qui abandonne l'usage de la cigarette est évidente, mais il n'existe aucune preuve scientifique que cette tension puisse à la longue mettre sa santé en danger.

Il faut se rendre compte que le fait d'effectuer un changement notable dans les habitudes de la population, à l'égard du tabac, est une entreprise extrêmement importante. Il a été amplement prouvé que la simple diffusion des renseignements sur les risques auxquels l'habitude du tabac expose la santé n'affecte pas sensiblement les habitudes des fumeurs. Une étude publiée par le Journal de l'A.M.C. le 16 novembre 1968 l'indique de façon particulièrement spectaculaire. Cette étude révèle que la proportion des médecins qui fument tend à diminuer, mais qu'il y a encore 35.4 pour cent des médecins canadiens qui fument la cigarette régulièrement. Bien que ceci se compare très favorablement avec le fait que 65.3 pour cent des membres de la profession ont rapporté qu'ils fumaient régulièrement et que 53.6 pour cent de tous les hommes adultes canadiens fument, il reste quand même difficile de comprendre pourquoi même $\frac{1}{3}$ des médecins canadiens, qui ont accès à toutes les preuves qui relient l'usage de la cigarette aux maladies cardio-vasculaires et bronchopulmonaires, continuent de fumer.

Recommendations

Devant l'abondance des preuves indiquant que l'usage de la cigarette expose la santé à de graves dangers et dans un effort pour atténuer ce problème sérieux d'hygiène publique, l'Association médicale canadienne est heureuse d'accorder son appui aux projets de loi présentés au Comité, à titre privé, par des membres du Parlement et à la présentation que l'Honorable John Munro, ministre de la Santé nationale et du Bien-être social, fit au Comité, le 19 décembre 1968. L'Association soumet les recommandations suivantes à votre considération:

1. THAT the Federal Government enact legislation to eliminate the advertising of cigarettes in all media and at the point of sale.

2. THAT the Federal Government enact legislation requiring that all cigarette packaging be effectively labelled so as to clearly indicate that cigarette smoking is a health hazard. Failing the above that the Federal Government enact legislation requiring the effective labelling of cigarette packaging *and advertising of all types*, indicating that cigarette smoking is a health hazard. Such labelling should include the tar and nicotine content, and other toxic agents as they are identified, as determined by appropriately designated governmental agencies.

3. THAT the Tobacco Restraint Act be supported, strengthened and enforced so as to effectively reduce the sale of this hazardous product to minors.

4. THAT governments at all levels be encouraged to discontinue financial support and other subsidy of the tobacco industry.

5. THAT governments at all levels, and the voluntary health agencies that have been engaged in public education regarding the hazards of smoking be commended for their efforts and encouraged to increase their support and activity in this field.

1. QUE le gouvernement fédéral adopte une loi visant à éliminer la publicité en faveur des cigarettes dans tous les supports et sur les lieux de la vente.

2. QUE le gouvernement fédéral adopte une loi exigeant que tout paquet de cigarettes soit étiqueté efficacement de façon à indiquer clairement que l'habitude de la cigarette est dangereuse pour la santé.

A défaut de ce qui précède, que le gouvernement fédéral adopte une loi exigeant que l'étiquetage des paquets de cigarettes *et toute la publicité* indiquent que l'usage de la cigarette est dangereuse pour la santé. Cet étiquetage devra préciser la quantité du goudron, de la nicotine et des autres agents toxiques, qui seront également identifiés de la manière déterminée par les agences gouvernementales désignées à cette fin.

3. QUE l'on appuie, renforce et fasse respecter la Loi sur la répression de l'usage du tabac chez les adolescents afin de réduire la vente aux mineurs de ce produit dangereux.

4. QUE tous les gouvernements, à tous les paliers, soient encouragés à cesser d'aider financièrement, au moyen de subsides ou autrement, l'industrie du tabac.

5. QUE tous les gouvernements, à tous les paliers, et les organismes bénévoles de santé qui se sont engagés à informer le public sur les dangers du tabac, soient félicités pour les efforts déjà faits et encouragés à augmenter leur appui et leur activité dans ce domaine.

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C.M.A. DELEGATION TO HOUSE OF COMMONS COMMITTEE ON HEALTH, WELFARE & SOCIAL AFFAIRS
RE. SMOKING AND HEALTH

DÉLÉGATION DE L'A.M.C. AUPRÈS DU COMITÉ DE LA CHAMBRE DES COMMUNES AU SUJET DU TABAC ET DE LA SANTÉ

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M. D. A. Geekie, Secrétaire, Relations publiques, A.M.C.

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CHAMBRE DES COMMUNES

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Première session de la

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STANDING COMMITTEE

ON

HEALTH, WELFARE AND
SOCIAL AFFAIRS

Chairman

M. Gaston Isabelle

COMITÉ PERMANENT

DE LA

SANTÉ, DU BIEN-ÊTRE SOCIAL
ET DES AFFAIRES SOCIALES

Président

MINUTES OF PROCEEDINGS
AND EVIDENCE

PROCÈS-VERBAUX ET
TÉMOIGNAGES

No. 21

TUESDAY, MARCH 4, 1969

LE MARDI 4 MARS 1969

Respecting
BILL S-26,

An Act to prohibit the advertising, sale
and importation of hazardous products.

Concernant
Le BILL S-26,

Loi interdisant la vente, l'annonce et
l'importation de produits dangereux.

Appearing:

Minister of Consumer and
Corporate Affairs
Parliamentary Counsel

Hon. Stanley Ronald Basford
M. Maurice Ollivier, Q.C.

Ont comparu:

Ministre de la Consommation
et des Corporations
Conseiller parlementaire

WITNESSES—TÉMOINS

(See Minutes of Proceedings)

(Voir Procès-verbaux)

STANDING COMMITTEE ON
HEALTH, WELFARE AND
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La secrétaire du Comité:
Gabrielle Savard
Clerk of the Committee.

Pursuant to S.O. 65(4)(b)

Conformément à l'article 65(4)(b) du
Règlement

¹ Replaced Mr. Mather on February 27

¹ Remplace M. Mather le 27 février

² Replaced Mr. Osler on March 3

² Remplace M. Osler le 3 mars

³ Replaced Mr. Monteith on March 4

³ Remplace M. Monteith le 4 mars

ORDER OF REFERENCE

MONDAY, February 24, 1969.

Ordered,—That Bill S-26, An Act to prohibit the advertising, sale and importation of hazardous products be referred to the Standing Committee on Health, Welfare and Social Affairs.

ATTEST:

Le Greffier de la Chambre des communes,
ALISTAIR FRASER,
The Clerk of the House of Commons.

ORDRE DE RENVOI

Le LUNDI 24 février 1969

Il est ordonné,—Que le Bill S-26, Loi interdisant la vente, l'annonce et l'importation de produits dangereux, soit déferé au comité permanent de la santé, du bien-être social et des affaires sociales.

ATTESTÉ:

(Text)

MINUTES OF PROCEEDINGS

TUESDAY, March 4, 1969.
(25)

The Standing Committee on Health, Welfare and Social Affairs met this date at 8:10 p.m. The Chairman, Mr. Gaston Isabelle, presided.

Members present: Mrs. MacInnis and Messrs. Benjamin, Deakon, Forget, Foster, Guilbault, Haidasz, Howe, Isabelle, McBride, Paproski, Robinson, Rochon, Thomas (*Maisonneuve*), Yewchuk—(15).

Other Members present: Messrs. Gendron and Gray.

Appearing: The Honourable Stanley Ronald Basford, Minister of Consumer and Corporate Affairs; and Mr. Maurice Ollivier, Q.C., Parliamentary Counsel.

Witness: From the Department of Consumer and Corporate Affairs: Dr. R. W. James, Director, Consumer Research Branch.

The Chairman presented the Sixth Report of the Subcommittee on Agenda and Procedure as follows:

The Subcommittee recommends:

1. That no outside witnesses be heard but that the Minister of Consumer and Corporate Affairs be invited to explain the purpose of the Bill, and to call also two officials of the Department;

2. That the Estimates be considered in the following order:

- (a) Central Mortgage and Housing Corporation;
- (b) Department of National Health and Welfare;
- (c) Medical Research Council;

(d) Consumer and Corporate Affairs.

3. That the time for questioning be limited as follows: ten minutes for

(Texte)

PROCÈS-VERBAL

Le MARDI 4 mars 1969.
(25)

Le Comité permanent de la Santé, du Bien-être social et des Affaires sociales se réunit aujourd'hui à 8 h. 10 du soir, sous la présidence de M. Gaston Isabelle.

Présents: M^{me} MacInnis, MM. Benjamin, Deakon, Forget, Foster, Guilbault, Haidasz, Howe, Isabelle, McBride, Paproski, Robinson, Rochon, Thomas (*Maison-neuve*), Yewchuk—(15).

Autres députés présents: MM. Gendron et Gray.

Ont comparu: L'hon. Stanley Ronald Basford, ministre de la Consommation et des Corporations, et M. Maurice Ollivier, c.r., conseiller parlementaire.

Témoin: Du Ministère de la Consommation et des Corporations: M. R. W. James, directeur, division des recherches sur la consommation.

Le Président présente le Sixième Rapport du sous-comité du programme et de la procédure comme suit:

Le sous-comité recommande:

1. Qu'aucun témoin de l'extérieur ne soit convoqué, mais que le Ministre soit invité à expliquer les motifs du bill et que deux hauts fonctionnaires soient requis de se présenter devant le Comité;

2. Que les prévisions budgétaires soient étudiées dans l'ordre suivant:

- a) La Société Centrale d'Hypothèques et de Logement;
- b) Le Ministère de la Santé nationale et du Bien-être social;
- c) Le Conseil des Recherches médicales;
- d) Le Ministère de la Consommation et des Corporations.

3. Que la période de questions soit limitée à dix minutes pour la pre-

the first round; and five minutes for the second round.

After discussion on paragraph 3, the Sixth Report of the Subcommittee was adopted.

The Committee proceeded to the consideration of Bill S-26, An Act to prohibit the advertising, sale and importation of hazardous products.

The Chairman called Clause 2 of the Bill.

The Minister made a statement and was questioned.

Clause 2 carried.

Clauses 3 and 4 were called, discussed and carried.

Clause 5 was called, discussed and allowed to stand.

On Clause 6,

Dr. James and the Minister answered questions.

Clause 6 carried.

Clause 7 was called, discussed and carried.

Clause 8 was called, discussed and allowed to stand.

Clauses 9, 10, 11, 12, 13, 14, 15 and 16 were severally called and carried.

The Schedule was called, discussed and carried.

On Clause 5,

Dr. Yewchuk moved that subsection (1) of Clause 5 be amended by adding, after the word "inspector", the phrase "in possession of a search warrant, or with the permission of the owner or person in charge of a place,"

After discussion, the question being put on the said proposed amendment, it was negative on the following division: YEAS, 1; NAYS, 9.

Clause 5 carried.

mière ronde, et à cinq minutes pour la deuxième ronde.

L'item n° 3 est discuté et le Sixième Rapport du sous-comité est adopté.

Le Comité entreprend l'étude du Bill S-26, Loi interdisant la vente, l'annonce et l'importation de produits dangereux.

L'article 2 est appelé.

Le Ministre de la Consommation et des Corporations lit un exposé et il est interrogé.

L'article 2 est adopté.

Les articles 3 et 4 sont appelés, discutés et adoptés.

L'article 5 est appelé, discuté et réservé.

A l'article 6,

M. James et le Ministre répondent aux questions des membres du comité.

L'article 6 est adopté.

L'article 7 est appelé, discuté et adopté.

L'article 8 est appelé, discuté et réservé.

Les articles 9, 10, 11, 12, 13, 14, 15, 16 sont appelés et adoptés.

L'annexe est appelée, discutée et adoptée.

L'article 5 est appelé de nouveau.

M. Yewchuk propose que le paragraphe (1) de l'article 5 soit modifié en ajoutant, après le mot «inspecteur», les mots suivants: «qui est muni d'un mandat de perquisition, ou qui a obtenu la permission du propriétaire ou de la personne qui a charge des lieux».

Après discussion, ladite proposition d'amendement, mise aux voix, est rejetée par le vote suivant: POUR, 1; CONTRE, 9.

L'article 5 est adopté.

On Clause 8,

Mr. Foster moved, seconded by Mr. Forget, that subclause (3) be deleted and the following substituted therefor:

Tabling of
orders add-
ing to Parts
I or II

“(3) Every order adding a product or substance to Part I or Part II of the Schedule shall be laid before Parliament not later than fifteen days after it is made or, if Parliament is not then sitting, on any of the first fifteen days next thereafter that Parliament is sitting.

Opportunity
for debate

(4) Where an order is laid before Parliament pursuant to subsection (3), a notice of motion in either House signed by twenty-five members thereof and made in accordance with the rules of that House within ten days of the day the order was laid before Parliament, praying that the order or any part thereof be revoked, shall be debated in that House at the first convenient opportunity.

Revocation
of order by
resolution

(5) If both Houses of Parliament resolve that an order or any part thereof be revoked, that order or that part thereof is thereupon revoked.”

After discussion, the question being put on the said proposed amendment, it was resolved as follows: YEAS, 9; 1 ABSTENTION.

Clause 8, as amended, carried.

Clause 1 carried.

The Title carried.

The Bill carried and the Chairman was instructed to report it to the House.

At 10.35 o'clock p.m. the Committee adjourned to 8.00 p.m. Thursday, March 6, 1969.

L'article 8 est appelé de nouveau.

M. Foster propose, appuyé par M. Forget, que le paragraphe (3) de l'article 8 soit retranché et remplacé par ce qui suit:

Dépôt des
ordonnances
apportant
des additions
aux Parties
I ou II

«(3) Toute ordonnance ajoutant une substance ou un produit à la Partie I ou à la Partie II de l'Annexe doit être déposée devant le Parlement au plus quinze jours après qu'elle a été établie ou, si le Parlement n'est pas alors en session, l'un des quinze premiers jours où il siège par la suite.

Délai pour
le débat

(4) Lorsqu'une ordonnance est déposée devant le Parlement en conformité du paragraphe (3), un avis de motion dans l'une ou l'autre Chambre, signé par vingt-cinq membres de cette Chambre et établi conformément aux règlements de cette Chambre dans un délai de dix jours après que l'ordonnance a été déposée au Parlement, demandant que l'ordonnance ou une partie de celle-ci soit révoquée, sera débattue en cette Chambre à la première occasion favorable.

Révocation
de l'ordon-
nance par
une réso-
lution

(5) Si les deux Chambres du Parlement adoptent une résolution révoquant une ordonnance ou une partie de l'ordonnance, ladite ordonnance ou partie d'ordonnance est alors révoquée.»

Après discussion, ladite proposition d'amendement, mise aux voix, est résolue dans l'affirmative, POUR, 9; 1 ABSTENTION.

L'article 8, tel qu'amendé, est adopté.

L'article 1 est adopté.

Le titre est adopté.

Le Bill est adopté et le Président reçoit instruction d'en faire rapport à la Chambre.

A 10 h. 35 du soir le Comité s'ajourne à 8 heures du soir le jeudi 6 mars.

La secrétaire du Comité,
Gabrielle Savard,
Clerk of the Committee.

[Texte]

EVIDENCE

(Recorded by Electronic Apparatus)

Tuesday, March 4, 1969

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The Chairman: Lady and gentlemen, I see a quorum. I call the meeting to order. You have received a copy of Bill S-26 and the minutes of the proceedings of the Senate Committee which considered this bill. I am sure that you are most anxious to read this material. Before considering the Bill I would like to inform the Committee that your Subcommittee on Agenda and Procedure met last week and has agreed to recommend the following. One, that no outside witnesses be heard but that the Minister of Consumer and Corporate Affairs be invited to explain the purpose of the bill, and also that two officials of the Department be called. Two, that the Estimates be considered in the following order: (a) Central Mortgage and Housing Corporation, (b), Department of National Health and Welfare, (c), Medical Research Council and, (d), Department of Consumer and Corporate Affairs. Three, that the time for questioning be limited as follows: ten minutes for the first round and five minutes for the second round.

Does the Committee agree to these recommendations?

Mr. Howe: Mr. Chairman, in connection with questioning for ten minutes and five minutes, I sometimes wonder if this is altogether necessary. It depends on the situation and the circumstances. I am sure we can depend on your goodwill, and as a good chairman, not to do this to the full extent of the law, the letter of the law.

The Chairman: Thank you, Mr. Howe, but we now have to agree on general principles. After that, as occasions develop, I will use my discretion and I believe it will be...

Mr. Foster: I would like to add a comment. In general I think this policy of limiting the time should be followed. It is all well and good to say that the Chairman is going to use his good judgment, and everything, but unless he runs the Committee with a firm hand it will just not work out. I think we should follow this procedure quite rigidly.

[Interprétation]

TÉMOIGNAGES

(Enregistrement électronique)

Le mardi 4 mars 1969.

Le président: Madame et messieurs, nous avons le quorum. La séance est ouverte.

Vous avez reçu un exemplaire du bill S-26 et le compte-rendu du Comité du Sénat concernant ce bill. Je suis sûr que vous êtes impatients de lire ces documents. Avant de passer à l'étude du bill, je tiens à vous dire que votre sous-comité de la procédure et de l'ordre du jour s'est réuni la semaine dernière et a décidé de recommander: premièrement, de ne pas avoir d'autres témoins de l'extérieur, sauf le ministre des affaires des consommateurs et des corporations et deux de ses fonctionnaires, pour expliquer le but du bill. Deuxièmement, que les crédits soient étudiés dans l'ordre suivant: (a) la Société centrale d'hypothèque et de logement; (b) le ministère de la Santé et du bien-être, (c) le Conseil des recherches médicales, (d) le ministère des affaires des consommateurs et des corporations. Troisièmement, que la période des questions se limite comme suit: 10 minutes la première fois et 5 minutes la deuxième fois.

Êtes-vous d'accord, messieurs?

M. Howe: Au sujet des 10 minutes et des 5 minutes allouées pour les questions, est-ce nécessaire? Je pense que cela dépend de toutes sortes de circonstances. Je crois que nous pouvons nous fier à votre bonne volonté de président du Comité, pour ne pas appliquer ce règlement trop sévèrement.

Le président: Merci, monsieur Howe. Mais nous devons toutefois nous entendre sur un principe général. Et ensuite, je me servirai de mon pouvoir discrétionnaire et je crois qu'il serait...

M. Foster: Je voudrais faire une remarque, s'il vous plaît. Je pense que les limites de temps devraient être respectées. C'est bel et bon de dire que le président usera de son jugement, etc. mais, si on ne dirige pas le Comité d'une main ferme, il n'y a pas de bons résultats et je pense que nous devrions nous en tenir rigide à cela.

[Text]

Mr. Howe: Mr. Chairman, I do not agree with that kind of thinking. We are here to discuss legislation and it is our duty to present to the people of Canada the best possible legislation we can. There will be times when I expect it may be difficult for us to stay within the ten and five minute periods. It is not a question, as Mr. Otto said on television the other day, of a good chairman being the man who gets the legislation in and out the fastest. I think it is the duty of a good chairman to ensure that the best possible legislation comes out of these committees.

The Chairman: Thank you, Mr. Howe and Mr. Foster. I do not believe there is any question about it that if you leave it to the Chair, that the Chair...

Mr. Robinson: May I be permitted to comment?...

The Chairman: Mr. Robinson, please.

Mr. Robinson: I think this will probably satisfy Mr. Howe. The reason the ruling was made is because it seems I take up too much time in questioning and they are trying to cut me down to 10 minutes.

The Chairman: Thank you, gentlemen. You can leave it with the Chair.

Mr. Howe: I have one further question with respect to the announcement you made. What will we be discussing on Thursday?

The Chairman: I hope you will be here until the end of the meeting, Mr. Howe. As the Clerk said, if we finish with this bill we will adjourn until 8 o'clock on Thursday, March 6, to consider the estimates of the Central Mortgage and Housing Corporation.

Mr. Howe: Thank you very much, Mr. Chairman.

The Chairman: Does the Committee agree on these recommendations?

Some hon. Members: Agreed.

The Chairman: We now have before us Bill S-26, An Act to prohibit the advertising, sale and importation of hazardous products. We

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have with us this evening the Minister of Consumer and Corporate Affairs, and I believe the hon. Minister wishes to make a statement at this time. Mr. Minister.

[Interpretation]

M. Howe: Monsieur le président, je ne suis pas d'accord avec cette façon de penser. Nous sommes ici pour étudier les projets de loi et en discuter et c'est notre devoir d'essayer d'avoir les meilleures lois possible pour le peuple canadien. Parfois il nous sera peut-être difficile de nous en tenir à cette limite de dix et cinq minutes. Comme M. Otto l'a dit à la télévision l'autre jour, le meilleur président n'est pas celui qui fait adopter les lois le plus vite possible. Je pense qu'un bon président de Comité doit s'assurer qu'on adopte les meilleures lois possible.

Le président: Merci, messieurs.

Je pense qu'il n'y a pas le moindre doute, si vous vous en remettez au président, que le président...

M. Robinson: Peut-on me permettre une remarque?

Le président: Je vous en prie, monsieur Robinson.

M. Robinson: Je vais faire plaisir à M. Howe. Le règlement a été établi parce que je passe trop de temps à poser les questions. On essaie de me limiter à 10 minutes.

Le président: Merci messieurs, vous pouvez vous en remettre au président.

M. Howe: J'ai une autre question sur ce que vous avez dit, quelles questions étudions-nous jeudi?

Le président: J'espère Monsieur Howe que vous serez là jusqu'à la fin de la réunion. Comme le greffier vient de nous dire, si nous finissons l'étude de ce bill aujourd'hui, nous nous ajournerons jusqu'au jeudi 6 mars à 20 heures où nous commencerons l'étude des crédits de la Société centrale d'hypothèques et de logement.

M. Howe: Merci beaucoup, monsieur le président.

Le président: Le Comité accepte-t-il ces recommandations?

Des voix: D'accord.

Le président: Aujourd'hui, nous devons étudier le bill S-26, *Loi interdisant la vente, l'annonce et l'importation de produits dange-*

reux. Nous avons ce soir, avec nous, le ministre des affaires des consommateurs et des corporations. Je pense que l'honorable ministre désire faire une déclaration. Monsieur le ministre.

[Texte]

Hon. Stanley Ronald Basford (Minister of Consumer and Corporate Affairs): Thank you, Mr. Chairman and hon. members. I have with me, Mr. Chairman, in the event that I get into trouble with the Committee, my Deputy Minister, Mr. J. F. Grandy; my Assistant Deputy Minister of Consumer Affairs, Mr. G. F. Osbaldeston; and Dr. R. W. James, Director, Consumer Research Branch, Bureau of Consumer Affairs.

In my view, the bill that is before the Committee tonight is legislation that is long overdue in this country, but before elaborating on the need for this legislation in the way I see it being used I think it might be helpful if I were to summarize very briefly the regime of this proposed Act for the benefit of those members who did not heed the admonition of the Chairman to read it carefully beforehand.

This bill will provide for two lists of what will become known as hazardous products, and this will be contained in the Schedule to the Act which will be found at the end of the bill, for those of you who have it in front of you. Part I of that schedule will represent a prohibited list of products that are considered so dangerous that they should not be permitted to be advertised, sold or imported into Canada. They would be absolutely barred. Part II of that Schedule will consist of a regulated list of hazardous products. That is, a list of products which could be advertised, sold or imported into Canada but only as authorized in regulations passed by the Governor in Council. The central provisions governing the inclusion of substances in the Schedule are contained in Clause 3 of the bill, for those members who would like to look at it.

The Act would give the Governor in Council power to add to either part of the Schedule any product or substance of a poisonous, toxic, inflammable, explosive or corrosive nature that is likely to be a danger to the health or safety of the public; or any product for household, garden or personal use, for use in sports, or as life-saving equipment, or as a toy, that is likely to be a danger to health or safety because of its design, construction or contents. There is also power to delete any product from the Schedule. These provisions, which I have paraphrased very briefly, are found in Clause 8 of the bill. Clause 8 also contains a provision, added to the bill in the other place, to the effect that any order adding a product to the Schedule will lapse two years later unless in the meantime it has been added to the Act by Parliament itself.

[Interprétation]

L'hon. Stanley Ronald Basford (Ministre de la Consommation et des Corporations): Merci, monsieur le président. Madame, messieurs, il y a avec moi le sous-ministre, M. J. F. Grandy et le sous-ministre adjoint des affaires des consommateurs, M. G. F. Osbaldeston et le directeur du service des recherches sur la consommation, le docteur R. W. James.

A mon avis, la Loi sur les produits dangereux, qui fait actuellement l'objet de l'étude du Comité, représente une mesure législative qui s'imposait depuis longtemps dans notre pays. Avant d'entrer dans plus de détails quant à la nécessité de la présente mesure législative et à la façon dont elle sera vraisemblablement appliquée, il serait peut-être utile que j'expose brièvement au Comité ce que comporte ladite Loi, pour ceux qui ne l'ont pas lue.

La Loi établit deux listes, de produits que nous appelons dangereux, qui seront contenues dans une Annexe. La Loi figure à la fin du bill, pour ceux qui l'ont devant eux. À la Partie I de l'Annexe, on donne une liste de produits interdits si dangereux qu'il ne devrait pas être permis de les annoncer, de les vendre ou de les importer au Canada; ils devraient être rigoureusement prohibés. La Partie II contient une liste de produits susceptibles de réglementation, c'est-à-dire une liste de produits qui peuvent être annoncés, vendus ou importés au Canada dans la mesure seulement où les règlements l'autorisent. Ces dispositions principales du bill se trouvent à la clause 3, pour ceux qui veulent s'y reporter.

La Loi donne au Gouverneur en conseil le pouvoir d'ajouter à l'une ou l'autre partie de l'Annexe quelque produit ou substance empoisonnés, toxiques, inflammables, explosifs ou corrosifs, qui présenteraient vraisemblablement un danger pour la santé ou la sécurité du public; ou un produit destiné à servir à des usages domestiques, à des usages personnels ou au jardin, dans les sports, ou comme matériel de sauvetage, ou comme jouet, qui présenterait vraisemblablement à cause de sa conception, sa construction ou son contenu, un danger pour la santé ou la sécurité. On fait également état du pouvoir de retrancher de l'Annexe un produit quelconque. Ces dispositions, que j'ai évidemment résumées, se trouvent à la clause 8. La clause 8 contient également une disposition, ajoutée au bill à l'autre endroit, stipulant que toute

[Text]

Clause 9, if members would like to look at it, makes provision for a Hazardous Products Board of Review, to be established by the Minister on the request of any manufacturer or distributor of a product that has been added to the Schedule by Order in Council. The function of the Board would be to inquire into the nature and characteristics of the product concerned and give those affected by the Order an opportunity of presenting evidence and making representations. The Board would report to the Minister with its recommendations, and its reports would be made public unless the Board itself recommended otherwise.

Other clauses deal with the appointment of inspectors, search, seizure, forfeiture, prosecutions, and the making of regulations. The regulation-making powers are found in Clause 7 and include, of course, the power to make the regulations that would govern the sale of any product included in Part II of the Schedule which I have referred to as the regulated list.

We have looked for models for this legislation in other countries. The United States Hazardous Substances Act was first passed in 1960 and amended in 1966. The British legislation was passed in 1961 and I described those statutes at some length during the debate on Second Reading in the House. In Canada, while the Food and Drugs Act has for many years protected the consumer with regard to foods and drugs, and many members are familiar with that legislation, we have been slow in this country to deal with other hazardous products that are neither foods nor drugs. The first attempt to do so in a more general way was made when the Department of National Health and Welfare introduced Bill S-22 in the other place on October 31, 1967.

This Bill included amendments to the Food and Drugs Act and the Narcotics Control Act as well as the prohibition of the sale and advertising of hazardous substances and could, in that sense, be termed an omnibus bill. After review in the Standing Committee

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on Banking and Commerce in the Senate where some minor amendments were made, it was approved by the other place on January

[Interpretation]

ordonnance ajoutant un produit à l'Annexe cessera d'être en vigueur deux ans plus tard à moins que dans l'intervalle ce produit n'ait été ajouté à la Loi par le Parlement même.

La clause 9, si vous désirez vous y reporter, fait mention d'une Commission d'examen des produits dangereux, qui serait établie par le Ministre à la demande de tout fabricant ou distributeur d'un produit qui a été ajouté à l'Annexe par décret. La fonction de la Commission consistera à faire des recherches concernant la nature et le caractère du produit en cause et à donner aux personnes intéressées par l'ordre, la possibilité de lui présenter des preuves et de formuler des observations. La Commission produira au Ministre un rapport, suivi de ses recommandations, et ces rapports seront rendus publics à moins que la Commission elle-même ne formule une recommandation contraire.

D'autres clauses ont trait à la nomination d'inspecteurs, aux recherches, à la saisie, à la confiscation, aux poursuites et à l'établissement de règlements. Les pouvoirs d'établissement de règlements se trouvent à la clause 7 et comprennent évidemment le pouvoir d'établir des règlements régissant la vente de tout produit inclus dans la Partie II de l'Annexe dont j'ai fait mention comme constituant une liste de produits susceptibles de réglementation.

Pour cette législation, nous avons cherché des modèles à l'étranger. La loi américaine dite *Hazardous Substances Act* a été adoptée en premier lieu en 1960 et modifiée en 1966. La loi britannique a été adoptée en 1961 et j'ai décrit ces deux lois assez longuement au cours du débat lors de la deuxième lecture à la Chambre. Au Canada, alors que la Loi des aliments et drogues depuis plusieurs années protège le consommateur à l'égard des aliments et drogues, beaucoup de députés connaissent cette législation, nous avons été lents à nous occuper des autres produits dangereux qui ne sont ni des aliments ni des drogues. La première tentative en ce sens de façon plus générale fut la présentation du Bill S-22 à l'autre endroit le 31 octobre 1967 par le ministère de la Santé nationale et du Bien-être social.

Ce bill comprenait des modifications à la Loi des aliments et drogues et à la Loi sur les stupéfiants, ainsi que l'interdiction de la vente et de l'annonce de substances dangereuses et pouvait ainsi être appelé un bill omnibus. Après avoir été étudié au Comité permanent

du Sénat sur la banque et le commerce, où quelques modifications de moindre importance furent apportées, ce bill fut approuvé

[Texte]

31, 1968. The Bill was introduced in the Commons but failed to reach Second Reading before Parliament was dissolved in April.

The scheme of Bill S-22, including the powers to add items to the Schedules and to make regulations affecting items on the regulated list, and the powers of inspection, search, seizure, and so on, was exactly the same as in this bill as originally introduced by me. Bill S-22 received the endorsement of the Dominion Council of Health and of safety and consumer groups throughout Canada. The scheme of that Bill was approved by the Canadian Paint Manufacturers Association and the Canadian Manufacturers of Chemical Specialties, the two industries primarily affected by it.

The only differences between Bill S-22 after it had passed by the other place in the last Parliament and the present Bill, as introduced in the other place in this Parliament, are, first, that the coverage in this Bill is considerably broader as provided in Clause 8 and that provision is made for the Board of Review. The original Bill was limited to the kinds of substances described in Clause 8(1b) to provide for protection from products in the present Bill we have added Clause 8(1a) if hon. members want to look at that. Products which may be hazardous because of faulty design or construction and because of the broad scope of the powers in Clause 8 we concluded that provision for the Board of Review was desirable.

Perhaps I might illustrate the need for extending the coverage of the original Bill as proposed in Clause 8(1b) by pointing out that the United States Public Health Service estimates that in that country 12 types of products or appliances are responsible for one million injuries a year. While unfortunately we do not have comparable statistics in Canada, I think we must assume that Canadians, by and large, are exposed to the same products, the same appliances, the same hazards.

I would like to turn now to the problem of the regulation of the many products which are likely to be added to the Schedules of this Act.

[Interprétation]

par l'autre endroit le 31 janvier 1968. Le bill fut présenté aux Communes, mais n'avait pas encore subi la deuxième lecture lorsque le Parlement fut dissous en avril.

La teneur de ce bill S-22, y compris les pouvoirs d'ajouter des articles aux Annexes et d'établir des règlements touchant les articles dans la liste de produits susceptibles de réglementation ainsi que les pouvoirs d'inspection, de recherche, de saisie, etc., étaient absolument les mêmes que dans le bill actuel tel que je l'ai introduit. Le Conseil fédéral d'hygiène ainsi que des groupes de consommateurs et des groupes s'occupant de sécurité à travers tout le Canada donnèrent leur adhésion au bill. Il en fut de même de l'Association canadienne des fabricants de peintures et l'Association canadienne des fabricants de spécialités chimiques, les deux industries les plus touchées par le bill.

Les seules différences entre le Bill S-22, après son adoption par l'autre endroit lors du dernier Parlement, et le Bill actuel, présenté à l'autre endroit au cours du présent Parlement, sont d'abord que la portée du bill actuel est beaucoup plus vaste, comme l'indique la Clause 8 et ensuite qu'on y inclut une disposition pour l'établissement d'une Commission d'examen. Le bill primitif était limité aux genres de substances décrites à l'alinéa a) du paragraphe (1) de la clause 8 si messieurs les députés veulent bien s'y reporter. Dans le bill actuel, nous avons ajouté l'alinéa b) au paragraphe (1) de l'article 8 afin d'y inclure une protection contre les produits qui pourraient être dangereux à cause d'une imperfection de conception ou une défectuosité de construction et étant donné l'ampleur des pouvoirs à la clause 8, nous avons conclu qu'il était souhaitable que soit prévu l'établissement d'une Commission d'examen.

Je pourrais peut-être expliquer la nécessité d'étendre la portée du bill primitif comme il est proposé à l'alinéa b) du paragraphe (1) de l'article 8 en soulignant que le *Public Health Service* des États-Unis estime que dans ce pays, 12 genres de produits ou d'appareils sont à la source d'un million de blessures par année. Même si, malheureusement, nous n'avons pas de données statistiques comparables, nous pouvons, à mon avis, présumer que les Canadiens d'une façon générale sont exposés aux mêmes produits, aux mêmes appareils et aux mêmes dangers.

Je voudrais maintenant parler du problème de la réglementation des nombreux produits qui pourraient être éventuellement ajoutés aux Annexes de ladite Loi.

[Text]

It is clear that one of the problems in administering the Hazardous Products Act will be to define precisely and unequivocally what the hazardous product is. We cannot leave manufacturers, importers or others in any doubt whether their products or substances are or are not covered by the Act. In a simple case such as the poisonous jequirity beans, which I am sure members are familiar with, the issue does not arise and the regulation can be simple. This is by no means a typical case, however.

We are more likely to have to deal with situations where we have to identify in a class of products the exact composition or performance qualities which make the products dangerous. For example, there are many products containing turpentine, benzene, petroleum distillates or ethylene glycol to be found in the home, garage or workshop. I believe it will be desirable to provide for warning or cautionary labels on such products because we know that they are often involved in poisoning accidents based on the experience of the Poison Control Centres across Canada. In all such cases, however, we also know that products containing very small proportions of the toxic ingredient may not be particularly dangerous. This means that we must establish by regulation the minimum percentage of the toxic ingredient which must be present before the product is hazardous. The percentage may be 4 or 5 or 10 per cent. The precise level would be determined after the doctors and the toxicologists have provided the necessary technical advice. I believe that there is little point in lay people arguing or debating about the proper percentage figure to adopt.

Let me give you just one example of the technical nature of some of the U.S. regulations under their Federal Hazardous Substances Act. One of their regulations states that products containing 5 per cent or more of petroleum distillates should bear special labels. However, the following exemption is provided for:

Section (9) Porous-tip ink-marking devices are exempt from the labeling requirements of section 2(p)(1) of the act and subsection 191.7(b) (3) (ii) and (iii) and (4) insofar as such requirements would be necessary because the ink contained therein is a toxic substance as defined in

[Interpretation]

Il est évident que l'un des problèmes dans l'application de la Loi sur les produits dangereux sera de définir les produits dangereux avec précision et sans équivoque. Nous ne pouvons laisser dans le doute les fabricants, importateurs ou autres quant à savoir si leurs produits ou substances entrent ou non dans les cadres de la Loi. Dans un cas simple, comme l'empoisonnement par les graines de jequirity, que les députés connaissent je suis sûr, la question ne se pose pas et la réglementation peut être simple. Mais cependant, ce n'est aucunement un cas type.

Nous aurons vraisemblablement à nous occuper de situations où il s'agira d'identifier dans une catégorie de produits les caractéristiques exactes de composition ou de rendement qui rendent le produit dangereux. Par exemple, bien des produits contenant de la térébenthine, de la benzine, des produits obtenus par distillation du pétrole, ou du glycol d'éthylène se trouvent dans la maison, le garage ou l'atelier. Il est souhaitable, à mon sens, de prévoir l'apposition d'étiquettes d'avertissement ou de mise en garde sur de tels produits parce que nous savons qu'ils occasionnent souvent des empoisonnements comme l'ont constaté les Centres de lutte contre les empoisonnements du Canada. Toutefois, dans de tels cas, nous savons également que les produits contenant de très faibles proportions de la substance toxique peuvent bien ne pas être particulièrement dangereux. Ceci veut dire que nous devons établir par règlement, le pourcentage minimum de l'ingrédient toxique qui doit s'y trouver avant que le produit devienne dangereux. Le pourcentage peut être de 4 ou 5 ou 10 p. 100. Le niveau précis sera déterminé après que les médecins et les toxicologues auront donné les avis techniques requis. Je crois qu'il n'est pas tellement nécessaire que les profanes discutent au sujet du pourcentage approprié devant être déterminé.

Permettez-moi de vous donner seulement un exemple de la nature technique de quelques-uns des règlements américains en vertu de la loi dite *Federal Hazardous Substances Act*. L'un de leurs règlements énonce que les produits contenant 5 p. 100 ou plus de produits obtenus par distillation du pétrole doivent porter des étiquettes spéciales. Toutefois, l'exemption suivante est prévue:

Article (9) Les dispositifs de marquage à l'encre avec extrémité poreuse sont exempts des exigences de l'étiquetage contenues à l'article 2(p)(1) de la loi et du paragraphe 191.7(b) (3) (ii) et (iii) et (4) dans la mesure où ces exigences seraient nécessaires parce que l'encre qui y est

[Texte]

sub-section 191.1(f) (1); and/or because the ink contains 10 per cent or more by weight of toluene (also known as toluol), xylene (also known as xylol), or petroleum distillates as defined in subsection 191.7(a) (4); and/or because the ink contains 10 per cent or more by weight of ethylene glycol: Provided, That:

(i) The porous-tip ink-marking devices are of such construction that the ink is held within the device by an absorbent material so that there is no free liquid within the device, and under any reasonably foreseeable conditions of manipulation and use including reasonably foreseeable abuse by children, the ink will emerge only through the porous writing nib of the device; and

(ii) (a) The device has a capacity of not more than 10 grams of ink, and the ink, when tested by methods described in subsection 191.1(f) (1), has an LD₅₀ single oral dose of not less than 2.5 grams per kilogram of body weight of the test animal; or

(b) The device has a capacity of not more than 12 grams of ink and the ink, when tested by methods described in subsection 191.1(f) (1), has an LD₅₀ single oral dose of not less than 3.0 grams per kilogram of body weight of the test animal.

Other examples of the technical nature of the regulations both in Britain and the United States could be given, but I think the point is sufficiently clear.

I propose in drawing up the regulations to institute discussions with industry on any new regulations in order to benefit from their technical knowledge and advice. In many cases I fully expect that new regulations will merely confirm good manufacturing and labelling practices. For example, I have mentioned on an earlier occasion the labelling code developed by the Canadian Manufacturers of Chemical Specialties Association. This Association represents a substantial proportion of the manufacturers of household chemical specialty products in this country.

[Interprétation]

contenue est une substance toxique comme le définit le paragraphe 191.1(f) (1); et (ou) parce que l'encre contient 10 p. 100 ou plus au volume de toluène (également connu sous le nom de toluol), de xylène (également connu sous le nom de xylol), ou de produits obtenus par distillation du pétrole comme il est défini au paragraphe 191.7(a) (4); et (ou) parce que l'encre contient 10 p. 100 ou plus au poids de glycol d'éthylène;

A la condition toutefois que

(i) les dispositifs de marquage à l'encre avec extrémité poreuse soient construits de telle sorte que l'encre sera retenue à l'intérieur du dispositif par une substance absorbante empêchant le liquide de s'écouler à l'intérieur du dispositif, et que dans des conditions raisonnablement prévisibles de manipulation et d'utilisation, y compris le mauvais usage raisonnablement prévisible par les enfants, l'encre sorte seulement par l'extrémité poreuse du dispositif; et que

(ii) (a) le dispositif ait une capacité d'au plus 10 grammes d'encre et que l'encre, d'après des essais selon les méthodes décrites au paragraphe 191.1(f) (1) ait une dose buccale simple de LD₅₀ d'au moins 2.5 grammes au kilogramme du poids du corps de l'animal soumis à l'épreuve; ou que

(b) le dispositif ait une capacité d'au plus 12 grammes d'encre et que l'encre, d'après les essais selon les méthodes décrites au paragraphe 191.1(f) (1), ait une dose buccale simple de LD₅₀ d'au moins 3.0 grammes au kilogramme du poids du corps de l'animal soumis à l'épreuve.

On pourrait donner d'autres exemples de la nature technique des règlements tant en Grande-Bretagne qu'aux États-Unis, mais je crois que l'exemple est suffisamment évident.

Lors de la rédaction de ces règlements, je propose que des pourparlers soient entamés avec l'industrie sur toute réglementation nouvelle afin que l'on puisse tirer profit de leurs connaissances et de leurs conseils techniques. Dans bien des cas, je compte bien que des règlements nouveaux confirmeront simplement les bonnes pratiques de fabrication et d'étiquetage. Par exemple, j'ai fait mention en une circonstance antérieure du code d'étiquetage mis au point par l'Association canadienne des fabricants de spécialités chimiques. Cette association représente une partie

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This includes such things as aerosols, soaps, detergents and sanitary chemicals, waxes and floor finishes, insecticides, pesticides and automotive chemicals. The Labelling Code of Ethics of this Association first issued in 1966 is by and large an excellent example of good labelling practice. The difficulty is, of course, that it is a voluntary code and for this reason does not cover all hazardous household products, and I would anticipate that the regulations relating to the labelling of household chemicals will not be very different from the requirements of their code. There may, however, be some variation particularly if we are able to develop a satisfactory system of warning symbols rather than printed labels. Discussions on the best kind of symbols to use are now going on.

If, however, when regulations are issued which the industry feels are unrealistic or incorrect there is provision for the review procedure. Although it is my hope that initially we can use an existing agency such as the Restrictive Trade Practices Commission as a Hazardous Products Board of Review, this may not be suitable for certain classes of products. If the regulations involve technical issues and problems or have a direct bearing on health as opposed to safety considerations, it may be more appropriate to constitute a review board of chemists or toxicologists or medical people, or other technically trained personnel. Such a technical forum may be more effective in dealing with the review of regulations which are highly technical in nature.

I anticipate that we will be able to obtain a great deal of technical and other advice about new hazardous products not now included in the Bill. For example, my Department has been working with the Consumers' Association of Canada in collecting samples of fabrics and matches for testing purposes. We will certainly be able to rely on the Poison Control Centres for valuable data to identify problems of accidental poisoning. In fact, the reason for including the first three product groups on Part II of the Schedule is that they are the main sources of poisoning accidents reported to us by the Poison Control Centres. Once the Standards Council of Canada is

[Interpretation]

importante des fabricants de notre pays de produits ménagers contenant des spécialités chimiques. Ceci comprend par exemple les aérosols, les savons, les détergents et les produits chimiques sanitaires, les cires et les encaustiques, les insecticides, les pesticides et les produits chimiques pour l'automobile. Le Code d'éthique de cette association au sujet de l'étiquetage d'abord publié en 1966 est vraiment un excellent exemple de bonnes pratiques d'étiquetage. La difficulté, évidemment, est que ce code est d'application facultative et pour cette raison il ne comprend pas tous les produits ménagers dangereux. Je présume que la réglementation ayant trait à l'étiquetage des produits chimiques ménagers ne sera pas tellement différente des exigences de leur code. Toutefois, il peut y avoir certains écarts, surtout si nous sommes capables de mettre au point une méthode satisfaisante de symboles de mise en garde plutôt que des étiquettes imprimées. Des entretiens au sujet des meilleurs genres de symboles à utiliser sont actuellement en cours.

Si, toutefois, l'industrie estime que certains règlements établis ne sont pas réalistes ni exacts elle peut demander que l'on procède à un examen. Même si j'ai l'espoir qu'au début nous pourrions utiliser un organisme existant, comme la Commission sur les pratiques restrictives du commerce, pour faire fonction de Commission d'examen des produits dangereux, il se peut que cette façon de procéder ne soit pas appropriée pour certaines classes de produits. Si la réglementation met en cause des problèmes et questions techniques ou a une influence directe sur la santé par opposition à des considérations de sécurité, il pourrait être plus approprié d'instituer une Commission d'examen composée de chimistes, ou de toxicologues, ou de médecins ou d'autres personnes possédant des connaissances techniques. Ces experts techniques pourraient probablement procéder avec plus d'efficacité à un examen des règlements qui sont de nature hautement technique.

Je prévois que nous pourrions obtenir un grand nombre de conseils techniques et autres au sujet des nouveaux produits dangereux qui ne sont pas compris dans le bill. Par exemple, mon ministère travaille de concert avec l'Association des consommateurs du Canada à recueillir des échantillons de tissus et d'allumettes pour fins d'essais. Nous serons certainement en mesure de nous fier aux Centres de lutte contre les empoisonnements pour obtenir des données valables afin de dépister les problèmes d'empoisonnements. De fait, la raison pour laquelle on inclut les trois premiers groupes de produits à la Partie II de l'Annexe, c'est qu'ils constituent les principa-

[Texte]

established it is anticipated that this agency will take a real interest in the question of consumer safety and will be in a position to promote the development of more and better safety standards. My Department has already had some preliminary discussions with the Canadian Standards Association and I would expect that this organization also will be very helpful. I should also mention the National Product Safety Council in the United States. This Council, established as part of Congress' hazardous products program, has already embarked on an intensive study of consumer hazards in household goods and the results of their research should be of great value to us in Canada. A recent news item mentions the fact that they have been examining the design features of babies' cribs. Design defects have caused in a number of cases the tragic strangulation of children. We have already received representations from the medical profession, the Association of Canadian Fire Marshals and Fire Commissioners and from private individuals all of which have drawn attention to serious consumer hazards.

When the current version of the Hazardous Products Act was being considered by the Senate Banking, Trade and Commerce Committee a number of amendments were proposed and adopted. The first of these eliminated any ministerial discretion on my part in the constitution of a Hazardous Products Board of Review. The procedure which is not provided for and which I fully accepted in the Senate specifies that if a request for a review is submitted within sixty days of the issuance of a regulation a board of review must be set up to examine the nature of the products being regulated and the justification for treating them as hazardous.

A further amendment provided that every new regulation adding a hazardous product to the Schedule must be submitted to Parliament for ratification within a two-year period from the time of issuance. If the regulations are not ratified by both Houses within the period of the orders will be automatically revoked. My view is that this amendment introduces an undesirable rigidity in the administration of this Act, and I will have more to say on that particular clause when

[Interprétation]

les causes d'empoisonnements qui nous sont signalés par les Centres de lutte contre les empoisonnements. Lorsque le Conseil canadien de normalisation aura été établi, on prévoit que cet organisme s'occupera réellement de la question de la sécurité du consommateur et sera en mesure de favoriser la mise au point de normes de sécurité plus nombreuses et meilleures. Mon ministère a déjà eu des entretiens préliminaires avec l'Association canadienne de normalisation, et je compte bien que cet organisme sera également très utile. Je dois également mentionner le *National Product Safety Council* aux États-Unis. Ce Conseil qui fait partie du programme du Congrès contre les produits dangereux a déjà commencé une étude approfondie des dangers que comportent pour les consommateurs les biens ménagers, et les résultats de leurs recherches nous seront très précieux au Canada. Une nouvelle récente mentionne le fait que les membres du conseil ont examiné les caractéristiques de conception des lits d'enfants. Les défauts dans les dessins ont causé, dans un certain nombre de cas, la strangulation de petits enfants. Nous avons déjà reçu des observations de la profession médicale, de l'Association des prévôts et des commissaires des incendies du Canada ainsi que de simples citoyens qui nous ont tous signalé de graves dangers pour le consommateur.

Lorsque la version actuelle de la Loi sur les produits dangereux a été étudié par le Comité du Sénat sur la banque et le commerce, un certain nombre d'amendements ont été proposés et adoptés. Le premier de ces amendements éliminait toute discrétion ministérielle de ma part dans la constitution d'une Commission d'examen des produits dangereux. La procédure, qui est maintenant prévue et que j'ai acceptée entièrement au Sénat, précise que si une demande d'examen est présentée dans les 60 jours de l'établissement d'un règlement, une commission d'examen doit être constituée afin d'examiner la nature des produits réglementés et la raison pour laquelle on les considère dangereux.

Un autre amendement stipulait que chaque nouveau règlement ajoutant un produit dangereux à l'Annexe doit être soumis au Parlement pour ratification au cours d'une période de deux ans de la date de la délivrance. Si les règlements ne sont pas ratifiés par les deux Chambres au cours de cette période, les ordonnances seront immédiatement révoquées. A mon point de vue, cet amendement introduit une rigidité non souhaitable dans l'application de cette Loi, et j'aurai autre

[Text]

we reach that point in the Committee's consideration, Mr. Chairman. The Committee may also want—although I am in the hands of the Committee—to call a solicitor from the Department of Justice to discuss that.

The Chairman: Thank you, Mr. Basford. Are there any questions of the minister? Mr. Robinson.

Mr. Robinson: Mr. Basford, in looking at the bill I notice on page 4 under Clause 6 there is reference to "a magistrate", and in view of the fact that in the courts of Ontario—I assume you would now call them provincial courts—it would be "a judge of the provincial court" rather than "a magistrate" I wonder if it would require any change in the bill in order to cover that point.

Mrs. MacInnis (Vancouver-Kingsway): Mr. Chairman, on a point of order before we start. I think we ought to clear up just how we are going to go through this bill. I think the usual procedure is to go through it clause by clause rather than dealing with the entire bill in general.

The Chairman: I agree, but I thought if we had a general discussion beforehand it might speed things up. However, if it is the wish of the Committee to go through the Bill clause by clause now, then we could proceed in that way.

Mrs. MacInnis (Vancouver-Kingsway): It seems to me that even if we have this general type of discussion it does not mean we will not have to start at the beginning and do it all over again. I think we would make better progress if we started at the beginning and went through it in the regular way.

The Chairman: Is it agreed that we proceed with a clause-by-clause study of this bill?

Some hon. Members: Agreed.
On Clause 2.

Mr. Howe: Mr. Chairman, I notice in Clause 2 it describes "hazardous product", and I do not believe the bill is broad enough in its description. There are a lot of things in this category. Aspirin in a bottle in a medicine cabinet can be a hazardous product. I merely wonder if that definition should not be broadened a bit?

Mr. Basford: The definition within the interpretation section, for the purposes of the Act, describes "hazardous product" as those substances contained in either Part I or Part

[Interpretation]

chose à dire sur cette clause lorsque nous y serons, monsieur le président. Le Comité peut aussi vouloir, bien que je sois dans les mains du comité, appeler un procureur du ministère de la Justice pour qu'il discute de ces questions.

Le président: Merci M. Basford. Y a-t-il des questions à poser? M. Robinson.

M. Robinson: Monsieur le ministre, en examinant la Loi elle-même, je remarque à la page 4, section 6, que l'on se réfère à un «magistrat», et, étant donné que dans les cours de l'Ontario, on les appellerait maintenant «juges» dans les cours provinciales, au lieu de «magistrat». Est-ce qu'il faudrait modifier cela dans la loi pour tenir compte de ce fait?

Mme MacInnis (Vancouver-Kingsway): Avant de commencer, je voudrais invoquer le règlement. Je crois que l'on devrait savoir comment nous allons étudier ce projet de loi. Je crois que la procédure habituelle est de l'étudier article par article plutôt que de commencer à discuter de tout le bill en général.

Le président: Je suis d'accord, mais j'avais pensé qu'on pourrait d'abord avoir une discussion générale, mais si vous voulez que l'on procède article par article dès maintenant. D'accord.

Mme MacInnis (Vancouver-Kingsway): Il me semble que cette discussion d'ordre général ne veut pas dire que l'on doit ensuite recommencer de nouveau au commencement. Je crois que nous pourrions procéder plus rapidement si l'on procède article par article.

Le président: Êtes-vous d'accord pour cette procédure?

Des voix: Nous sommes d'accord.
Article 2.

M. Howe: Monsieur le président, je remarque qu'à l'article 2, on décrit les produits dangereux, je pense que ce bill n'est pas suffisamment vaste dans sa description. Beaucoup de choses entrent dans cette catégorie. Une aspirine contenue dans une bouteille rangée dans une armoire à médicaments peut être un produit dangereux. Je me demande seulement si on ne devrait pas élargir un peu cette définition?

M. Basford: La définition contenue dans la section de l'interprétation décrit «un produit dangereux» pour ce qui s'applique de par la Loi, comme étant une substance mentionnée

[Texte]

II of the Schedule. Clause 8 describes those products or substances which may be added to the Schedule and thereby become "hazardous products." It is subject to Clause 15, which excludes certain items simply because they are covered by the Explosives Act, the Food and Drugs Act, the Pest Control Products Act or the Atomic Energy Control Act. Therefore any substance not included in those Acts and which falls within the definition of Clause 8 could become a hazardous product for the purpose of this proposed Act. I do not think it would fit the scheme of the proposed act and it would also be extremely difficult to draw some general definition of a "hazardous product".

Mr. Howe: I might return to our discussion about tobacco. We found out that it is the fusion of the cigarette that makes it a hazardous product, and a cigarette such as the one you are smoking, Mr. Basford...

Mr. Basford: I am going to ask that my estimates go to a different Committee!

Mr. Howe: —will continue to burn practically down to the filter, and when it is set down or dropped on a piece of furniture it becomes a hazardous product because it creates a fire hazard and therefore under certain circumstances a cigarette is a hazardous product with respect to the hazard of fire and the loss of life connected with it. Do you not agree with that, Mr. Basford?

Mr. Basford: In that sense it is hazardous. However, I do not think it would be deemed a hazardous product within this proposed act because we would not be dealing with cigarettes simply because they are dropped and burn a chesterfield.

Mr. Howe: Could we deal with the components that make up cigarettes?

Mr. Basford: No.

The Chairman: Mr. Howe, I think you should stick to the Schedule in the back of the bill.

Mr. Howe: You got started a little ahead of me. I wanted to ask a few questions right at the outset with regard to the description of the Act. This is an act to prohibit the adver-

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sing, sale and importation of hazardous products and I think there should be some-

[Interprétation]

soit dans la Partie I soit dans la Partie II de l'Annexe. L'article 8 décrit ces substances ou produits qui pourraient être ajoutés à l'Annexe et de ce fait devenir des «produits dangereux». Il est sous réserve de l'article 15 qui exclue certaines substances parce qu'elles sont couvertes par la Loi sur les explosifs ou la Loi des aliments et drogues, la Loi sur les produits antiparasitaires ou la Loi concernant le contrôle des produits nucléaires, donc toute substance ou produit qui n'est pas inclus ici et qui tombe sous le coup de la définition de la section 8 pourrait devenir un produit dangereux aux fins de cette Loi. Je crois qu'il serait extrêmement difficile et cela ne s'insérerait pas dans le format du bill d'établir une définition générale de ce qu'est un produit dangereux.

M. Howe: Nous pourrions revenir à la discussion que nous avons eue sur la question du tabac. Nous avons appris que la fusion de la cigarette la rend dangereuse parce que la cigarette que vous fumez monsieur Basford...

M. Basford: Je crois que je vais étudier mes prévisions budgétaires dans un autre comité.

M. Howe: ...continuera à brûler presque jusqu'au filtre et elle peut ensuite tomber sur un meuble et devenir un produit dangereux, parce qu'elle crée un danger d'incendie, est-ce que l'on peut considérer, en certaines circonstances, qu'une cigarette est un produit dangereux pour ce qui est du danger d'incendie et de perte de vie qu'elle comporte? Vous êtes d'accord avec moi, monsieur Basford?

M. Basford: Dans un sens, c'est dangereux oui mais on ne considère pas que c'est un produit dangereux dans le cadre de cette Loi. Ici, il ne s'agit pas de prendre des cigarettes et de les laisser tomber sur un divan.

M. Howe: Pourrions-nous traiter des substances qui entrent dans une cigarette.

M. Basford: Non.

Le président: Il faut croire monsieur qu'il faudrait mieux s'en tenir à l'Annexe à la fin du Bill.

M. Howe: Vous êtes allé un peu trop vite, je voulais poser quelques questions dès le départ concernant la description de la Loi. Je pense qu'avec cette Loi destinée à défendre la

publicité, la vente et l'importation de produits dangereux, il devrait aussi y avoir quelque

[Text]

thing in there about the handling or packaging of hazardous products.

There is a society known as The Ontario Association for the Control of Accidental Poisoning, and the reason I bring this up is that some months ago I asked the Minister of National Health and Welfare a question in the House with regard to safe bottles. At that time he told me that regulations were being drawn up, but those regulations are long overdue, Mr. Basford. There are bottles on the market today and I think there should be regulations that insist that certain types of drugs—even aspirin—should be bottled in the safest type of bottle possible.

We know there is a bottle manufactured in Windsor called Palm-n-Turn, which children cannot open as readily as they can some of the other bottles. I feel in this discussion of hazardous products we should consider this. This should also include the bleaches that you mention, the packaging and the containers, because there are people who have been badly burned, children included, from drinking this type of thing.

Mr. Basford: Yes, I am aware of our interest in this subject. I remember your asking questions on this in the House, Mr. Howe. Clause 3 refers to advertising, sale or importation, but the power to regulate is under Clause 7. I do not want to leap ahead but I must in order to answer your question, which I think is dealt with by Clause 2. Clause 7 states:

(a) authorizing the advertising, sale or importation into Canada of any hazardous product included in Part II of the Schedule and prescribing the circumstances and conditions under which and the persons by whom such hazardous product may be sold; advertised or imported into Canada;

I take that as meaning that in circumstances where we felt it was desirable we could regulate that certain products could only be sold in a certain type of container.

Mr. Howe: Does this act give you that power?

Mr. Basford: Yes, under the regulation section that I just read to you, Clause 7(a). Clause 3 does not deal with the importation, sale and packaging, the packaging is covered under Clause 7. Similarly, Clause 3 does not refer to labelling but, of course, half of our program would deal with labelling and

[Interpretation]

chose concernant la manutention et l'emballage des produits dangereux.

Il y a une association pour le contrôle des empoisonnements accidentels en Ontario. J'ai soulevé cette question parce que j'ai demandé, il y a quelques mois, au ministre de la Santé et du Bien-être social, à la Chambre des communes, une question concernant des bouteilles non dangereuses. Il m'a dit qu'il avait des règlements qu'on était à formuler mais ces règlements se font attendre depuis longtemps, monsieur Basford. Il y a des bouteilles dangereuses sur le marché aujourd'hui et je crois qu'il devrait y avoir des règlements pour rendre obligatoire que certains médicaments, même l'aspirine, soient embouteillés dans la sorte de bouteille la plus sûre.

Nous savons qu'il y en a une fabriquée à Windsor, Ontario et qui s'appelle: «Palm-n-Turn», qui empêche les enfants d'ouvrir la bouteille aussi facilement qu'une autre. Je pense que dans la discussion des produits dangereux, on devrait s'occuper aussi de ceux et lorsque l'on parle de produits tels que l'eau de Javel qui peuvent être dangereux parce que des gens ont subi des brûlures graves, y compris des enfants, après avoir bû de cette sorte de liquide.

M. Basford: Je sais que ceci vous intéresse. Je me souviens de votre question à la Chambre, mais la section 3 de la Loi parle de la publicité, la vente ou l'importation des produits mais en ce qui concerne le pouvoir de passer des règlements en vertu de la section 7, je ne veux pas sauter trop en avant, mais je dois le faire pour répondre à votre question à laquelle répond la section 2 qui suit:

a) autorisant l'annonce, la vente ou l'importation au Canada de tout produit dangereux mentionné à la Partie II de l'Annexe et prescrivant dans quelles circonstances, à quelles conditions et par qui ce produit dangereux peut être annoncé, vendu ou importé au Canada;

Je crois que dans certaines circonstances, lorsque cela est souhaitable, nous pourrions réglementer la vente de certains produits dans des bouteilles spéciales.

M. Howe: Est-ce que cette Loi vous donne ces pouvoirs?

M. Basford: Oui, dans le cadre de la section 7 a) que je viens de vous lire. Donc la section 3 ne traite pas de la vente, de l'importation et de l'emballage, c'est à la section 7 qui traite de l'emballage. De façon semblable, la section 3 ne traite pas de l'étiquetage, mais, bien sûr, la moitié de notre programme porterait sur

[Texte]

requiring that certain hazardous products could only be sold if they were labelled in a certain way, namely, "This is poison", "caution" or "extremely flammable".

Mr. Howe: Now that we are on that, it says:

...prescribing the circumstances and conditions under which and the persons by whom such hazardous product may be sold...

Are there going to be regulations issued in connection with prescribing the conditions? How are they going to know what conditions are...

Mr. Basford: By regulation.

Mr. Howe: And are those regulations drawn up?

Mr. Basford: No, they are not drawn up. On some of the subjects the officials in my department have gone quite far in a preliminary way in drawing up the regulations but, for example, we do not have them approved by the Department of Justice as yet.

Mr. Howe: How soon do you expect they will be published?

Mr. Basford: It will vary. The items listed in the Schedule are really listed simply as examples of the sorts of things we intend to cover. We expect we will be adding to them. We are fairly well advanced on those four items. I have found in my experience around Ottawa that it is dangerous to tie yourself down to a date. I do not want to say when the regulations will be passed by the Governor in Council. Within the year, let me put it that way.

The Chairman: Order please, Mr. Howe, you are on the regulations. You are on Clause 1.

Mr. Howe: I apologize, Mr. Chairman. I took him to Clause 7.

The Chairman: Shall Clause 2 carry?

Mr. Robinson: Mr. Chairman. Actually, I think the question I previously asked would fall under Clause 2, probably as interpretation. It would be part (g), which would give the meaning of magistrate. I suppose you mean a stipendiary magistrate or a provincial judge. Maybe if that was clarified it would be helpful.

Mr. Basford: I do not have the departmental solicitor with me and I cannot give that

[Interprétation]

l'étiquetage et l'exigence que certains produits dangereux ne pourraient uniquement être vendus s'ils étaient étiquetés d'une certaine façon, soit «ce produit est poison», «dangereux» ou «extrêmement inflammable».

M. Howe: On dit:

...prescrivant dans quelles circonstances, à quelles conditions et par qui ce produit dangereux peut être annoncé, vendu...

Est-ce qu'il y aura des règlements qui seront mis en vigueur décrivant les conditions, comment peut-on savoir quelles sont ces conditions...

M. Basford: Ils seront réglementés.

M. Howe: Est-ce que ces règlements ont été rédigés?

M. Basford: Non. Les fonctionnaires de mon ministère ont étudié certains des sujets, ils sont allés déjà assez loin dans la rédaction de ces règlements mais ils n'ont pas encore été approuvés par le ministère de la Justice par exemple.

M. Howe: Quand est-ce que vous prévoyez leur publication?

M. Basford: Cela variera. Les produits indiqués à l'Annexe sont certains exemples des choses que nous voulons couvrir, nous allons ajouter d'autres produits. Nous avons pas mal avancé sur ces différents points. Je sais, par expérience qu'à Ottawa il est dangereux de se lier à une date. Donc je ne veux pas dire quand les règlements seront adoptés par le gouverneur en conseil. Disons d'ici un an.

Le président: A l'ordre. Vous parlez déjà de l'article 7.

M. Howe: Je m'excuse, monsieur le président, c'est moi qui l'ai entraîné jusque-là.

Le président: L'article 2 est-il adopté?

M. Robinson: Je crois, monsieur le président, que la question que je posais plus tôt relève de l'article 2. Il faudrait définir le mot magistrat. Je suppose que vous voulez dire un juge appointé ou un juge de la cour provinciale. Peut-être qu'il serait utile de clarifier ce point.

M. Basford: Le conseiller juridique du ministère n'est pas ici et je ne puis répondre.

[Text]

answer. I think you will find that would be covered in the interpretation.

Mr. Deakon: May I assist the Committee in this regard? We have just had a meeting of the Justice and Legal Affairs Committee, and it was specifically laid out there that it had to be amended because of the provisions for provincial judges in the two provinces of Ontario and Quebec. Therefore they had to be added in together with magistrates.

Mr. Basford: Well, Mr. Robinson, I am in the hands of the Department of Justice on this point, really.

Mr. Robinson: I only want to suggest to you that this should be considered before...

Mr. Basford: In final form. Yes.

Mr. Robinson: Would your department consider no-return bottles a hazardous substance or hazardous product? There has been a great deal of controversy about this throughout Canada. Many municipalities have been asking for legislation banning the use of this kind of product. Could somebody give some indication as to whether this would be considered within this act as a hazardous product or a product to be considered from that point of view?

Mr. Basford: My view is that the bottle itself is not hazardous, and that the non-returnable bottle in the sense of this act is no more hazardous than any other bottle.

Mr. Robinson: Well, neither are jequirity beans unless you swallow them.

Mr. Basford: The problem with non-returnable bottles is a litter problem. It is a merchandising problem as far as we are concerned insofar as consumers are not given a choice as to kinds of containers. But I find it hard to think that a bottle itself is a hazardous product.

Mr. Robinson: No, but by the same token, as I mentioned, jequirity beans are not hazardous products in themselves either. It is only what you do with them or what happens as a result of them being an attractive item. In the case of these no-return bottles, there have been many complaints from garbage men when they break them. They are broken in garbage cans.

Mr. Chairman: Mr. Robinson, I think you are out of order. There is no question of disposal of bottles here.

[Interpretation]

Je crois que ce point sera couvert dans l'interprétation.

M. Deakon: Je pourrais peut-être être de quelque utilité. Je viens d'assister à une séance du Comité de la justice et des questions juridiques et il a été clairement établi que l'amendement était nécessaire en raison de l'existence de juges provinciaux au Québec et en Ontario. Il a fallu ajouter leurs noms.

M. Basford: Je dois m'en remettre au ministère de la Justice.

M. Robinson: Je me permettrai de vous suggérer que ce point devrait être éclairci avant...

M. Basford: ...d'en arriver à un texte définitif. Oui.

M. Robinson: Votre ministère considérera-t-il les bouteilles non retournables comme des produits dangereux? Il y a pas mal de discussion à ce sujet. Plusieurs municipalités désirent que ce produit soit banni. Quelqu'un peut-il nous dire si ce produit, au terme de ce projet de loi, sera considéré comme un produit dangereux?

M. Basford: Je pense que la bouteille elle-même n'est pas dangereuse et que la bouteille non-retournable n'est pas plus dangereuse que n'importe quelle autre bouteille.

M. Robinson: Pas plus que les graines de jequirity, tant qu'on ne les avale pas.

M. Basford: Le problème des bouteilles non-retournables touche le domaine de la propreté. C'est également un problème de mise en marché si les consommateurs ne peuvent pas choisir le contenant. Mais je vois difficilement comment une bouteille en soi, peut être dangereuse.

M. Robinson: Il y a beaucoup de produits qui ne sont pas dangereux en soi mais qui le sont selon l'usage qu'on a fait. Pour les bouteilles non-retournables, il y a eu beaucoup de plaintes de la part des boueurs parce qu'on les retrouve brisées dans les poubelles. Je voudrais savoir ce qu'est un produit dangereux.

Le président: Je dois vous rappeler à l'ordre, monsieur Robinson, il n'est pas question, ici, d'élimination de bouteilles.

[Texte]

Mr. Robinson: I am trying to get clarification from the Minister as to what is a hazardous product.

Mr. Chairman: I understand, but you have to stick to the bill.

Mr. Robinson: Well, I think I am.

The Chairman: On page 11 you will see the Schedule, Part I and Part II. There is no mention of disposable bottles or anything like that, so I think you have to stick to the bill.

Mr. Robinson: Well, I am suggesting that maybe this should be considered as a hazardous product. And particularly when we have nothing before us indicating what the regulations are going to be to determine this, I think we need some background on it.

Mr. Basford: Well, a hazardous product is something obviously that is or is likely to be a danger to the health or safety of the public. The fact that non-returnable bottles are creating problems in municipal garbage disposal plants does not make them a hazard to the health or safety of the public.

Clause 2 agreed to.

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The Chairman: Shall Clause 3 carry?

Mr. Robinson: Mr. Chairman, we do not have the regulations. We cannot approve the regulations if they are not before us, so really all we are doing is saying that we are approving of Clause 3, subject to the regulations being presented later.

Mr. Chairman: You could ask questions on Clause 7 which pertains to the regulations.

Mr. Robinson: There is reference to regulations in Clause 3.

The Chairman: Dr. Ollivier, we are caught up in a legal...

Dr. P. M. Ollivier (Parliamentary Counsel and Law Clerk, House of Commons): You have to consider that that is conditioned by Clause 16. Clause 16 reads:

Subsection (2) of section 3 shall come into force on a day to be fixed by proclamation.

Therefore you can be assured that it is only when the regulations have been set up that this subsection will come into force. The act will not come into force before the regulations.

[Interprétation]

M. Robinson: Je tente d'obtenir du ministre qu'il me dise ce qu'est un produit dangereux.

Le président: Je le sais, mais vous devez vous en tenir au bill.

M. Robinson: Je crois que je le fais.

Le président: L'Annexe ne parle pas des bouteilles. Je vous prierais donc de vous en tenir au bill.

M. Robinson: Je crois qu'elles doivent être considérées comme un produit dangereux. D'autant plus que rien ne nous permet de savoir ce que diront les règlements à cet effet.

M. Basford: Un produit dangereux c'est quelque chose qui peut être un danger pour la sécurité ou la santé du public. Le fait que ces bouteilles causent des problèmes dans les dépotoirs municipaux ne les rend pas dangereuses pour la santé et la sécurité publiques.

L'article 2 est adopté.

Le président: L'article 3 est-il adopté?

M. Robinson: Monsieur le président, nous n'avons pas les règlements. Nous ne pouvons pas les approuver sans les avoir sous les yeux. En fait, tout ce que nous faisons c'est d'approuver l'article 3, et que cette approbation est sujette à la présentation ultérieure des règlements.

Le président: Vous pourrez poser des questions lors de l'étude de l'article 7 qui touche cette question des règlements.

M. Robinson: Il y a également référence aux règlements à l'article 3.

Le président: Monsieur Ollivier, nous sommes dans une impasse.

M. P. M. Ollivier (Conseiller parlementaire et légiste, Chambre des Communes): N'oubliez pas l'article 16 qui dit:

Le paragraphe (2) de l'article 3 entrera en vigueur à une date qui sera fixée par proclamation.

Vous êtes donc assurés que ce n'est qu'après l'approbation des règlements que ce paragraphe entrera en vigueur.

[Text]

Mr. Robinson: Suppose we do not agree with the regulations.

Mr. Basford: We will come to that in a moment because I have something to say about the regulations.

Mr. Robinson: Perhaps my comment is premature.

Mr. Basford: Clause 3, Mr. Robinson, sets up the scheme of the act, namely that there will be a schedule. Certain products which are regarded as so hazardous that they should not be on the market will be in Part I of the Schedule. Those others that we think are hazardous but necessary and can be regulated will be in Part II of the Schedule.

Mr. Deakon: Mr. Chairman, paragraph 4 of Part II of the Schedule refers to glues.

The Chairman: We are not on the Schedule yet.

Mr. Deakon: The reason I say this is because you mention the penalties on these two Parts.

The Chairman: I just said that we were not on Part I or II of the Schedule.

Mr. Deakon: All right. Carry on.

The Chairman: Clause 3 agreed to. Shall clause 4 carry?

Mrs. MacInnis (Vancouver-Kingsway): Mr. Chairman, how does the Minister envisage the system of inspection working? Could he give us any indication of the numbers of inspectors who would be required and where they would be, and that sort of thing?

Mr. Basford: I think I explained before this Committee during consideration of the estimates last fall the re-organization of the department and how all of the Standards Branch of the Department of Trade and Commerce, some of the retail inspection function of the Department of Agriculture, and part of the administration of the Food and Drug Directorate had been transferred to us. These transfers have allowed us to set up regional offices of the Department across the country. We are in the process now of holding Public Service competitions for that purpose. And it is anticipated that most of the regional field staff of the Department will be designated as hazardous products inspectors, while also doing other things.

[Interpretation]

M. Robinson: Et si nous ne sommes pas d'accord avec les règlements?

M. Basford: Nous y viendrons dans un moment. J'ai quelque chose à dire à ce sujet.

M. Robinson: Mon commentaire était peut-être prématuré.

M. Basford: L'article 3, monsieur Robinson, mentionne l'existence de l'Annexe. Les produits qui sont considérés trop dangereux pour être mis sur le marché seront inscrits à la Partie 1 de l'Annexe. Ceux qui sont dangereux mais nécessaires seront énumérés à la Partie 2.

M. Deakon: Monsieur le président, le paragraphe 4 de la Partie 2 de l'Annexe traite des colles.

Le président: Nous n'en sommes pas encore à l'annexe.

M. Deakon: J'en ai parlé parce que vous avez mentionné des peines qui découlent de ces deux Parties.

Le président: Je viens de dire que nous n'en sommes pas encore à la Partie 1 ou à la Partie 2 de l'Annexe.

M. Deakon: Très bien. Allez-y.

L'article 3 est adopté.

Le président: L'article 4 est-il adopté?

Mme MacInnis (Vancouver-Kingsway): Comment est-ce que le ministre envisage le système d'inspection. Peut-il nous dire combien d'inspecteurs il faudra, où ils travailleront, et autres détails du genre?

M. Basford: Je crois que j'ai expliqué lors de l'étude des prévisions budgétaires, l'automne dernier, en quoi consiste la réorganisation de notre ministère: comment la Direction des normes du ministère du Commerce, une partie des services d'inspection du ministère de l'Agriculture et une partie de l'administration de la Direction des aliments et drogues sont passées sous notre juridiction. Ces transferts nous ont permis d'établir des bureaux régionaux à travers le pays. Des concours auront lieu sous peu pour combler ces postes. La plupart de ces personnes seront appelées inspecteurs des produits dangereux mais elles accompliront également d'autres tâches.

[Texte]

Mrs. MacInnis (Vancouver-Kingsway): That's what I wanted to find out, if they would be exclusively for hazardous products or would they be...?

Mr. Basford: No. We have for example all of the present weights and measures inspectors who were transferred to us. We anticipate that they will become hazardous products inspectors also.

You will notice that the act also empowers the designation of employees of the Department of National Health and Welfare who have functioned under the act and are concerned with health and those things that are a hazard to health and that are not covered under their existing Food and Drugs Act.

It is conceivable that in certain situations we could designate members of the RCMP if there is suddenly some product on the market which has been imported and which turns out to be very hazardous. We might have to act very quickly and designate some inspectors in small towns where we do not have staff.

Mrs. MacInnis (Vancouver-Kingsway): You would not visualize a greatly enlarged staff being necessary over what you have now?

Mr. Basford: No.

The Chairman: Shall Clause 4 carry? Mr. Foster.

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Mr. Foster: My question, Mr. Minister, is this. Do you visualize that your people will become aware of these hazardous products because complaints are made to the Department? Or will you have people on your staff who will be reviewing new products as they come on the market? Or will it be a combination of both? How will this work?

Mr. Basford: We will get our information on hazardous products from many sources, from the public, from Box 99 which is a useful source of information, from telephone calls. Let me give you a case that we have been dealing with in the last few days, the case of a manufacturer of a household cleanser, a new one, which was very toxic. They were distributing samples of this to homes.

The company itself was not doing it. They had hired one of these firms that distribute things. These samples were being dropped through the mail slots in homes. This was in the Ottawa area among others. Of course, the small children on the other side of the door

[Interprétation]

Mme MacInnis (Vancouver-Kingsway): C'est ce que je voulais savoir. Est-ce qu'ils s'occuperont exclusivement des produits dangereux ou d'autres choses?

M. Basford: Non. Toutes les personnes chargées de l'inspection des poids et mesures tombent sous notre juridiction. Nous nous attendons à ce qu'ils deviennent également inspecteurs de produits dangereux.

Ce projet de loi nous donne également le pouvoir de nommer inspecteurs des employés du ministère de la Santé qui sont intéressés par ces produits dangereux pour la santé et qui ne sont pas mentionnés dans la *Loi des aliments et drogues*. Je crois qu'on pourrait aussi nommer des membres de la Gendarmerie royale, dans le cas des produits importés qui sont dangereux. Nous aurons peut-être à agir rapidement pour désigner certains inspecteurs dans les petites villes où nous n'avons pas de personnel.

Mme MacInnis (Vancouver-Kingsway): Vous n'envisagez pas un personnel beaucoup plus important par rapport à ce que vous avez maintenant?

M. Basford: Non.

Le président: Est-ce qu'on adopte l'article 4? Monsieur Foster.

M. Foster: Est-ce que vos employés connaîtront l'existence de ces produits dangereux par suite de plaintes déposées à votre ministère? Ou, certains de vos employés examineront-ils les nouveaux produits mis sur le marché? Ou, est-ce que ce sera un mélange des deux?

M. Basford: Nous allons obtenir nos renseignements concernant les produits dangereux à partir de toutes sortes de sources, du public, grâce à notre case postale 99 et aux appels téléphoniques. Laissez-moi vous citer un cas sur lequel nous nous sommes penchés ces derniers jours, celui d'un fabricant d'un détergent ménager très caustique, dont on distribuait des échantillons dans les maisons.

Ce n'était pas la société qui le faisait, mais ils se sont adressés à une entreprise qui s'occupe de distribuer des échantillons en les mettant dans les boîtes à lettres ou dans les fentes des portes prévues pour distribuer le courrier. C'est ce qu'on a fait à Ottawa et

[Text]

were getting hold of these things, which were quite dangerous.

The complaints came from all over. Complaints were made by members of the public, by housewives, to us, to people in the Department of National Health and Welfare, to three or four hotline radio programs around town, to the newspapers. That is where information would come from. And then I said in my statement, in dealing with the kinds of products we would cover, that we are looking towards our own standards branch, to the standards council when it is established, to the Canadian Standards Association, and to reports of the National Product Safety Council in the United States. There are many sources of information that would indicate to us that certain products should be regulated.

Mr. Foster: Will you have a committee...?

The Chairman: May I point out, Mr. Foster, that perhaps you are talking about the powers of inspectors. We are on Clause 4, which deals with inspectors and analysts. I think we should continue on Clause 4, and perhaps on Clause 5 you could ask your question, because Clause 5 relates to powers of inspectors.

Shall Clause 4 carry? Mr. Yewchuk on Clause 4.

Mr. Yewchuk: Clause 4, Subclause (2), reads:

An inspector shall be furnished with a certificate...

What is this certificate to consist of?

Mr. Basford: An identification card.

Mr. Yewchuk: It is not a search warrant or anything that one would require in order to enter a premises?

Mr. Basford: No.

Mr. Yewchuk: Does this come under Clause 4 or Clause 5, the idea of a search warrant?

Mr. Basford: No, this, I think, is under Clause 5, giving the inspector his powers. This is simply a certificate of his appointment and an identification card.

Mr. Robinson: Mr. Chairman, I have a point of clarification on Clause 3. I hate to go back to it, but if you do not let me ask it now I will ask it later anyway.

The Chairman: You could ask it on Clause 1 which has not been passed yet. We will be coming back to Clause 1 later.

Clause 4 agreed to.

[Interpretation]

ailleurs. Il est évident que les petits enfants de l'autre côté de la porte prenaient ces produits dangereux.

Les plaintes sont venues de toutes parts, des mères de famille, des membres du public et ainsi de suite, adressées au ministère de la Santé nationale et du Bien-être social ainsi qu'aux émissions de radio où les gens peuvent téléphoner.

C'est ainsi que nous obtenons nos renseignements. J'ai dit dans ma déclaration préliminaire que nous tournons vers notre propre section des normes, le Conseil des normes éventuel, l'Association canadienne de normalisation, le rapport du *National Product Safety Council* des États-Unis. Nous avons toutes sortes de sources de renseignements quant aux produits à contrôler.

M. Foster: Allez-vous créer un comité...?

Le président: Nous en sommes aux pouvoirs des inspecteurs. L'article 4 porte sur les inspecteurs et analystes. Vous pourriez poser votre question de nouveau lors de l'étude de l'article 5 qui porte sur les pouvoirs des inspecteurs.

Est-ce qu'on adopte l'article 4. M. Yewchuk?

M. Yewchuk: A la section 4—alinéa 2, on dit:

Un inspecteur doit être pourvu d'un certificat de nomination...

De quoi s'agit-il?

M. Basford: Une carte d'identité, simplement.

M. Yewchuk: Ce n'est pas un mandat de perquisition?

M. Basford: Non.

M. Yewchuk: Est-ce que la question du mandat de perquisition tombe sous l'article 4 ou 5?

M. Basford: Je crois qu'elle figure à l'article 5, là où on discute des pouvoirs de l'inspecteur. Il s'agit simplement ici de la nomination de l'inspecteur et de sa carte d'identité.

M. Robinson: Je regrette devoir revenir à l'article 3, mais je voudrais un éclaircissement que je devrai demander plus tard si je ne puis l'obtenir maintenant.

Le président: Vous pourrez le demander lorsque nous reviendrons à l'article 1.

L'article 4 est adopté.

[Texte]

On Clause 5—Powers of inspectors.

Mr. Yewchuk: I would like to ask the Minister about search warrants.

The Chairman: On Clause 5, Mr. Yewchuk.

Mr. Yewchuk: It says here:

An inspector may at any reasonable time enter any place where on reasonable grounds...

What are reasonable grounds? What is reasonable time? And does he require a search warrant?

Mr. Basford: No, he does not. It reads:

An inspector may at any reasonable time enter any place where on reasonable grounds he believes any hazardous product is manufactured, prepared, preserved, packaged, sold or stored for sale...

which represents commercial premises. This Clause very closely resembles—it has not precisely the same wording but it closely resembles—the provisions contained in Part 2 of the Food and Drugs Act. The wording is materially the same and the practice will be the same.

Mr. Yewchuk: Does this mean only commercial premises? Or will he be able to enter private residences where such materials may be stored?

Mr. Basford: If they are stored in private

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residences, yes. What must be understood, I think, is that this is a measure for the public safety, as is the Food and Drugs Act, and this is the technique that the history of the Food and Drugs Act shows is a necessary power and a requisite power for the inspector.

Mr. Yewchuk: I certainly appreciate the fact that public safety has to be kept in mind, and that is the purpose of this Bill. But what about civil rights? I think even the R.C.M.P. cannot enter and search a place without a search warrant. An inspector with this power might walk up to your house any old time and come in and turn the place upside down without any forewarning.

Mr. Basford: Pardon me. I would like to correct one small answer I made. It does say, 'sold or stored for sale'. I think if it were in a private house it would have to be stored for sale, which turns the private house into a

[Interprétation]

Article 5—Pouvoirs des inspecteurs.

M. Yewchuk: Je voudrais interroger le ministre sur les mandats de perquisition.

Le président: Sur l'article 5, monsieur Yewchuk.

M. Yewchuk: On dit:

Un inspecteur peut, à tout moment raisonnable, entrer dans un lieu où il a des motifs raisonnables de croire...

Quels sont ces motifs raisonnables? Qu'est-ce qu'un moment raisonnable? Doit-il avoir un mandat de perquisition?

M. Basford: Non. On dit:

un inspecteur peut, à tout moment raisonnable, entrer dans un lieu où il a des motifs raisonnables de croire qu'un produit dangereux quelconque est fabriqué, préparé, conservé, emballé, vendu ou emmagasiné pour la vente...

Il s'agit de locaux commerciaux. Ce libellé ressemble beaucoup, en d'autres termes, aux dispositions de la Partie 2 de la Loi sur les aliments et drogues. La pratique sera la même.

M. Yewchuk: Il ne s'agit donc que de locaux commerciaux? Pourra-t-il s'introduire dans les résidences où l'on peut entreposer les produits?

M. Basford: S'ils sont entreposés dans des résidences privées, ce sera la même chose. Ce qu'il faut comprendre c'est que cette mesure est prise dans l'intérêt public, comme dans le cas de la Loi sur les aliments et drogues et l'expérience de l'application de cette Loi démontre que ces pouvoirs sont nécessaires.

M. Yewchuk: Oui, bien sûr. Je comprends qu'il faut penser à l'intérêt public, et c'est le but de ce projet de loi, mais il y a également une question des droits de l'homme. Je crois que même un membre de la Gendarmerie royale ne peut pas entrer dans un endroit sans un mandat de perquisition. Et, ici, vous avez des inspecteurs qui peuvent entrer n'importe où à n'importe quel moment et tout mettre en l'air!

M. Basford: J'aimerais faire une petite correction. Il est dit ici: «vendu ou emmagasiné par la vente». Si la marchandise est emmagasinée dans un domicile, il faudra que ce soit pour la vente, ce qui transforme automatique-

[Text]

commercial premise. It is designed really to deal with that person who is using his house as a commercial premise.

I might point out that, as I say, this wording closely resembles the powers of inspection under the Food and Drugs Act, and that has been in the Food and Drugs Act for a very long time. I just forget when the Food and Drugs Act was first passed. I am advised that there has never been a complaint received by the government or by the directorate with respect to an inspector under the Food and Drugs Act exceeding his authority or acting over-zealously.

Let us take something that is on the schedule, the jequirity beans. It is something that shows up on the market. From time to time it appears. The Food and Drug Directorate had a spate of these three years ago or so, and then just before Christmas some appeared again in some cities. The inspectors must move very quickly to locate these things and get them off the market.

You may have seen the action taken publicly. A press release is issued warning people about these things and the newspapers and radio stations give this quite considerable coverage and are very useful and very helpful. Speed is of the essence in trying to locate these things and get them off the market.

Mr. Yewchuk: Mr. Chairman, I am still concerned about the fact that an inspector can enter somebody's premises without forewarning and search it, and seize things, and so on. Would this be an appropriate time to move an amendment on this clause?

Mr. Robinson: Mr. Chairman, this is really no different from an inspector on the municipal level, a health inspector, a fire inspector, a zoning inspector, or a hydro inspector. These inspectors can come in any time they want to, if they have any reasonable grounds at all for doing so. I do not see that there is anything different here. It is done all the time.

The Chairman: Are you through, Mr. Yewchuk?

Mr. Yewchuk: I asked a question, Mr. Chairman. I did not get an answer from you.

The Chairman: I did not hear your question.

Mr. Yewchuk: My question was, is this an appropriate time to move an amendment?

The Chairman: It is up to you.

[Interpretation]

ment le domicile en un local commercial. La Loi doit couvrir ce genre de cas.

Comme je l'ai dit, ce libellé ressemble beaucoup aux pouvoirs d'inspection qui ont été prévus dans la *Loi sur les aliments et drogues*, et cela depuis très longtemps. Je ne me souviens plus quand cette Loi a été adoptée, mais il n'y a jamais eu de plaintes faites à l'État ou à la Direction, concernant le fait qu'un inspecteur ait dépassé les limites de ses pouvoirs.

Prenons un cas qui figure à l'annexe, par exemple, les graines de *jequirity*, qui paraissent sur le marché de temps à autre. La Direction des aliments et drogues en a été inondée il y a trois ans et puis d'autres un peu avant Noël. Les inspecteurs doivent faire vite pour les trouver et les retirer du marché. Il faut prévenir les gens; on le fait au moyen de la presse, de la radio et tout cela est très utile. La rapidité est essentielle pour trouver ces produits et les retirer du marché.

M. Yewchuk: Je suis encore préoccupé, monsieur le président, par le fait que l'inspecteur puisse entrer dans les locaux sans préavis, perquisitionner, et ainsi de suite. Est-ce que l'on pourrait proposer un amendement à ce sujet en ce moment?

M. Robinson: Mais ces pouvoirs ne diffèrent pas de ceux des inspecteurs des incendies, des inspecteurs municipaux, de la santé, ou de l'électricité. N'importe quel inspecteur peut toujours entrer chez des gens s'ils ont des motifs raisonnables de croire qu'il y a un danger. C'est une chose qui se fait continuellement.

Le président: Avez-vous fini monsieur Yewchuk?

M. Yewchuk: J'ai posé une question, monsieur le président, et je n'ai pas encore eu de réponse.

Le président: Je n'ai pas entendu votre question.

M. Yewchuk: Est-ce que le moment est opportun pour proposer un amendement?

Le président: Vous êtes libre de le faire.

[Texte]

Mr. Yewchuk: I would like to move that Clause 5, under Subclause (1)...

The Chairman: You had better put that in writing. Shall we stand Clause 5, Subclause (6)? Is that under Subclause (6)?

Mr. Yewchuk: It is Clause 5, Subclause (1).

The Chairman: Shall we stand Clause 5, Subclause (1), and come back to it later?

• 2100

Some hon. Members: Agreed.

On clause 6—Application for restoration.

Mr. Basford: There is the point, Mr. Chairman, that Mr. Robinson raised about the meaning of magistrate. I am in the hands of the Department of Justice. This is their work. All I can say is I will make inquiries of the Department of Justice to see whether there should be a further definition of magistrate provided to take account of the Quebec and Ontario situation. If it should be needed I, of course, would make that amendment.

The Chairman: Shall Clause 6(3) carry?

Mr. Howe: I was going to ask one question on Clause 6 having to do with the disposal of things that are seized. It says they are to

...be delivered to the Minister who may make such disposition thereof as he thinks fit.

Now what are you going to do with them, Mr. Minister?

Mr. Basford: Could I ask Dr. James to explain this. He has dealt with the Food and Drug Directorate procedures and there is a similarity here.

Dr. James: Mr. Chairman, when a product is found to be sufficiently hazardous to warrant complete prohibition, in the majority of instances it would merely have to be destroyed. For example, the disposition of jequirity beans is not a very real problem. The beans, if they are discovered, would be burned or otherwise disposed of. Now I think in other instances, for the second and third items on Part I of the Schedule, these items would simply not be permitted to be sold.

Children's furniture with a dangerous lead content would really have to be destroyed in some sense or refinished, but in their existing state they would be completely prohibited.

[Interprétation]

M. Yewchuk: J'aimerais proposer que l'article 5, alinéa 1...

Le président: Ce serait mieux de l'écrire.

Alors, nous pouvons réserver l'article 5, alinéa 6. Est-ce que c'est l'alinéa 6?

M. Yewchuk: Non, il s'agit plutôt de l'alinéa 1.

Le président: Alors nous allons réserver l'article 5, alinéa 1, et nous y reviendrons plus tard.

Des voix: D'accord.

L'article 6—Demande de restitution.

M. Basford: Monsieur le président, je pense que M. Robinson avait soulevé la question des magistrats. Je suis entre les mains du ministère de la Justice, c'est leur travail mais je ferai enquête auprès du ministère de la Justice pour savoir si on devrait donner une autre définition du mot «magistrat» dans le cas du Québec et de l'Ontario. S'il le faut, nous pourrions apporter un amendement.

Le président: L'article 6 (3) est-il adopté?

M. Howe: Il y a une question que je voulais poser au sujet de l'article 6. Il s'agit de ce qu'on fait des articles saisis.

Le bill dit que:

...la chose ainsi saisie doit être remise au Ministre, qui peut en disposer ainsi qu'il l'estime opportun.

Qu'allez-vous en faire, monsieur le ministre?

M. Basford: Puis-je demander au Dr James d'expliquer cela? C'est lui qui s'est occupé de la Direction des aliments et drogues, et il connaît leur procédure.

M. James: Monsieur le président, lorsqu'un produit est considéré assez dangereux pour être prohibé complètement, je pense que, dans la plupart des cas, il faut le détruire. Par exemple, lorsqu'il faut jeter des graines de jequirity, ce n'est pas un problème très grave. Il faut d'abord les trouver, puis les brûler ou les jeter. Je pense que dans d'autres cas, pour ce qui est des paragraphes 2 et 3, de la partie I de l'annexe, ces articles ne pourraient plus être vendus.

Les meubles d'enfants recouverts d'une matière dangereuse devraient être détruits ou refaits. Mais, ils seraient tout à fait défendus dans l'état où ils se trouvent.

[Text]

Mr. Howe: It says in Part II of the Schedule,

2. Cleansers for household use containing sodium hydroxide, potassium hydroxide, sodium bisulfate, hydrochloric acid or phosphoric acid.

Are these substances not used commercially in other manufacturing processes?

Dr. James: Mr. Chairman, for the items listed in Part II of the Schedule the question of disposition really does not arise in the normal course. The regulations for these products will in the majority of instances involve cautionary or warning labels. There is no implication, for example, that a household bleach is going to be prohibited from sale. The regulation is much more likely to require that it bear a warning to keep it out of the hands of children and possibly some information concerning the proper antidote to use if a child does accidentally swallow the material.

Mr. Howe: Of course the regulations will be drawn up in such a way as to designate the type of package or container that these things are put in, will they not?

Dr. James: This is quite possibly true.

Mr. Basford: The rights of the Minister are spelled out in subsections (4), (5) and (6). I must confess ignorance when it says,

...the Minister who may make such disposition thereof as he thinks fit.

Now if I end up with a carload of jequirity beans I quite frankly do not know what I would do, or the practice is, but I would see that they were disposed of. I must admit that I am not sure what the practice is.

Mr. Robinson: Should not Subsection (4) end the same way as Subsection (5) and Subsection (6) to be consistent—in other words have the end of each read:

...shall be disposed of as the Minister directs.

instead of, as in the case of Subsection (4):

...as he thinks fit.

Then add to that "as the Minister directs by regulation". Does that make sense?

The Chairman: Have you any comments, Mr. Basford?

• 2105

Mr. Robinson: Otherwise you would have a whole bunch of them in court.

[Interpretation]

M. Howe: A la partie II de l'annexe, on dit:

2. Agents de nettoyage, d'usage domestique, contenant de l'hydrate de soude, de l'hydroxyde de potassium, de sulfate de sodium, de l'acide chlorhydrique ou de l'acide phosphorique.

Ces produits sont utilisés dans la fabrication d'autres produits, n'est-ce pas?

M. James: Monsieur le président, pour ce qui est de la liste des produits mentionnés à la partie II de l'annexe, cette question de leur élimination ne se soulève pas dans le cours normal des choses. La réglementation de ces produits, dans la plupart des cas, implique des étiquettes d'avertissement. Par exemple, un agent de blanchiment ne sera pas interdit, mais il faut qu'il porte une étiquette pour qu'on ne le mette pas dans les mains des enfants, et aussi des renseignements sur les antidotes à utiliser, si un enfant en avale, par hasard.

M. Howe: Bien sûr, les règlements seront conçus pour désigner le genre d'emballage, ou de contenant, n'est-ce pas?

M. James: Oui, c'est probablement vrai.

M. Basford: Les pouvoirs du ministre sont précisés aux alinéas (4), (5) et (6). Mais, je ne comprends pas lorsqu'on dit:

...au Ministre, qui peut en disposer ainsi qu'il l'estime opportun.

Dans le cas des graines de *jequirity*, je ne saurais pas comment les détruire. Je dois avouer que je ne sais pas exactement de quoi il s'agit, comment on s'y prend pour les détruire.

M. Robinson: Dans les alinéas (4), (5) et (6), il faudrait que le libellé soit toujours le même. Autrement dit, il faudrait qu'ils se terminent tous par ces mots:

...il doit en être disposé ainsi que le ministre l'ordonne.

au lieu de dire, comme à l'alinéa (4):

...ainsi qu'il l'estime opportun.

Puis il faudrait ajouter: «conformément à la réglementation établie par le ministre». Est-ce que cela a du sens?

Le président: Avez-vous des commentaires à faire, monsieur Basford?

M. Robinson: Autrement, on en aurait beaucoup devant les tribunaux.

[Texte]

Mr. Basford: Except Sections 5 and 6 refer to those cases where the products is "forfeited to Her Majesty". Then I direct how it is disposed of. Subsection (4) is not dealing with forfeiture.

Mr. Robinson: No, but is there any reason that the same language would not apply?

Mr. Basford: No, but is there any reason that the language cannot be different?

Mr. Robinson: In the interest of consistency I would suggest that it should be the same.

Mr. Basford: Undoubtedly the draftsmen in the Department of Justice had reasons for a slightly different wording there, which escapes me. Quite frankly, I do not see any reason for not leaving them.

Mr. Robinson: Then should we not add the two words "by regulation"?

The Chairman: You are proposing an amendment?

Mr. Basford: No. I am sure there are procedures covering disposition of property forfeited to the Crown. If you mean by "regulation" regulations governing each case, I think that would be an impossible situation.

If I got some mislabelled cans of bleaches are you suggesting I would have to pass some regulations to dispose of them. I am quite sure there are procedures, but I must confess am ignorant of them. But for property forfeited to the Crown there are procedures for disposition. It happens all the time. Liquor and all sorts of things are forfeited to the Crown.

Mr. Robinson: Well they just drink the liquor and they destroy the other items, is that it? I think we should be specific about this and not leave it up in the air. If you are making regulations under the Act then why not indicate here how it is to be disposed of.

Mr. Basford: But the method of disposal would vary. In one case you would burn them, in another case you would flush them down the sink, and in another you would bury them.

Mr. Robinson: But would there not have to be some regulations?

Mr. Basford: If I were to take them, go home and sell them, I do not think I would be a Minister very long—if that is what you are worried about.

The Chairman: Shall Clause 6 carry?

[Interprétation]

M. Basford: Les articles 5 et 6 parlent de cas où les produits sont «confisqués au profit de Sa Majesté». Comment les élimine-t-on? L'alinéa (4) ne parle pas de confiscation.

M. Robinson: Alors, je ne vois pas pourquoi on ne le rédigerait pas de la même façon?

M. Basford: Mais, peut-être qu'on peut le rédiger de façon différente, n'est-ce pas?

M. Robinson: Pour des raisons d'uniformité, cela devrait être la même chose.

M. Basford: Sans aucun doute, le rédacteur avait probablement des raisons pour le faire de cette façon-là, mais je ne vois pas pourquoi on ne le laisserait pas comme cela.

M. Robinson: Ne devrait-on pas ajouter les deux mots «par réglementation»?

Le président: Proposez-vous un amendement?

M. Basford: Non, il y a des procédures qui prévoient les dispositions à prendre pour les objets confisqués au profit de la Couronne. Si vous voulez dire des règlements dans chaque cas, je pense que ce serait une situation impossible. Si j'ai des agents de blanchiment qui sont mal étiquetés, eh bien, je ne vois pas ce qu'on peut faire. Il y a des procédures et je dois avouer que je les ignore, mais, pour les objets confisqués au profit de la Couronne, il y a des dispositions qui prévoient leur destruction, par exemple, comme pour l'alcool et autres produits.

M. Robinson: On peut boire l'alcool et détruire la bouteille, n'est-ce pas? Je pense qu'il faut être plus précis. S'il y a des règlements, eh bien, je pense qu'on pourrait les indiquer ici, indiquer comment on détruirait ces produits.

M. Basford: Les méthodes varient. Dans certains cas, on peut les brûler, dans d'autres les enterrer, dans d'autres les verser dans le lavabo, etc.

M. Robinson: Mais ne devrait-il pas y avoir des règlements?

M. Basford: Si je les apportais à la maison et si je les revendais, je ne pense pas que je garderais mon poste pendant bien longtemps.

Le président: L'article 6 est-il adopté?

[Text]

Mr. Howe: I have one question, sir. Is there any recompense made to the person that has these products? He may not know or have realized that these products were hazardous.

The Chairman: Would you repeat your question, Mr. Howe.

Mr. Howe: In respect of these products that are seized, is there any payment made to the merchant who may have had these things on his shelf, not knowing that they were hazardous?

Mr. Basford: No.

Mr. Howe: I am thinking of a situation where somebody might sell a merchant jequirity beans, he thought they were a good product, a saleable item, and did not know that they were dangerous. In such a case are you saying he would have no recourse?

Mr. Basford: He could take civil action against the person who sold them but he could not ask the Crown to reimburse him for his products that were on the market illegally. You know, if the police go out and seize five cases of liquor from a bootlegger, the bootlegger is not entitled to payment for the liquor.

Mr. Howe: But a manufacturer might come up with a product that he devised through chemical research and he puts it on the market—bleaches, soaps or things like that. Does he have to submit a formula to the government before he can put these on the market?

• 2110

Mr. Basford: Oh no, but you can rest assured, Mr. Howe, that the manufacturer would know the regulations under this Act. For example, the association I mentioned, the Canadian Manufacturers of Chemical Specialties, already have a code dealing with their members and most of their members follow the code pretty well.

There are some manufacturers who are not members. But I think you can rest assured they would know these regulations completely and in manufacturing a new product would make sure that the product was within the regulations; that is, had a certain percentage of chlorine, for example, and therefore was hazardous and included in the schedule.

They would make sure that it was properly labeled and they would not go out and sell carload lots of some new toilet bowl cleanser without making sure it was within the regulations. In the event that they did, and we will say it had to be seized all through the

[Interpretation]

M. Howe: J'ai une question à poser, Monsieur. Y a-t-il une récompense pour les personnes qui possèdent de tels produits? Elles ne savent peut-être pas que ces produits sont dangereux.

Le président: Voulez-vous répéter votre question, Monsieur Howe?

M. Howe: Pour ce qui est des produits qui sont confisqués, est-ce qu'on rembourse le marchand qui les a sur ses étagères, sans même savoir qu'il s'agit de produits dangereux?

M. Basford: Non.

M. Howe: Je pense, par exemple, au marchand qui vendrait des graines de jequirity ou autres choses, tout en ignorant qu'il s'agit de produits dangereux. Il n'aurait alors aucun recours, n'est-ce pas?

M. Basford: Oui. Il pourrait tenter une action au civil contre la personne qui lui aurait vendu ces produits, mais il ne pourrait pas se faire rembourser par la Couronne, pour les produits qui étaient sur le marché de façon illégale. Par exemple, si vous obtenez de l'alcool d'un intermédiaire et que la police le saisit, on ne vous rembourse pas.

M. Howe: Mais un fabricant peut mettre sur le marché un produit pour lequel il a fait des recherches, par exemple, agents de blanchiment, savons, etc. Doit-il soumettre les formules au gouvernement avant de le mettre en marché?

M. Basford: Non. Mais vous pouvez être sûr que le fabricant connaît les règlements. Par exemple, l'association des fabricants de produits chimiques, a déjà un code pour ses membres et les membres sont tenus de suivre le code.

Certains fabricants ne sont pas membres. Mais vous pouvez être sûrs qu'ils connaissent les Règlements, qu'ils connaissent tous les articles des règlements et lorsqu'ils fabriquent de nouveaux produits ils s'assurent que le produit contient tel ou tel pourcentage de chlore, par exemple, et s'il est dangereux ils savent que c'est inclus dans l'annexe.

Ils s'assurent qu'ils sont correctement étiquetés. Ils ne vendraient pas, par exemple, des produits sans être sûrs qu'ils sont conformes aux règlements, car dans un tel cas, il faudrait les confisquer dans tous les supermarchés du Canada. Et ensuite je pense que

[Texte]

supermarkets of Canada, they would soon have a pretty good right of action against whoever manufactured it.

Mr. Yewchuk: I have just one short question for clarification, Mr. Chairman. Is every person who is found in possession of hazardous products going to be prosecuted after they are seized, whether he knows they are hazardous or not?

Mr. Basford: Not necessarily, but that really is a question for the Department of Justice, which is in charge of prosecutions. Let us take the case of jequirity beans. If your wife goes to the West Indies and comes back with a jequirity bean-brooch, no one is going to prosecute her. The concern is to get it out of circulation.

Mr. Yewchuk: What about comparison of seizing alcohol from a bootlegger—but this is a little different situation actually. To pursue Mr. Howe's question of reimbursement to people who possess these things let us assume that an importer did import some materials that are hazardous without knowing it. He may have made a substantial investment. That is a different situation than a bootlegger who knows he is breaking a law.

Mr. Basford: Well, all right, let us take some other examples now, ones the Department of Health and Welfare has had to deal with. My part of this program is mainly consumer protection and does not involve the Health and Welfare aspect of it. Let us take as an example Hong Kong iceballs, these artificial icecubes that you put in your refrigerator. When they are frozen you use them in your drinks and you can use them over and over again.

A quantity of these came in from Hong Kong and the fluid in them was highly contaminated and very dangerous. The Department of Health and Welfare has no legislative authority until such time as an act like this is passed. I am not with the Department so I cannot give you precisely their procedures, but they contacted the provincial departments of health right away, they issued a press release and made a statement right away about these things, and located them on the market and got them off the market—and they had to be got off the market.

With all due respect, if someone has a product such as that on the market that is highly contaminated I hardly see the obligation on the taxpayer to reimburse him. He has a right

[Interprétation]

le gouvernement aurait le droit de poursuivre les fabricants.

Mr. Yewchuk: Pouvez-vous me permettre de poser une petite question, monsieur le président. Est-ce que toutes les personnes qui ont des produits dangereux en main, seront poursuivis après la saisie de ces produits, qu'ils le sachent ou non qu'il s'agissait de produits dangereux?

Mr. Basford: Non, pas nécessairement. Cette question relève plutôt du ministère de la Justice qui s'occupe d'intenter les poursuites. Prenons le cas des pois d'Amérique (jequirity) par exemple. Votre femme revient des Antilles avec un collier ou une broche en pois d'Amérique et bien, personne ne peut la poursuivre. Il s'agit tout simplement que ces fèves soient mises hors de marché.

Mr. Yewchuk: Vous avez comparé cela à l'alcool saisi chez un bouilleur de crûs. Est-ce qu'on rembourse les gens qui sont en possession de ces produits. Disons, par exemple, que l'importateur fait entrer au pays des produits dangereux, sans le savoir, et qu'il a investi une forte somme, ce n'est quand même pas du tout la même chose que le bouilleur de crûs qui sait très bien qu'il enfreint la loi.

Mr. Basford: Il y a toutes sortes d'exemples, des exemples que l'on peut tirer du ministère de la Santé et du Bien-être, ici je m'occupe de la protection du consommateur et non pas de la Santé et du Bien-être. Il y a des produits, par exemple, les cubes de glace artificielle importés de Hong-Kong que vous mettez dans le réfrigérateur et une fois congelés vous les mettez dans les consommations, vous pouvez vous en servir à maintes reprises.

On en a importé de Hong-Kong, et le liquide qu'ils contenaient était fortement contaminé, ces cubes étaient dangereux et le ministère de la Santé n'avait aucune autorité pour les saisir tant qu'il n'y aura pas de loi comme celle-ci. Le ministère a alors émis des communiqués et a saisi de la chose les ministères provinciaux de la santé. Les cubes défectueux ont été localisés sur le marché, on les a saisis. Et, en toute déférence, si on a des produits comme ceux-là sur le marché qui sont hautement contaminés, je ne vois pas pourquoi les contribuables les rembourseraient. Les importateurs peuvent intenter une poursuite auprès de celui qui leur a vendu les produits, mais je ne vois pas pourquoi l'État rembourserait.

[Text]

of action against from whom he bought them, but I question whether it is an obligation of the taxpayers to reimburse him.

Mr. Yewchuk: I agree with the idea that these products should be removed, but I also wonder whether they should not be checked before they are distributed for sale to wholesalers and retailers. There is some responsibility there, I think.

• 2115

Mr. Basford: All right. You could say that, but it would involve us in a procedure by which a product could not be put on the market until it had gone through some governmental inspection process, and if you are raising questions about the size of my estimates now, you would be going through the roof if I had to set up that sort of organization.

A much cheaper procedure, but I think equally effective, is to lay down some standards by legislation and regulation with a body of inspectors to enforce that legislation, rather than setting up a huge machinery to inspect and put a seal of approval on everything before it is sold.

The inspectors are not restricted solely to dealing with the retailer. If some distributor is sitting with a warehouse full of something that has been deemed a hazardous product and declared such, the inspector can deal with that warehouse.

Mr. Benjamin: Mr. Chairman, if I may pursue this point with the Minister I think I agree that where something has already been declared illegal because it is a hazardous product and subsequently someone has some inventory seized, whether it is a retailer or a wholesaler he cannot expect compensation from the Crown.

However, does the Minister foresee any possibility of a new product being marketed that on the surface and after some initial examination does not seem to be hazardous, but in a matter of weeks is found to be hazardous? Retailers could have laid in an inventory. If they stock this before the hazard has been found, do you not then have an opposite situation? Could you not see that there is some danger of this happening and there really is no recourse by the retailer to the manufacturer or the distributor?

Mr. Basford: That depends on the kind of products we are dealing with. This legislation was originally put forward, as you know, by the Department of Health and Welfare but it had a somewhat more restricted meaning for

[Interpretation]

M. Yewchuk: Je sais que les produits devraient être saisis, mais je me demande aussi si ces produits ne pourraient pas être vérifiés avant d'être remis aux grossistes et aux détaillants. Il y a là, il me semble, un point de responsabilité.

M. Basford: Je suis d'accord, mais il faut une procédure disant qu'un produit ne peut être mis sur le marché tant qu'il n'aura pas été vérifié par le gouvernement. Et si vous vous posez des questions sur mes crédits, et bien, vous sauteriez au plafond si je créais une organisation de ce genre pour tout vérifier. Il y a une procédure beaucoup moins coûteuse et tout aussi efficace, il nous faut établir des normes dans la loi et un organisme d'inspecteurs qui peuvent appliquer la loi au lieu d'avoir une machinerie énorme pour approuver tout ce qui se fabrique. Les inspecteurs se limitent aux détaillants. Si un grossiste a un entrepôt rempli de produits dangereux, l'inspecteur peut s'occuper de cet entrepôt.

M. Benjamin: Monsieur le président, je suis d'accord lorsqu'un produit a déjà été déclaré illégal, parce qu'il est dangereux et qu'ensuite les stocks soient saisis, que la victime soit un distributeur ou un vendeur, cela ne fait pas de différence, mais le ministre songe-t-il, par exemple, à un nouveau produit, qui à première vue, ne semble pas dangereux, qui est mis sur le marché et dont les détaillants pourraient en avoir un stock et après quelques semaines on découvre que ce produit est dangereux. Si le vendeur au détail l'a acheté avant qu'on prouve qu'il soit dangereux, n'avez-vous pas là le contraire de la situation du débat, il n'a pas de recours, il ne peut prendre des mesures pour poursuivre le fabricant distributeur.

M. Basford: Cela dépend du genre de produit. Ce projet de loi avait d'abord été présenté par le ministère de la Santé nationale et du Bien-être social et l'expression «produits dangereux» couvrirait beaucoup moins de pro-

[Texte]

hazardous products than the present legislation. It was put forward purely as a public health measure because the Department of Health and Welfare had found that from a health point of view the Food and Drugs Act was not sufficient to deal with the multiplicity of products coming on to the market.

If something is clearly a hazard to health the Department of Health and Welfare, which has rights under this act also as you have noticed, have to move very, very quickly and seize those things and get them off the market. For other consumer products, the ones that really fall within my Department's concern, we will be drawing regulations and standards after talking to manufacturers, and developing standards in association with the Standards Council or the Standards Branch or the Standards Association and I do not see that problem arising.

Let us take lifebelts as an example, to which we have given some thought. They are partially regulated now by the Department of Transport. They have developed a standard for life preservers and their regulations require that in powerboats you have to have a certain size, and so on. You have to have approved life preservers, but there is nothing to stop manufacturers from making nonstandard life preservers and, in fact, you can go into most stores and buy two kinds of life preservers: those that are Department of Transport approved and those that are not, which I think is really a rather ridiculous situation.

Well, we will be talking to the manufacturers and when we come to regulate life preservers we will establish a standard for them which will then apply to all life preservers.

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Mr. Benjamin: I think life preservers is a good example. I have seen the two kinds you mentioned, but what would you do...

Mr. Basford: I found last summer that there are three kinds, because there is one that is approved by workmen's compensation boards and by nobody else.

Mr. Benjamin: In the event of regulations coming in, would you not almost need to seize the unapproved, substandards or improper life preservers still in stock amongst retailers? And if you did this, what would the retailer do in such cases? He could not very well sue his manufacturer or supplier because they had not beforehand been declared a hazardous product, or regulated.

[Interprétation]

duits et c'était tout simplement une mesure d'hygiène publique, parce que le ministère de la Santé et du Bien-être s'était rendu compte qu'au point de vue de la santé, la loi sur les Aliments et Drogues n'était pas assez complète pour couvrir la multiplicité des produits mis sur le marché.

Si quelque chose nuit vraiment à la santé, le ministère de la Santé et du Bien-être doit agir très rapidement, et saisir les produits. Et vis-à-vis d'autres produits, les produits qui intéressent mon ministère, nous élaborons des règlements et des normes après avoir parlé à des fabricants et après avoir mis les normes au point avec le Conseil des normes ou la Division des normes ou encore l'Association des normes, et je ne pense pas que ces difficultés soient soulevées.

Prenez, par exemple, les ceintures de sauvetage: si j'ai bien compris, elles sont partiellement réglementées par le ministère des Transports. Le ministère des Transports possède des normes pour les bouées de sauvetage, et dans les embarcations à moteur il y a des règlements, il faut des gilets de sauvetage approuvés mais les fabricants fabriquent encore des gilets de sauvetage non-approuvés et, en fait, on peut dans les magasins acheter deux types de gilets de sauvetage, ceux qui sont approuvés et ceux qui ne le sont pas. Et cela me paraît une situation fort ridicule. Nous en discuterons avec les fabricants lorsque nous réglerons les gilets de sauvetage, nous aurons des normes qui devront s'appliquer à tous les gilets de sauvetage sans exception.

M. Benjamin: Alors que faites-vous dans ce cas? J'ai vu les deux genres de gilets de sauvetage.

M. Basford: Il y en a trois sortes; celles dont nous venons de parler et une troisième sorte approuvée par la Commission des accidents de travail.

M. Benjamin: S'il y avait un règlement, ne seriez-vous pas tenus de confisquer les gilets de sauvetage qui ne sont pas approuvés, sont inférieurs ou ne sont pas satisfaisants. Et dans ce cas, que ferait le vendeur de détail? Il ne pourrait tout de même pas poursuivre le fabricant ou le fournisseur parce que ces gilets n'avaient pas été déclarés dangereux plus tôt, et n'avaient pas fait l'objet d'un règlement.

[Text]

Mr. Basford: I think that our process of consultation avoids that. First, it takes some time and, in the meantime, industry would have gained an idea of what we are doing and what we are thinking. It also raises a question of policy—that as of a certain date this regulation will be enforced. If the situation you have outlined indicates that there will be major problems we could set a date for the enforcement of the regulations.

Mr. Benjamin: Then you would be giving the retailer sufficient time to sell a life preserver that might not save a life.

Mr. Basford: All right, what should we do? I ask you?

Mr. Benjamin: Once in a while you are going to run into an...

The Chairman: Order please. Mr. Benjamin, I would ask you to adhere to the discussion on life preservers or life savers.

Mrs. MacInnis (Vancouver-Kingsway): May I ask whether clause 9 has any bearing on the type of a situation that is being raised.

Mr. Basford: No, not really, Mrs. MacInnis, because Clause 9 deals with whether it should be a hazardous product.

The Chairman: Are you jumping ahead, Mrs. MacInnis?

Mrs. MacInnis (Vancouver-Kingsway): No, I was just inquiring whether this had any bearing on the situation that had been discussed. If it has not, we will leave it.

Mr. Paproski: I have a question under "compensation". Instances have happened where some Japanese products have come into Canada, have been taken off the market and then it is found out after that there was nothing really seriously wrong with them. This has really been quite a burden for some. I cannot really give names at this time but I know that this has happened.

I think that you probably, Mr. Minister, might be aware of it more than I am because of your position of knowing when these imports are coming in. I think it is unfair that something like this should happen and they are not compensated for it. Are you saying point-blank that there is no way that these people can recover anything once you have confiscated it?

[Interpretation]

M. Basford: Je pense que nos mécanismes de consultation permettent d'éviter ce genre de situation. D'abord, cela prend du temps, qui permet à l'industrie de se faire une idée de ce que nous faisons et de ce que nous pensons. Il y a aussi une question de politique, on décide que tel règlement entrera en vigueur à telle date. Si la situation que vous avez mentionnée donne à penser qu'il va y avoir des problèmes graves, nous pourrions fixer une date pour l'entrée en vigueur du règlement.

M. Benjamin: Cela donnerait au vendeur le détail le temps de vendre un gilet de sauvetage qui pourrait ne pas sauver la vie.

M. Basford: Bon, que faudrait-il faire alors? Je vous le demande.

M. Benjamin: A l'occasion, vous allez vous heurter à...

Le président: A l'ordre, s'il vous plaît. Monsieur Benjamin, je vous demanderai de vous en tenir à la question des gilets de sauvetage.

Mme MacInnis (Vancouver-Kingsway): Puis-je demander si l'article 9 vise le genre de situation dont nous parlons?

M. Basford: Non, pas vraiment, madame MacInnis, car à l'article 9, on parle de ce qui devrait être considéré comme produit dangereux.

Le président: Est-ce que vous sautez les ponts, madame MacInnis?

Mme MacInnis (Vancouver-Kingsway): Non, je voulais simplement savoir si cela se rapportait à la situation dont nous parlons. Sinon, nous laisserons cela de côté.

M. Paproski: Je voudrais poser une question relative aux compensations. Il y a eu le cas de produits japonais qui ont été importés au Canada et que l'on a retirés du marché pour découvrir ensuite qu'il n'y avait rien de vraiment grave. Cela a été pour certains un fardeau assez considérable. Je ne peux pas vous citer de noms pour le moment, mais je sais que la chose s'est produite.

Peut-être, monsieur le ministre, seriez-vous mieux au courant que moi, car vous êtes bien placé pour savoir quand les importations entrent dans le pays. J'estime qu'il est injuste que des choses de ce genre puissent se produire sans que les gens ne reçoivent de compensation. Dites-vous catégoriquement que les gens ne peuvent rien récupérer une fois qu'un produit a été confisqué?

[Texte]

Mr. Basford: If a product is seized and it turns out not to be a hazardous product they have a right to restoration.

Mr. Paproski: But restoration to what extent, sir? A person could bring something in at the first of the year but after the Board of Review takes four or five months to rule on it somebody else could have come in with a secondary item and taken all the sales. To what extent do you go so far as compensation is concerned.

Mr. Basford: There is no provision for compensation.

Mr. Paproski: But are you reviewing this type of thing? This is very important. Do you have carte blanche to take anything off the market that you think is hazardous?

Mr. Basford: No, I have not. I have authority...

Mr. Paproski: Your order in council.

Mr. Basford: ...to take off the market anything regulated and not complying with the regulations made under the schedule.

Mr. Paproski: How do you know whether a certain thing is a hazardous product? You take it off the market but how do you know it is hazardous?

The Chairman: Mr. Paproski, if you look at page 11 of the Schedule, Part I and Part II the products that we are dealing with are all listed there.

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Mr. Paproski: Mr. Chairman and Mr. Minister, I am not concerned about that at his time. We are talking about compensation; we are not talking about the products that go into this thing. This is a separate item altogether. The Minister and his colleagues have said that there is some way that these people can be compensated after they have lost maybe a three or four month period of sales. There is nothing here that says that they are going to do it. Maybe you have an answer for us now.

Mr. Basford: First, the only products we will be dealing with are products that we believe are covered by the regulations made proposed under this act. My inspectors cannot go along, seize something, and say, "We think that is a hazardous product". It has to be hazardous within the regulations, which are known to manufacturers. I can assure you of that. So this is not a carte blanche for the

[Interprétation]

M. Basford: Si un produit est saisi et que l'on découvre ensuite qu'il n'est pas dangereux, les gens ont le droit de le récupérer.

M. Paproski: Mais le récupérer dans quelle mesure, monsieur? Par exemple, quelqu'un pourrait importer un produit au début de l'année, mais, après les quatre ou cinq mois nécessaires à la Commission d'examen pour prendre une décision, quelqu'un d'autre pourrait avoir introduit un produit secondaire et accaparé toutes les ventes. Jusqu'à quel point accordez-vous des compensations?

M. Basford: Il n'y a pas de disposition relative aux compensations.

M. Paproski: Mais examinez-vous cette question très importante? Avez-vous carte blanche pour retirer du marché tout produit que vous pensez être dangereux?

M. Basford: Non. J'ai seulement pouvoir...

M. Paproski: Par arrêté ministériel.

M. Basford: ...de retirer du marché tout produit réglementé qui n'est pas conforme aux règlements établis dans l'annexe.

M. Paproski: Comment savez-vous si un produit est dangereux ou non? Vous le retirez du marché, mais comment savez-vous s'il est dangereux?

Le président: Monsieur Paproski, si vous regardez à la page 11 de l'annexe, dans les parties I et II, vous verrez une liste de tous les produits dont nous nous occupons.

M. Paproski: Monsieur le président, monsieur le ministre, ce n'est pas cela qui me préoccupe pour le moment. Nous parlons des compensations, et non des produits visés. C'est une question tout à fait distincte. Le Ministre et ses collègues ont dit qu'il y avait moyen de compenser ces gens pour leurs pertes, qui peuvent consister en trois ou quatre mois de vente perdus. Mais il n'y a rien ici qui dise qu'on le fera. Vous pouvez peut-être répondre à cela.

M. Basford: D'abord, les seuls produits dont nous nous occuperons seront ceux qui, à notre avis, sont visés par les règlements établis par la loi proposée ici. Mes inspecteurs ne peuvent pas, par exemple, aller confisquer un produit en disant simplement qu'ils le considèrent comme dangereux. Il faut que le produit soit établi comme dangereux par les règlements, dont les fabricants ont connais-

[Text]

minister or the inspector to go around and seize anything that he thinks is hazardous. It has to be within the regulations, or have to believe it is covered by the regulations. Now if we as a department seize something that we believe is covered by the regulations and the owner thereof does not think we have that right, he has his remedies in court.

The same situation holds in the case of someone importing a whole shipment of Australian beef stew. If the Food and Drug Directorate, under existing legislation, thinks that this shipment does not meet our standards in Canada, it can put it under seizure so they cannot sell it, and in many cases it is disposed of. But if the importer of that Australian canned stew thinks that it does meet the standards of the Canadian regulations, he has his remedies under that Act. I have worked in animal institutions where the principal food fed to animals were products bought which were being disposed of because they were not fit for human consumption—although they had been imported for human consumption.

Mr. Paproski: I want to bring up this matter where the lead content of paint is thought to be at the poisonous level—it could be or it could not be. Suppose an importer brings in a shipment of furniture which could be obsolete in two or three months—I am thinking of a fast selling item such as lawn furniture, for example—and he wants to market it before the summer season. However, if you seize his product from Japan, Hong Kong or wherever it comes from, not knowing yet whether or not it is hazardous because you have not the staff to go right ahead and prove it, what sort of sum do you give such a person?

Mr. Basford: You say we just go in and seize it. That is not quite what happens. Suppose someone has imported from Japan a shipment of children's cribs painted with a very high lead content paint. You ask how we know these cribs are painted with a high lead content paint. The answer is that we would analyse the paint before we seized them. We would not go out and just seize them. We would seize them because we had information that they were painted with a high lead content paint. An analysis would have been conducted.

Now if the chemist goofed or we acted in an arbitrary manner, the owner of the product has his remedies under this act—he can

[Interpretation]

sance. Je peux vous l'assurer. Cela ne donne donc pas carte blanche au ministre ou à l'inspecteur pour aller confisquer tout produit qu'il leur semble dangereux. Il faut que le produit soit visé par les règlements, ou, du moins, que nous pensions qu'il l'est. Si le ministre saisit un produit, qui, à son avis, est visé par le règlement, et que le propriétaire ne pense pas que le ministère ait ce droit, il peut en faire appel aux tribunaux.

Il en est de même, par exemple, si quelqu'un importe toute une cargaison de ragoût de bœuf australien. Si la Direction des aliments et drogues, en vertu de la loi actuelle décide que cette cargaison ne satisfait pas les normes canadiennes, on saisit le produit pour qu'il ne puisse être vendu et, bien souvent, on s'en débarrasse. Mais si l'importateur de ce ragoût australien en boîte pense que le produit satisfait les normes canadiennes, cette Loi lui donne un recours. J'ai travaillé dans des établissements pour les animaux où ces derniers étaient essentiellement nourris avec des produits achetés dont on avait voulu se débarrasser parce qu'ils n'étaient pas propres à la consommation humaine—alors qu'ils avaient été importés dans ce but.

M. Paproski: J'aimerais soulever la question de la peinture dont on considère que la teneur en plomb atteint un niveau tel qu'elle pourrait constituer un poison; cela peut être vrai ou non. Prenons le cas d'un importateur qui ferait venir une cargaison de meubles qui pourraient n'être plus de saison après deux ou trois mois—je pense aux articles qui se vendent rapidement, comme les meubles de jardin—et qui veut vendre ces meubles avant l'été. Si vous confisquez ces meubles, qu'ils viennent de Hong Kong, du Japon, ou d'ailleurs, sans savoir s'ils sont dangereux ou non, étant donné que vous ne disposez pas du personnel nécessaire pour le prouver immédiatement, quel est le montant de la compensation que vous accordez à l'importateur?

M. Basford: Vous dites que nous confisquons automatiquement la cargaison. Ce n'est pas vraiment le cas. Supposons que quelqu'un importe du Japon une cargaison de lits d'enfant peints avec une peinture à forte teneur de plomb. Vous demandez comment nous savons que la peinture utilisée a une forte teneur en plomb. Nous analyserions la peinture avant de confisquer la cargaison. Nous ne nous contenterions pas de la confisquer automatiquement. Nous ne la confisquerions que si nous savions que la peinture utilisée avait une forte teneur en plomb. Nous procéderions tout d'abord à une analyse. Si le chimiste avait fait une erreur, ou si nous avions agi de façon arbitraire, le propriétaire de la cargai-

[Texte]

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apply for restoration. You know, too, we live in a political system, and if the Minister is not living up to the responsibilities of his position, the owner has the right to contact someone in the opposition.

Mr. Paproski: I thank you, and I yield.

The Chairman: Mr. Benjamin.

Mr. Benjamin: Mr. Chairman, I agree with the Minister where there are regulations already laid down, whether with regard to lead paint or anything else. I quite agree with him. The only thing I was referring to was the interim period, the first year or two or three during which this act is being enforced more and more. I am referring to new products for which there is no regulation, for which there is already an inventory. In complete innocence, a wholesaler or a retailer may have stocked something and a new regulation is devised after he has stocked it. He really does not have any recourse then, does he?

Mr. Basford: I think you have really two situations, depending on the kind of product. If it is a product that is a hazard to health, and demonstrably a hazard to health, I do not think that those responsible for the health of the public have any alternative but to act quickly and rather vigorously.

Mr. Benjamin: I agree.

Mr. Basford: And I would hope that they would act that way. If it is some manufacturing firm for whom we are trying to establish standards, I think we are going to have to deal with industry, with the standards groups that I have mentioned, in developing those. And I think it is a very long process to allow a change in manufacturing patterns.

The Chairman: Mr. Paproski?

Mr. Paproski: Mr. Chairman and Mr. Minister, you have here what is called destruction with consent. You seize it and you tell the person he has signed his life away because if we find anything wrong with it, we burn it. We do not get a chance to look at it. This is destruction by consent. You are seizing the thing and he has to sign his life away because this is the situation. You are going to burn that stuff, and there is no way he can prove whether there was, in that particular shipment of furniture, anything seriously wrong. You have burnt it. What happens then?

[Interprétation]

son aurait des recours, et pourrait, en vertu de la loi, demander qu'on lui rende sa cargaison. Vous savez, nous vivons dans un régime politique qui fait que, si le ministre n'est pas à la hauteur de sa charge, le propriétaire peut toujours s'adresser à l'opposition.

M. Paproski: Je vous remercie, et j'abandonne.

Le président: Monsieur Benjamin.

M. Benjamin: Moi, je suis d'accord avec le ministre, qu'il s'agisse de peinture de plomb ou autre chose. Tout ce dont je voulais parler c'est de cette période d'un, deux ou trois ans, après l'entrée en vigueur de la loi. Je songe à ces nouveaux produits qui ne sont pas réglementés et qui sont déjà sur le marché. Bien innocemment, un marchand peut posséder de ces produits avant l'adoption de la loi. Que peut-il faire?

M. Basford: Cela dépend du produit. Si le produit est dangereux pour la santé, et qu'on peut le prouver, je ne crois pas que ceux qui sont responsables de la santé publique n'ont d'autre choix que d'agir avec célérité et vigueur.

M. Benjamin: Je suis d'accord.

M. Basford: Et j'espère qu'ils le feront. S'il s'agit d'une entreprise pour laquelle nous tentons d'établir des normes, il nous faudra travailler de pair avec l'industrie pour les établir. Il faut du temps pour modifier les procédés de fabrication.

Le président: Monsieur Paproski.

M. Paproski: Il s'agit de destruction consentie. Vous saisissez un produit et dites à son propriétaire qu'il est cuit, car si le produit est défectueux il sera détruit. Vous saisissez le produit et il ne peut rien y faire. Vous le brûlez sans qu'il puisse prouver qu'il n'y avait rien de mauvais dans ce produit puisque tout aura été brûlé.

[Text]

Mr. Basford: No. I am subject to my officials correcting me, but section 5 refers to a conviction where someone has been convicted of an offence under section 3. The hazardous products that are seized upon conviction are forfeited to the Crown. But the procedures in many of these cases are that when the public health is involved, you are not rushing around getting convictions. You are trying to get the product off the market. And you show concern for the retailer.

If something is a hazardous product, the retailer does not want it either, and the department is not interested in getting that person into court if he has these products innocently. So you get consent from him to destroy these things and they are destroyed and that is the end of the matter as far as that retailer is concerned. We are not interested in charging him; we are just interested in dealing with the hazardous product. Mind you, if we were to find that he knew that they were in violation of the Act, that he was knowingly violating the Act, then he would be charged. And there are a few persons around like that.

Mr. Paproski: I agree with you. I am only saying that it works both ways. There has to be some sort of protection for the person who sells these goods. If it is a hazardous product, it should be off the market before anything serious happens. I concur with your statements there. The only thing is that I was concerned about compensation. Some importers have had a problem. After a period of time they discover that the Department has found nothing really wrong with the product. But they did not want to take a chance, and that is why they took the stuff off the market.

The Chairman: Your ten minutes are up, Mr. Paproski.

Mrs. MacInnis (Vancouver-Kingsway): I think there is a point here that should be brought out. Are the goods analyzed first, or

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are they seized first? Mr. Paproski seems to think that the Department seizes the stuff first, and then proceeds to find out if it is dangerous. Do you seize the stuff first and then find out, or do you find out first if it is dangerous before you seize it? What is the procedure there?

Mr. Basford: Well, the procedure is that we would be acting on some information given to us by analysis. And after we have that, we would act on it.

Mr. Paproski: Why do you not seize cigarettes?

[Interpretation]

M. Basford: Non. Mes collègues me corrigeraient si nécessaire, mais l'article 5 parle des personnes trouvées coupables d'une infraction prévue à l'article 3. Les produits dangereux qui sont saisis sont remis à la Couronne. Mais s'il y va de la santé publique, il ne s'agit pas de perdre son temps à tenter d'obtenir des déclarations de culpabilité. Il s'agit de débarrasser le marché de ce produit.

D'ailleurs, s'il s'agit d'un produit dangereux, le détaillant n'en veut pas non plus. Nous ne voulons pas poursuivre quelqu'un qui a en toute innocence, acheté un produit qui était dangereux; cela ne nous intéresse pas. Nous voulons tout simplement nous débarrasser du produit dangereux.

Maintenant, si la personne savait qu'elle était en train de violer la Loi, alors là, bien sûr, il y aurait poursuite.

M. Paproski: Je suis d'accord avec vous, monsieur le ministre. Mais c'est une arme à double tranchant. Il faudrait peut-être aussi une certaine protection pour le vendeur de ces produits. Bien sûr, s'il s'agit d'un produit dangereux, le marché doit en être débarrassé. J'aimerais savoir ce qui se produit au point de vue indemnisation. Les importateurs peuvent réaliser, après un certain laps de temps, que le ministère n'a rien pu trouvé de dangereux au produit en question. Comme ils ne voulaient prendre aucun risque, ils l'ont retiré du marché.

Le président: Vos dix minutes sont écoulées.

Mme MacInnis (Vancouver-Kingsway): Est-ce qu'on analyse le produit d'abord ou est-ce qu'on le confisque? Monsieur Paproski semble croire que l'on confisque d'abord le produit et qu'on l'examine par la suite pour voir s'il est dangereux. Qu'est-ce qui vient en premier lieu, la confiscation ou l'analyse?

M. Basford: Naturellement, la confiscation dépend des résultats obtenus au cours d'une analyse.

M. Paproski: Pourquoi ne pas confisquer les cigarettes alors?

[Texte]

Mr. Chairman: Out of order.

Mr. Basford: This Committee is examining the question of what we should do with cigarettes.

The Chairman: On clause 6. Mr. Foster.

Mr. Foster: I am thinking about an importer who imports a whole carload of Czech children's cribs. Would there be provisions for him to refinish these or do something with them rather than having them destroyed, if they are covered with a lead base paint above the acceptable limit? I mean, can he negotiate his thing with the Department in order to refinish them with a non-toxic substance? Or do they have to be destroyed?

Mr. Basford: The offence is having the paint that has a high lead content. The offence is not in having cribs, and it would not be under regulations. So if he wants to put his cribs in order, I am sure he could.

Mr. Foster: We have been dealing with a large dollar value in some instances, although I cannot imagine that any manufacturer is going to use this type of paint. But if an importer did it unwittingly, well then he would be stuck with a lot of furniture.

Clause 6 agreed to.

On Clause 7—Regulations.

Mr. Howe: Mr. Chairman, I was discussing the regulations with the Minister, and I am disturbed, just as the Minister was himself, about having to act quickly to get these hazardous substances off the shelves.

I have in my hand here an article from the *Ottawa Journal* of April 18, 1967, the heading of which is: "Tougher Steps Expected—Headache Pill Restrictions Recommended by Experts." And one paragraph in this article reads:

Included in the safety measures to be placed before the cabinet will be cautionary wording for package labels of the dangers, especially to children, and advice on safe storage.

This was on April 18, 1967. That is two years ago almost, and we do not have the regulations yet. And in this other bulletin that I have, it speaks about this.

Mr. Basford: Excuse me, Mr. Howe. That article was referring to what? Headache tablets?

Mr. Howe: "Headache Pill Restrictions Recommended by Experts". This was with regard to ASA tablets.

[Interprétation]

Le président: Ce n'est pas pertinent.

M. Basford: Ce Comité tente de savoir ce qui devrait se faire au sujet de la cigarette.

Le président: L'article 6. Monsieur Foster.

M. Foster: Un importateur importe tout un wagon de berceaux d'enfants. Est-ce qu'il y aurait des dispositions qui lui permettraient de repeindre ces berceaux plutôt que de les détruire si la peinture de plomb qui les recouvre dépasse le niveau prévu? Est-ce que le ministère peut lui permettre de les repeindre en utilisant une substance non toxique, ou doit-il les détruire?

M. Basford: L'infraction, ce n'est pas d'avoir des berceaux, mais d'avoir des berceaux recouverts d'une peinture qui contient trop de plomb. S'il désire corriger la situation, si je suis certain qu'il pourra le faire.

M. Foster: Il pourrait, en certains cas, s'agir de sommes importantes, bien que je ne puisse m'imaginer qu'un manufacturier désire utiliser une telle peinture. Mais si le cas se présentait, l'importateur pourrait se retrouver avec de nombreux meubles sur les bras.

L'article 6 est adopté.

L'article 7: Règlements.

M. Howe: J'ai discuté de ces règlements avec le ministre, monsieur le président, et ce qui nous préoccupe tous deux c'est qu'il faille agir rapidement pour retirer ces produits du marché.

J'ai ici un article intitulé "Tougher Steps Expected—Headache Pill Restrictions Recommended by Experts", qui a été publié dans la livraison du 18 avril 1967 de l'*Ottawa Journal*. En voici un paragraphe:

Parmi ces mesures qui seront soumises au cabinet notons que l'emballage devra indiquer les dangers que les comprimés peuvent représenter, principalement pour les enfants, et qu'on y retrouvera également des conseils sur la façon de les conserver.

Ceci remonte au 18 avril 1967. Près de deux ans déjà, et les règlements n'ont pas encore été approuvés. Voici un autre article.

M. Basford: Excusez-moi, monsieur Howe, mais de quoi traitait cet article? Des comprimés pour maux de tête?

M. Howe: Des recommandations faites par des experts concernant les restrictions qui devraient être imposées au sujet des comprimés pour maux de tête.

[Text]

And from this other article I would like to quote a few words, Mr. Chairman, if you would allow me. It says:

Despite spreading fame and wide acclaim in America and overseas, child-resistant containers have been received with indifference and disinterest by numerous pharmacists in the very province where safe containers originated.

In 1966, the Ontario Pharmacists' Association unanimously endorsed and recommended this important safety measure for their solid-drug prescriptions. Two years later, today, 1968, with the exception of Western Ontario, these drugs are more often than not dispensed in obsolete, unsafe vials.

To the physicians who treat the little victims poisoned by "friendly" druggists, this is construed as a dangerous, "unfriendly" practice. It defies understanding. How can apathy, disinterest or callousness exist where a child's life is at stake? How can one explain the overt opposition of dissenters, the delaying and obstructive tactics of a myopic few?—and, "most unkindest cut of all", 34 poisonings from unprotected containers in Windsor, the birthplace of Palm-n-Turn? Does a defenseless child have to die to drive home the message of unsafe drug containers? Isn't this a high price to pay for an object lesson?

The reason I put this on the record, Mr. Chairman, is because two years ago this was placed before the cabinet. Of course, there were different ministers then, but I think by now those regulations should be out and there should be restrictions on the type of bottles and containers that are used for these things that can be hazardous to young children.

The Chairman: Mr. Howe, do you not think you are out of order?

Mr. Howe: Well, I may be, Mr. Chairman, but this is important.

The Chairman: You are, because we have

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to stick to the Schedule, Part I and Part II. You will have other opportunities to make your representations.

Mr. Howe: The point I was trying to make, Mr. Chairman, is that there are all kinds of

[Interpretation]

J'aimerais citer une partie de cet autre article si vous me le permettez, monsieur le président.

Bien qu'ils aient été accueillis favorablement en Amérique et outre-mer, ces flacons que ne peuvent ouvrir les enfants ont été accueillis plutôt froidement par bon nombre de pharmaciens de cette province où ils ont d'abord vu le jour.

En 1966, l'Association des pharmaciens de l'Ontario recommandait, comme mesure de précaution, que ces contenants soient utilisés dans le cas des drogues solides (par opposition aux liquides). Deux ans plus tard, aujourd'hui, en 1968, sauf dans l'ouest ontarien, ces drogues sont, plus souvent qu'autrement, mises dans des contenants désuets et dangereux.

Pour le médecin qui traite la petite victime empoisonnée par le pharmacien amical, il s'agit d'une pratique dangereuse et non-amicale. C'est incompréhensible. Comment l'apathie, le désintéressement ou l'insensibilité peuvent-ils exister lorsqu'il y va de la vie d'un enfant? Comment expliquer l'opposition manifeste de ceux qui ne sont pas d'accord et les tactiques de quelques gens peu éclairés qui veulent retarder et empêcher cette amélioration? Qui plus est, 34 empoisonnements à Windsor même, où ces flacons ont été mis au point. Est-ce qu'un enfant sans défense devra mourir pour nous prouver le danger que représentent les contenants utilisés actuellement? Ce prix n'est-il pas trop élevé?

J'ai soulevé la question, monsieur le président, parce qu'elle a été soumise au cabinet il y a deux ans déjà. Il y a eu des changements depuis, mais je crois que ces règlements auraient dû être publiés, à ce jour, et qu'on devrait indiquer quels contenants peuvent être utilisés pour ces substances qui peuvent s'avérer dangereuses pour de jeunes enfants.

Le président: Ne croyez-vous pas, monsieur Howe, que tout ceci est irrecevable?

M. Howe: Peut-être, monsieur le président, mais cette question n'en demeure pas moins importante.

Le président: Il nous faut nous en tenir à l'Annexe. Vous aurez d'autres occasions pour soulever cette question.

M. Howe: Je voulais simplement prouver, monsieur le président, que selon les circons-

[Texte]

things that become hazardous products in certain circumstances.

Mr. Basford: Mr. Chairman, I know you want to close this off. I can give you only a partial answer. Of course headache tablets would not be dealt with under this legislation at all, because they are covered by the Food and Drugs Act, which has complete powers to regulate them.

I am not the Minister responsible and I am not familiar and up to date on this. I think there were some changes. I seem to recall something, not in any ministerial capacity, but I remember seeing something in the press.

Mr. Howe: What about bleaches, Mr. Chairman?

Mr. Basford: I know that there are discussions with the industry on these. But this is a very incomplete answer, because it is not my responsibility.

Mr. Howe: You said that headache tablets would not; but bleaches are in Part II. I think that there should also be some regulation about the type of package.

Mr. Basford: I agree with you there. I think that Clause 7(a) gives us the power to control the labelling, and in many of the products this is the only matter we will be dealing with—providing that there must be a danger warning on the label; that there must be an antidote listed; “keep away from children,” and so on. In my view, we can also regulate the kind of package.

Mr. Howe: I think this is important.

Mr. Basford: At the moment I am not an authority on the child-proof lid, although some of my officials have been examining this rather carefully in light of the facts. In the case of certain products I think we could make regulations governing the package.

Mrs. MacInnis (Vancouver-Kingsway): Mr. Chairman, I want to mention a couple of examples.

The Chairman: Exhibit A?

Mrs. MacInnis (Vancouver-Kingsway): This is called “Pronto”. It is for x-rays. It was distributed some time ago. This is distributed door to door, although it is some little time since this one was. It is under pressure. In very tiny lettering at the back it says: “Con-

[Interprétation]

tances, divers produits peuvent devenir dangereux.

M. Basford: Monsieur le président, je sais que vous voulez en terminer. Je puis donner une réponse partielle. De toute façon, les cachets pour les maux de tête ne figurent pas dans le cadre de cette Loi, puisque la *Loi des aliments et drogues* en parle.

Je ne suis pas responsable de l'application de cette loi et ne connaît pas les dernières modifications qui y ont été apportées. Je crois avoir vu quelque chose dans la presse à ce sujet.

M. Howe: Et au sujet des agents de blanchiment, monsieur le président?

M. Basford: Je sais qu'il y a présentement des discussions avec l'industrie concernée. Mais je ne peux pas vous donner une réponse complète, ce n'est pas de ma compétence.

M. Howe: Vous dites que ce n'est pas le cas des comprimés pour maux de tête. Mais les agents de blanchissement sont nommés dans la Partie 2 de l'Annexe. Je crois qu'il faudrait également établir des règlements au sujet des emballages.

M. Basford: Je suis d'accord avec vous. Je crois que le paragraphe (a) de l'article 7 nous permet de contrôler l'étiquetage, ce qui, dans le cas de certains produits, sera le seul aspect que nous toucherons; en autant que l'étiquette fera mention du danger possible et inviter le public à soustraire ces produits de la portée des enfants. Je crois que nous pouvons décider de l'emballage.

M. Howe: Je crois que c'est important.

M. Basford: Je ne suis pas un expert en ce qui concerne cette question des flacons que les enfants ne peuvent ouvrir, même si certains de nos fonctionnaires ont étudié le tout avec attention. Je crois que pour certains produits nous pourrions établir des règlements concernant l'emballage.

Mme MacInnis (Vancouver-Kingsway): J'aimerais apporter quelques exemples, monsieur le président.

Le président: Quel est le premier?

Mme MacInnis (Vancouver-Kingsway): Il s'agit de *Pronto*, ce produit pour les planchers, qui est sous pression dans une canette. Des échantillons ont été distribués de porte en porte. On lit, en toutes petites lettres, sur la boîte: «Contenu sous pression. Ne pas

[Text]

cante under pressure. Do not set on stove or radiator or keep where temperature will exceed 120° Fahrenheit as container may burst. Do not puncture or throw in fire. Keep out of reach of children." This is in the tiniest printing, barely readable, at the back.

I also have some of this famous "Vanish" that we heard about on Saturday, the toilet bowl cleaner. This, again, has a caution on it. It was distributed door-to-door, to houses, where children could get at it, not in a House of Commons envelope, I may say, but in an envelope which I do not have.

Mr. Basford: That is the product I was talking about.

Mrs. MacInnis (Vancouver-Kingsway): It came in an envelope and the newspaper story was that it said on the back of it: "Caution: Envelope contains a chemical cleaner. Keep away from small children." This was put between the storm door and the inside door, and a small child got it. On the other side it said: "Crime does not pay." It seems an unnecessarily pessimistic viewpoint on the part of the manufacturers, but it evidently was true because they had to withdraw it.

I believe this is the proper clause for discussion of this matter of labelling of hazardous and toxic substances. What can be done about the labelling and the distribution of this sort of thing? Will the regulations cover both of those dangers?

Mr. Basford: We are looking at the question of developing symbols—we are all familiar with the skull and crossbones, which has been a traditional one—rather than long

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explanations, which may or may not have to be in both languages. If we could develop symbols which became known and recognized as meaning "poison", "inflammable", "highly flammable", or "explosive", it would be very useful.

Mrs. MacInnis (Vancouver-Kingsway): Is the distribution going to be dealt with under the regulations—this practice of going from house to house and depositing in letter boxes or between doors?

Mr. Basford: Part 7(a) says:

...prescribing the circumstances and conditions under which and the persons by whom such hazardous product may be sold, advertised or imported into Canada;

There is the power.

[Interpretation]

déposer sur un poêle ou un radiateur ni l'en-treposer dans un endroit où la température dépasse 120° F. car le contenant pourrait exploser. Ne le percez ni ne le jetez au feu. Éloignez des enfants.»

J'ai également, ce fameux produit *Vanish* dont nous avons parlé samedi. Il y a également un avertissement. Le produit a été distribué de porte en porte, donc mis à la portée des enfants, distribué dans une enveloppe que je n'ai pas.

Mr. Basford: Il s'agit justement du produit dont je parlais tout à l'heure.

Mme MacInnis (Vancouver-Kingsway): Le produit était dans une enveloppe sur laquelle on avait écrit, selon l'article du journal: «Attention, cette enveloppe contient un produit chimique. Ne le mettez pas à la portée des enfants.» L'enveloppe a été déposée entre la porte et la contre-porte et un enfant s'est emparé de l'un de ces échantillons. Au verso de l'enveloppe, on disait: «Le crime ne paie pas» ce qui s'est avéré exact puisque les manufacturiers ont dû retirer le tout.

Je crois que nous en sommes à l'article approprié pour discuter de l'étiquetage de ces produits dangereux et toxiques. Que pouvons-nous faire au sujet de l'étiquetage et de la distribution de tels produits? Les règlements prévoient-ils ces dangers?

Mr. Basford: Nous songeons à introduire des symboles. Tout le monde connaît ce symbole traditionnel qu'est la tête de squelette. Nous songeons aux symboles plutôt qu'aux longues explications qu'il serait peut-être nécessaire de publier dans les deux langues. Si nous pouvions établir des symboles qui signifiaient «poison», «inflammable», «très inflammable» ou «explosible», ce serait très utile.

Mme MacInnis (Vancouver-Kingsway): Le problème de la distribution sera-t-il touché par les règlements? Je songe à la distribution de ces échantillons que l'on laisse dans les boîtes aux lettres ou entre les portes?

Mr. Basford: Le paragraphe (a) de l'article 7 déclare:

prescrivant dans quelles circonstances, à quelles conditions et par qui ce produit dangereux peut être annoncé, vendu ou importé au Canada;

Voilà qui nous donne ce pouvoir.

[Texte]

Mrs. MacInnis (Vancouver-Kingsway): These are given away.

Mr. Basford: They are advertised.

Mrs. MacInnis (Vancouver-Kingsway): Oh, yes; that refers to advertising. A suggestion was made to me, Mr. Basford, which I think might be worthwhile passing on, that if the samples have to be given away by manufacturers there could be regulations permitting that to be done in supermarkets, or in places where they could be handed to adults, and making very sure that they did not get into the hands of children—some regulation which would cover that.

Mr. Basford: Yes, I agree with you. I am not answering your question definitely because at this point I have not seen a draft regulation covering distribution.

Mrs. MacInnis (Vancouver-Kingsway): But it will be included.

Mr. Basford: Yes, we have the power.

Clause 7 agreed to.

On Clause 8—Additions and deletions to Schedule.

Mr. Foster: Mr. Chairman, on Clause 8 Subclause (3), this as you know is an amended clause that passed through the Senate and the problem that I see with this Clause is that if the Minister and the Governor in Council place a product on these schedules and if this is not approved by Parliament within two years, then this product is freed and it is back on the market.

It does not seem to me that if the product was either taken off the market or subject to controls for the period of two years and because the Minister does not have an opportunity to introduce the fulfilling legislation this should automatically lapse.

I realize that the Senate may have thought that this was giving too much authority to the Governor in Council but it seems to me that a product that is either taken off the market or controlled for a period of that length of time should not automatically by default go back on the market if these controls lapse.

I would like to propose an amendment which would mean that a product which was placed under Schedule 1 or 2 would automatically have to be tabled within 15 days in Parliament, or if Parliament is not sitting, within 15 days after Parliament resumes its session. Then a second clause, which would be Subclause (4), where an order is laid before Parliament pursuant to Section 3, a notice of motion in either House signed by 25

[Interprétation]

Mme MacInnis (Vancouver-Kingsway): Ces produits sont donnés.

M. Basford: Ils sont annoncés ainsi.

Mme MacInnis (Vancouver-Kingsway): D'accord. On m'a fait une suggestion, monsieur Basford, et je vous la transmets. Si ces échantillons doivent être donnés par les manufacturiers, il serait peut-être possible d'établir des règlements pour les obliger à les distribuer dans les supermarchés, ou ailleurs, où ils pourraient les donner directement à des adultes, et ainsi s'assurer qu'ils ne tombent pas dans la main des enfants.

M. Basford: Je ne réponds pas d'une façon définitive à votre question parce qu'à ce stade je n'ai pas encore vu la réglementation concernant la distribution de ces produits.

Mme MacInnis (Vancouver-Kingsway): Cela sera-t-il compris dans la réglementation?

M. Basford: Oui, nous en avons le pouvoir.

L'article 7 est adopté.

Article 8—Ajouts et suppressions dans l'Annexe.

M. Foster: A l'article 8, paragraphe 3, il s'agit d'un article amendé par le Sénat, le problème qui se pose ici, c'est que le ministre ou le gouverneur en conseil inclus un produit sur l'annexe, et que cette insertion n'est pas approuvée par le Parlement au bout de deux ans, ce produit devient libre et retourne sur le marché.

Donc si un produit est enlevé, s'il est contrôlé pour une période de deux ans, je ne pense pas qu'il devrait revenir sur le marché tout simplement parce que le ministère n'a pas eu l'occasion de proposer la législation appropriée. Je ne pense pas que cela devrait prendre fin automatiquement.

Peut-être que le Sénat pensait que l'on donnait là un trop grand pouvoir au gouverneur en conseil, je crois qu'un produit devrait être ou enlevé ou contrôlé et s'il l'est pour cette durée de temps, il ne devrait pas être mis à nouveau sur le marché.

J'aimerais proposer un amendement qui voudrait dire qu'un produit placé sur l'annexe 1 ou 2 devra être mentionné dans l'espace de 15 jours au Parlement et si le Parlement ne siège pas 15 jours après la reprise de la session parlementaire.

Ensuite une deuxième clause, qui serait l'alinéa 4, qu'une motion signée par 25 personnes, suivant les règles de la Chambre, dis-je, ou après que l'ordre ait été déposé au Parle-

[Text]

members thereof and made in accordance with the rules of that House within 10 days of the day the order was laid before Parliament, this item could then be debated at the first convenient opportunity. Subsequent to this debate, if both Houses of Parliament resolve that an order or any part thereof be revoked that an order or that part thereof is thereupon revoked.

I would like to move this amendment.

The Chairman: Thank you, Mr. Foster. Shall we stand Clause 8?

Some hon. Members: Agreed.

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On Clause 9—Request for reference to Board.

Mr. Robinson: I have a question in regard to Clause 9. Does this refer to either or the Minister of Consumer and Corporate Affairs and the Minister of National Health and Welfare throughout?

Mr. Basford: For purposes of Sections 9 and 10, yes.

Mr. Robinson: I know, but it just does not make any sense when you read it with "either or". I would like to know who does actually have the authority and who is referred to?

Mr. Basford: I would go back to Clause 8, Subclause (2) which allows the Minister of Consumer Affairs or the Minister of National Health and Welfare to make a recommendation to the Governor in Council to add a product or amend the Schedule, and therefore both the Minister of National Health and Welfare and the Minister of Consumer and Corporate Affairs will have an input into this Act. Certain of the products will be dealt with by Health and Welfare and certain other products by Consumer and Corporate Affairs.

As the Act provides for administration by both departments, it could well be that the request would go to the Minister of National Health and Welfare, who can order the establishment of a board, or I can if the request comes to me.

For example, the jequirity beans, which seems to be the classic example under this legislation, have been a concern of the Department of National Health and Welfare. Consumer Affairs has not got involved with jequirity beans. That is in that Schedule at the request of Health and Welfare.

Mr. Robinson: Yes, but by the same token when you are talking about the report or the

[Interpretation]

ment, aux fins que cette question devra être débattue à la première réunion disponible. Et après ce débat, si les deux Chambres du parlement le désirent, elles peuvent décider si cette décision peut ou non être abrogée.

Le président: Nous réservons l'article 8.

Des voix: D'accord.

L'article 9. Demande de soumission à la Commission.

M. Robinson: Est-ce qu'il s'agit du ministre de la Consommation et des corporations ou du ministre de la Santé et du Bien-être social?

M. Basford: En ce qui concerne les articles 9 et 10, oui.

M. Robinson: Je sais, mais cela n'a aucun sens si on dit «et ou»; j'aimerais savoir qui a l'autorité en la matière.

M. Basford: Je reculerais à l'article 8, paragraphe 2, qui permet soit au ministre de la Consommation soit au ministre de la Santé de recommander au gouverneur en Conseil d'amender l'annexe. Par conséquent, les deux ministres, à savoir le ministre de la Consommation et le ministre de la Santé et du Bien-être social auront une contribution à faire en vertu de cette loi. Certains des produits découleront du ministère de la Santé nationale et du Bien-être social, d'autres du ministère de la Consommation et des Corporations.

Vu que la loi stipule que l'application de cette dernière par le ministre de la Santé nationale et du Bien-être social et par le ministre de la Consommation, la demande peut être adressée soit au ministre de la Santé qui peut nommer une commission, ou à moi-même, si la demande m'est adressée, dans ce cas-là, c'est à ce ministre d'agir. L'histoire des pois d'Amérique (jequirity beans) est un exemple classique. En vertu de cette Loi ce fut au ministère de la Santé nationale et du Bien-être social de s'en occuper. Le ministère de la Consommation ne s'en est pas occupé. L'addition à l'annexe a été ordonnée par le ministère de la Santé.

M. Robinson: Nous avons mis cela à l'annexe à la demande de ce ministère. Lorsque

Texte]

publication of a report, I would assume that this would apply to the Minister of Consumer and Corporate Affairs rather than to the Minister of National Health and Welfare because you have been telling us that through your Department various reports and so on would be going out, and I would presume that this is your way of presenting it. So would it not be your Department that would provide the reports and publish various reports on hazardous products rather than the Department of National Health and Welfare?

Mr. Basford: It would depend on who established the board.

Mr. Robinson: You mean to say that there would not be one report coming out from one ministry but there could be separate reports.

Mr. Basford: No, no, this is the report of the board of review, which would be made to the minister appointing the board.

Mr. Robinson: Then I assume the same thing applies in Clause 10 which we are just coming to. It just says "Minister" so that it could be either minister that would be responsible.

Mr. Basford: That is right because the Department of National Health and Welfare has responsibilities for the health of the public and is concerned with a number of products not included within the Food and Drugs Act and may well want the use of Clause 10. My Department is concerned with consumer products and establishing better safety standards for consumer products and the health aspects of it.

Mr. Robinson: Should there not be a special subclause, then, indicating that matters pertaining to health would be referred to the Minister of National Health and Welfare and matters pertaining to safety would be referred to the Minister of Consumer and Corporate Affairs?

Mr. Basford: I would resist that simply because in some of the products it would be hard to delineate and we are going to have to agree on who is looking after them.

Mr. Howe: On Clause 9 I would like to ask the Minister what is the composition of the board. Would it be a board entirely made up of departmental members or would it be independent people? You mentioned chemical substances; would there be somebody from that organization on this board or—

[Interprétation]

vous parlez de la publication d'un rapport, je suppose que ceci s'applique au ministre de la Consommation plutôt qu'au ministre du ministère de la Santé nationale et du Bien-être social. Vous avez parlé qu'il y a plusieurs rapports qui seront publiés, je suppose que c'est au moyen de ces rapports que vous présenterez la situation. Est-ce votre ministère qui fait ces rapports ou le ministère du Bien-être social et de la Santé nationale?

M. Basford: Cela dépendra qui formera la Commission.

M. Robinson: Vous voulez dire qu'il y aura des rapports différents selon le ministère?

M. Basford: Non, le rapport sera fait par la commission d'enquête, et présenté au ministre qui a nommé ladite commission.

M. Robinson: Je pense que cela s'applique aussi à l'article 10 auquel nous arrivons. Il est mentionné uniquement «le ministre», c'est-à-dire l'un ou l'autre des deux ministres responsables?

M. Basford: C'est bien ça, car le ministère de la Santé nationale et du Bien-être social est chargé de ce qui concerne la santé du public et se préoccupe d'un certain nombre de produits qui ne figurent pas à la loi sur les produits alimentaires et les drogues. Il voudra peut-être pouvoir faire appel à l'article 10. Mon ministère s'occupe des produits de consommation et de l'établissement de meilleures normes envers ces derniers, et aussi de l'aspect hygiénique.

M. Robinson: Est-ce qu'il ne devrait pas y avoir une section qui indiquerait que les questions ayant trait à la santé seraient référées au ministère de la Santé nationale et celles qui ont trait à la sécurité seraient référées au ministère de la Consommation et des corporations.

M. Basford: Je serais contre, parce que dans certains produits, il serait extrêmement difficile d'établir une limite.

M. Howe: Juste une minute, monsieur le président, j'aimerais savoir quelle est la composition de cette commission? Est-ce que des personnes indépendantes feraient partie de cette Commission?

[Text]

Mr. Basford: At the moment—and, of course, we do not know how many boards we are going to be asked to set up—my thinking is to use the Restrictive Trade Practices Commission and name them as the board simply because they are used to exercising a quasi-judicial function, they have the machinery for the holding of inquiries and hearings and they are the established machinery to which I could refer these requests for a board for the holding of hearings. In that sense the board would be independent.

We have not established a permanent board of review under the Act by which, when the act is passed, we can go out and name three people to a permanent board of review, and all the establishment that entails, because we do not know how many requests we are going to get. Also, the kinds of products to be dealt with will vary so much that we see the conceivable need of having boards made up of people of different expertise. If we are dealing with a matter that involves a medical problem, this would be a very different board from one dealing with life preservers, where you would want some design engineers or marine people, this sort of thing.

Mr. Howe: That is why I wondered about the Restrictive Trade Practices Commission. Of course, they can bring in experts, but do they have the laboratory facilities, and so on, that would be required for chemical analyses and—

Mr. Basford: They have all of the powers that are conferred by the Inquiries Act, so they can call upon any experts they wish. Is this in the—

Mr. Howe: That is in subclause (4) on page 8 of the bill. It refers to the “powers”.

Mr. Basford: Yes, because it is not necessary, but they would have access to the expertise of the Standards Branch and of the laboratory people in the Department of National Health and Welfare.

Mr. Howe: In Clause 9(6), Publication of report, it says that in certain circumstances the public interest would not be served by publishing the report. However, would the individual from whom it was taken not be informed in a confidential manner of the reason the product was taken away from him? It would not be necessary—

Mr. Basford: Under these circumstances he would have to be informed of the decision.

Mr. Howe: Yes. I just wondered if that meant he would never know why the action was taken.

[Interpretation]

M. Basford: A vrai dire, je ne sais pas combien de commissions nous allons constituer. Pour l'instant, j'envisage de me servir de la Commission des pratiques restrictives du commerce et de les nommer à la Commission, parce qu'ils sont habitués à exercer des fonctions quasi-judiciaires; ils ont le mécanisme pour mener des enquêtes et tenir des audiences, et c'est à cet organisme que je peux référer ces demandes d'une commission pour tenir des audiences. Donc, la Commission serait indépendante.

Nous n'avons pas encore établi une commission permanente d'étude, aux termes de cette loi, mais lorsque la Loi sera adoptée, nous désignerons trois personnes pour faire partie de la commission permanente d'étude et établir tout le mécanisme voulu, car nous ignorons combien de demandes nous aurons. Et les produits que nous avons à traiter varient tellement qu'il nous faudra des commissions composées de personnes de différents domaines; il faudra une commission, par exemple, pour les produits médicaux; il faudrait d'autres personnes pour examiner les gilets de sauvetage.

M. Howe: C'est pour cela, je me demandais si cette Commission des pratiques restrictives du commerce peut faire venir des spécialistes, est-ce qu'ils ont les laboratoires et tout le nécessaire pour l'analyse des produits chimiques?

M. Basford: Ils ont des pouvoirs qui leur sont remis par la *Loi sur les enquêtes*, ils peuvent donc faire appel à des experts, suivant les besoins.

M. Howe: A l'article 9 (4) on parle des «pouvoirs».

M. Basford: Oui, parce que ce n'est pas nécessaire, mais ils auraient accès aux experts de la Section des normes, au personnel du ministère de la Santé nationale et du Bien-être social, et de leurs laboratoires.

M. Howe: Et, à l'article 9 (6) «Publication du rapport», il est dit que l'intérêt du public serait mieux sauvegardé si cette publication n'avait pas lieu. Est-ce qu'on ne devrait pas informer la personne à laquelle on a retiré la marchandise, de la raison pour laquelle on a agi ainsi?

M. Basford: Oui, dans ces circonstances, les personnes doivent être informées des décisions.

M. Howe: Je croyais comprendre que la personne ne serait pas mise au courant pour quoi son produit lui était retiré.

[Texte]

Mr. Basford: I might say quite frankly that I do not see myself ever using that section but perhaps with developing experience it will be used. It is in there principally at the request of the Department of National Health and Welfare which, when it is dealing with some products, realizes the board might well feel it is in the public interest not to produce a public report.

Clauses 9 to 16 inclusive agreed to.

Mr. Benjamin: Mr. Chairman, this is a question of a technical nature and I do not know if Mr. Basford can answer it—perhaps Dr. James can. I notice under Part II of the Schedule there are certain cleansers, and so forth, listed such as sodium hydroxide and sodium bisulfate. Do either one of those terms mean the same thing as sodium acid sulfate?

Dr. James: As I understand it, Mr. Chairman, sodium acid sulfate is simply an alternative way of saying sodium bisulfate.

Mr. Benjamin: So that a product such as this is already in the Schedule?

Dr. James: That is correct.

Mr. Benjamin: Good.

Mr. Basford: For a Doctor of Economics I am startled at the answer!

Mr. Benjamin: One further question, Mr. Chairman. I presume we are on Schedule, and arising out of schedules you get regulations. I wonder if the Minister could tell us what progress has been made so far on these regulations with respect to the products that are already listed in Part II of the Schedule in terms of how they may be handled and sold. Are you getting close to a publishing date on regulations for the ones that are already included in the Schedule?

Mr. Basford: We have had a good number of discussions within the Department and we have had discussions with some of the industry people and the association concerned on the first three items. I am not sure just when we are going to be able to publish the regulations. We are going to press forward as quickly as we can.

With respect to item 4, before Christmas we sent an official from Dr. James' branch to Washington and New York to examine their regulations regarding glue sniffing. I have communicated with the manufacturers and have had some comment back from them. We have had discussions with police officials and here has been liaison with the officials of the Department of National Health and Welfare.

[Interprétation]

M. Basford: A vrai dire, je ne vois pas à quoi servira cet article mais peut-être que, au fur et à mesure de notre expérience, on aura à s'y référer. On l'a ajouté surtout à la demande du ministère de la Santé nationale et du Bien-être social, car dans certains cas, la Commission peut penser qu'il serait souhaitable de ne pas publier de rapport public.

Le président: Les articles 9 à 16 sont adoptés.

M. Benjamin: C'est une question d'ordre technique. Je ne sais pas si M. Basford ou le docteur James pourrait répondre à ma question. Je remarque à la Partie II de l'Annexe, on parle d'agents de nettoyage dont la liste comprend l'hydrate de soude, le sulfate de sodium, etc. Est-ce qu'un de ces composés correspond au sulfite acide de sodium?

M. James: Je pense que le sulfite acide de sodium est un autre nom pour le sulfate de sodium.

M. Benjamin: Ce produit se trouve donc déjà dans l'Annexe?

M. James: Oui, c'est exact.

M. Benjamin: Bien.

M. Basford: La réponse venant d'un économiste, j'en suis tout étonné.

M. Benjamin: Une autre question, s'il vous plaît, monsieur le président, au sujet de l'Annexe. Les Annexes entraînent des règlements. Je me demande si le ministre pourrait nous dire où nous en sommes quant aux règlements concernant ces produits à la Partie II, à savoir comment il faut les traiter et les vendre. Allez-vous bientôt publier le Règlement pour les produits déjà mentionnés à l'Annexe?

M. Basford: Nous en avons déjà beaucoup parlé au ministère et nous en avons parlé avec certains représentants de l'industrie et certaines associations intéressées aux trois premiers alinéas. Mais je ne sais pas quand nous pourrions publier le Règlement. Nous le ferons aussi rapidement que possible.

Au sujet de l'alinéa 4, nous avons envoyé des représentants à Washington et à New York avant Noël pour étudier leurs règlements au sujet de l'inhalation des vapeurs de la colle. J'ai communiqué avec les fabricants dont certains ont répondu. Nous avons aussi eu des entretiens avec les représentants de la police et aussi avec les représentants du ministère de la Santé nationale et du Bien-

[Text]

Obviously our first regulation will be concerned with labelling. Quite frankly, I have not made a decision or a recommendation to Cabinet—and, of course, I will not make any recommendations to Cabinet until the legislation is passed—on what, if any, marketing restrictions or regulations there should be.

Mr. Benjamin: Mr. Chairman, with respect to the initial regulations and in the light of this example we have had in recent days, I did some checking with the post office people today and although it might be costly, there would be nothing to prevent me from getting a thousand of these things and putting them in plain envelopes and distributing them through the mails and if this is a hazardous product, and I think we all agree it is, I would hope the regulations would also cover distribution and with some limitation on the kinds of distribution, because under post office law the post office people have no right to open first class mail. It is obvious that it has to be in the regulations under this proposed act in order to prohibit private distributing agencies from distributing this material so that it may reach the hands of someone who could be harmed by it. This needs to be dealt with as quickly as the labelling.

Mr. Basford: Yes.

Dr. James: I believe in terms of the regulation of distribution the powers are there and therefore I think you can control the method of distribution by exclusion, but I am rather fearful about excluding the mails. I think you could do it by exclusion; you could state it could only be sold in certain ways.

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Mr. Benjamin: And you would do it in the regulations under this proposed act.

Dr. James: Under this proposed act the method of distribution can be controlled.

The Chairman: Mr. Yewchuk?

Mr. Yewchuk: In item 3 of Part II of the Schedule petroleum distillates and aliphatic hydrocarbons are referred to. Would you place gasoline in this section when it is used as fuel for farm machinery or automobiles? This is also a hazardous product; it contains volatile materials which some people sniff. So you intend to put any labelling or warning on barrels on farms, and that sort of thing?

Mr. Basford: No, it is household polishes and cleaning agents containing these substances.

[Interpretation]

être social. Évidemment, nous nous occupons d'abord de l'étiquetage. En toute franchise, je n'ai pas encore pris de décision ni présenté de recommandations au Cabinet et je n'en présenterai pas, au sujet des restrictions ou des règlements, jusqu'à ce que la Loi soit adoptée.

M. Benjamin: Monsieur le président, au sujet des règlements et des exemples récents, j'ai vérifié avec le fonctionnaire des postes et il semble que même si ce serait dispendieux, rien ne m'empêcherait de distribuer ces produits par la poste et, s'il s'agit de produits dangereux, j'espère que le Règlement s'étendra aussi à la distribution de ces produits, et imposera des restrictions, car la Loi sur les postes n'autorise pas les fonctionnaires des postes à ouvrir le courrier de première classe. Il faudrait que cela soit compris dans le Règlement, afin d'empêcher les agences de distribution privées de distribuer ces produits de façon à ce qu'ils tombent entre les mains de gens qui pourraient en subir des conséquences néfastes. Il faudrait le faire aussi rapidement que pour l'étiquetage.

M. Basford: Oui.

M. James: Je crois que pour la distribution des produits, il existe déjà un certain contrôle sur les méthodes de distribution, mais je ne pense pas que les postes soient mentionnées. On pourrait procéder par élimination et préciser les façons dont les produits peuvent se vendre.

M. Benjamin: Et vous le feriez aux termes de la présente Loi?

M. James: Oui, les méthodes de distribution peuvent être contrôlées aux termes de la présente Loi.

Le président: M. Yewchuk.

M. Yewchuk: A l'alinéa 3 de la Partie II de l'Annexe, on parle des dérivés chlorés d'hydrocarbures aliphatiques et des produits obtenus par distillation du pétrole. Est-ce que cela comprend l'essence consommée par l'outillage agricole ou encore les automobiles? Il s'agit d'un produit dangereux, comme d'autres produits volatiles que les gens inhalent. Avez-vous l'intention de mettre une étiquette sur les barils d'essence?

M. Basford: Non, il s'agit ici de produits d'usage domestique contenant ces substances.

[Texte]

Mr. Yewchuk: My suggestion is that this should be enlarged because on a farm there are things just outside the door of the household too which could be hazardous in this way.

Mr. Basford: I am appreciative of people who are encouraging us to regulate more things than not to regulate them.

Mr. Yewchuk: I was suggesting a label on the gasoline barrel, that is all.

Mr. Basford: We do not have the intention of regulating the distribution of gasoline, but we do in regard to household polishes and cleaning agents.

Mr. Yewchuk: In Canada this is the most easily available type of volatile material that could be sniffed, compared to anything else that people sniff. It has the same effects as glue sniffing in many cases.

Mr. Basford: There are, for example, under a great many municipal by-laws, I know, regulations governing the sale of gasoline. In some municipalities it can only be sold into a vehicle. In others it has to be sold in a safety can. As to whether we should make some regulations under here or not, I have no opinion to express right now.

Mrs. MacInnis (Vancouver-Kingsway): Could I ask one question about the sort of product...

The Chairman: A supplementary?

Mr. MacInnis (Vancouver-Kingsway): I am sorry; is Dr. Yewchuk finished?

Mr. Yewchuk: Excuse me, if I might supplement that, if someone were, of course, selling something in a little glass bottle which was nothing but gasoline, and putting it in the retail stores as household spot remover, it would come within this right away.

The Chairman: Mr. Guilbault?

Mr. Guilbault: Mr. Chairman, my question refers to Part I of this Schedule. I am amazed in looking at Part I to see that this Part is quite simple and short. It deals with jequirity beans, lead compounds and flammable liquid coating materials. Although this list can be added to and supplemented by the provisions of this bill, have officials in the Department been in touch with other countries like the United States to see what their list of completely prohibited materials is?

Mr. Basford: Yes. We are building up a considerable knowledge of what other coun-

[Interprétation]

M. Yewchuk: Je pense qu'il faudrait être plus général. Il y a bien des choses sur une ferme qui peuvent être dangereuses et cela à l'extérieur de la maison.

M. Basford: Eh bien, je suis heureux de voir que des gens nous encouragent à réglementer davantage.

M. Yewchuk: Je suggère qu'il y ait une étiquette sur les barils d'essence.

M. Basford: Nous n'avons pas l'intention de réglementer la distribution de l'essence. Nous n'avons des dispositions que pour les produits domestiques.

M. Yewchuk: Au Canada, je pense que c'est le produit volatile que l'on peut respirer le plus facile à se procurer. Dans beaucoup de cas, il a les mêmes effets que la colle.

M. Basford: Dans bien des municipalités, il y a des règlements régissant la vente de l'essence. Dans certaines municipalités, l'essence doit être placée dans le véhicule, dans d'autres, elle doit être vendue dans des bidons de sécurité. Je ne sais pas si nous devrions avoir des règlements prévoyant cela.

Mme MacInnis (Vancouver-Kingsway): Puis-je poser une question sur le type de produit...

Le président: Une supplémentaire?

Mme MacInnis (Vancouver-Kingsway): Je suis désolée, M. Yewchuk n'a pas fini?

M. Yewchuk: Excusez-moi, je voudrais ajouter si on vend de l'essence dans des bouteilles de verre, comme détachant, si ce n'est que de l'essence, cela relèverait de cette loi.

Le président: Monsieur Guilbault?

M. Guilbault: Monsieur le président, je veux poser une question au sujet de la partie I de l'annexe. En regardant cette partie de l'annexe, je suis surpris qu'elle soit si simple et si brève; on y parle des graines de jequirity, des composés du plomb et des produits de revêtement liquides inflammables. Bien que cette liste puisse être complétée dans le cadre du bill, je me demande si les fonctionnaires du ministère ont étudié les listes d'autres pays, comme celles des États-Unis, pour voir quels produits ils prohibent complètement?

M. Basford: Oui, nous connaissons de mieux en mieux ce que les autres pays font.

[Text]

tries are doing. One item that well could be added either to Part I or Part II is flammable fabrics, in connection with which we are working out with the Standards Branch and the Canadian Government Specifications Board, tests of flammability for fabrics. There is no mention of this in any part of this bill, but this certainly is one of the things we intend to regulate when we have the proper tests. This is a terribly complex problem. There are, I think, 28 different tests of flammability for fabric. So, that is a problem that has to be settled first and then we would add it to this.

The British, for example, have already regulated under their Act, some standards of flammability for childrens' night clothing. We will be doing the same. It is just not in this Schedule because this is really put forward as examples of the things we would be dealing

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with. But one thing that could be added to Part I is the outlawing of the sale of certain fabrics or garments, say, for children do not meet a certain standard with regard to flammability.

Mr. Guilbault: Should we, therefore, understand that this is a basic list and that you intend to supplement it as soon as you have data?

Mr. Basford: This is a very basic list and we see adding all sorts of different products to it. We see establishing basic standards for quite a large list. The National Products Safety Council in the United States is looking, I am advised, at some 200 different consumer products with regard to their dangers and how those dangers can be dealt with. We study all of these reports.

The Chairman: Mr. Deakon?

Mr. Deakon: Mr. Chairman, I noticed that the Minister had mentioned that he had some discussions with United States authorities with regard to glue sniffing. I am sure he is aware that toluene is one of the basic organic solvents in these hobby glues that are used. Has the Minister or anyone in his Department ascertained any evidence that this toluene-based substance has any damaging effect on the brain or bone marrow or kidneys?

Mr. Basford: No. An official from the Department of Health and Welfare would give you a more complete answer.

[Interpretation]

Il y a un autre article qui pourrait fort bien s'ajouter ici, à la partie 1 ou la partie 2, ce sont les tissus inflammables. Avec la Direction des normes et le Conseil des normes du gouvernement canadien, nous sommes en train d'étudier la question et nous faisons des essais d'inflammabilité. Ce n'est pas mentionné dans le projet de loi, mais c'est un domaine que nous réglerons lorsque nous aurons fini les essais. C'est un problème des plus complexes. Je pense qu'il y a vingt-huit essais différents d'inflammabilité des tissus. Ce problème doit être réglé d'abord.

Les Britanniques ont déjà des lois et ils ont déjà mis au point des normes sur l'inflammabilité des vêtements de nuit pour enfants. Nous ferons la même chose. Ce n'est pas compris dans l'annexe car c'est un exemple des choses que nous voulons faire, nous pourrions l'ajouter à la partie 1. Interdire la vente de certains tissus, disons pour enfants, non conforme aux normes d'inflammabilité.

M. Guilbault: Alors, devons-nous comprendre que c'est une liste de base que vous voulez compléter, dès que vous le pourrez?

M. Basford: Oui, c'est une liste de base et nous voulons ajouter toutes sortes de produits à la liste; dès que nous aurons des normes de base, nous aurons une liste fort complète. Le Conseil de sécurité des produits aux États-Unis mentionne environ 200 produits. On y explique pourquoi ils sont dangereux et ce qu'il faut faire. Nous étudions tous ces rapports.

Le président: M. Deakon?

M. Deakon: Le ministre a dit qu'il s'était entretenu avec les autorités américaines au sujet de la colle que certains respirent. Il sait sûrement que le toluène est le solvant organique employé dans ces colles. Quelqu'un a-t-il la preuve que le toluène a des effets nocifs sur le cerveau, la moelle épinière ou les reins?

M. Basford: Il faudrait le demander aux fonctionnaires du ministère de la Santé nationale et du Bien-être Social, je pense, ils pourraient vous donner une réponse plus complète.

[Texte]

Mr. Deakon: Do you know whether it has any toxic damage such as, for example, alcohol on the liver?

Mr. Basford: There are various reports and various studies on that, but not within my Department. That is a health matter. I am really not able to answer your question.

The Chairman: Mrs. MacInnis?

Mrs. MacInnis (Vancouver-Kingsway): I want to find out how a product gets on the prohibited list or the dangerous list, and I am speaking of products that have been used for years in households without anybody thinking of them as being hazardous. A chemist told me today, for instance, and I cannot vouch for this, that ordinary lemon oil used around the house for polishing is a very poisonous substance if drunk by children—or anyone, for that matter but children would be more liable to drink it. I do not think lemon oil is ordinarily thought of as being a poisonous thing, but if it is poisonous, how does such a substance get on the list and marked hazardous?

Mr. Basford: How? Well, you are perfectly correct: lemon oil is very dangerous.

Mrs. MacInnis (Vancouver-Kingsway): Women do not know that.

Mr. Basford: I know they do not. It is one of the household cleaners which most women fail to realize is dangerous. I recall, as a child, lemon oil being used by my mother all the time, and there was no warning label on it.

Mrs. MacInnis (Vancouver-Kingsway): No.

Mr. Basford: It is highly toxic. It should be properly labelled and will be included within the Act. Just as an amusing sideline, I was at a dinner a while ago, and the husband was on one side talking with his company while his wife, on the other side, was telling me how dangerous lemon oil was and that it should be regulated. Unbeknownst to her, her husband's company manufactured lemon oil.

Mr. Foster: My question concerns the light flimsy plastic material used by laundries and dry cleaning establishments. A few years ago this caused a lot of suffocation deaths in children, and I am sure it has probably caused more deaths in Canada than jequirity beans, which I had never heard of until I saw this bill, and I wondered why it happened to be left out of the bill. Was there any particular

[Interprétation]

M. Deakon: Savez-vous si cela a des effets toxiques, par exemple, autant que l'alcool sur le foie?

M. Basford: Non, je ne le sais pas. Il y a toutes sortes d'études faites à ce sujet mais pas à mon ministère. Je ne peux vraiment pas répondre à votre question.

Le président: Madame MacInnis.

Mme MacInnis (Vancouver-Kingsway): Je voulais savoir comment un produit vient sur la liste des produits prohibés? Il y a des produits qu'on utilise depuis des années à la maison et qu'on n'a jamais jugé dangereux. On m'a dit aujourd'hui, je n'en suis pas sûre, mais le pharmacien m'a dit que l'huile de citron que nous utilisons pour polir les meubles est une substance dangereuse si les enfants la boivent. Je ne pense pas que l'huile de citron soit généralement considérée comme un produit dangereux mais si elle contient des poisons, comment viendra-t-elle sur la liste?

M. Basford: Vous avez parfaitement raison. L'huile de citron est un produit fort dangereux.

Mme MacInnis (Vancouver-Kingsway): Mais les femmes ne le savent pas, je le sais.

M. Basford: Je pense que la plupart des femmes ne le savent pas. Et si je me souviens bien, lorsque j'étais enfant, ma mère se servait toujours de l'huile de citron, il n'y avait aucune étiquette.

Mme MacInnis (Vancouver-Kingsway): Non.

M. Basford: C'est très toxique et il devrait être bien étiqueté et ce sera mentionné dans la loi. Et un fait amusant, j'ai été invité à un dîner il y a quelque temps et l'homme était d'un côté en train de causer avec ses invités pendant que sa femme de l'autre côté me disait que l'huile de citron était dangereuse et qu'il devrait y avoir des règlements. Ce qu'elle ne savait pas c'est que la compagnie pour qui son mari travaillait fabriquait de l'huile de citron.

M. Foster: Ma question a trait à des matières plastiques, aux sacs de plastique mince et léger qui recouvrent les vêtements qui reviennent du nettoyeur. Il y a quelques années, cela a causé beaucoup de décès par suffocation chez les enfants et c'est peut-être plus dangereux que les graines de jequirity dont je n'avais jamais entendu parler avant aujourd'hui, et je me suis demandé pourquoi

[Text]

reason? Is it a material which you plan to regulate later, or is this problem no longer present in Canada?

Mr. Basford: The problem seems to have been generally solved by industry itself. They now all carry warnings that they be kept away from children. Whether it should be regulated or not I would not want to say at this point, or whether there is any regulation possible. I do not know how you would regulate it except by a warning label which is already on.

Mr. Foster: It seems to me that you could specify a heavier material that would not be so flimsy and would not be so easily inhaled or trap the child.

But this brings up a basic question. If you are able to talk to the industry and say you want to put warnings on this, and the industry seems to be responding and there is no problem in the country, will you still go ahead and put it on Schedule I or II? Or as long as the problem does not exist because the industry is regulating itself, will you let it go at that? What will be the attitude of the Department?

Mr. Basford: It would depend on the product.

Mr. Foster: I guess this would only apply to Schedule II.

Mr. Basford: It would depend on the nature of the problem. In certain cases within the Department we will be and are trying to encourage certain industrial groups to adopt voluntary codes of action. And in certain instances it seems to me quite conceivable that if the problem is solved voluntarily by industry, there would be no need to regulate it. I think the power to regulate should be there. But I find it more effective to encourage voluntary codes.

The Chairman: Mr. Benjamin.

Mr. Benjamin: I would like to carry further a point that was raised earlier about the testing you are doing, for example, for flammable materials and fabrics. And I appreciate that you will be anxious to get this sort of thing done and regulations and additions to the

[Interpretation]

le bill n'en avait pas fait mention. Y avait-il une raison particulière? Est-ce une matière que vous avez l'intention de réglementer plus tard ou est-ce un problème qui n'existe plus au Canada?

M. Basford: Le problème semble avoir été résolu en général par les industries elles-mêmes. Maintenant il y a toujours une étiquette sur les sacs de plastique avertissant de les garder hors de la portée des enfants. Je ne me souviens plus du texte mais enfin il y a quelque chose d'écrit. Je ne sais pas s'il faudrait réglementer la chose ou non. Je ne voudrais pas me prononcer à ce moment-ci. Je ne sais pas si quelque forme de réglementation est possible. Je ne vois pas comment vous pourriez passer des règlements sauf sous la forme d'une étiquette d'avertissement qui est déjà sur le produit.

M. Foster: Je pense qu'on pourrait exiger que le sac de plastique soit plus épais, pour que les enfants ne puissent pas l'avaler si facilement ou être pris à l'intérieur d'un sac.

Ceci m'amène à une autre question fondamentale. Si vous pouvez vous adresser à l'industrie, par exemple, pour lui demander d'apposer des étiquettes d'avertissement sur les enveloppes de plastique, et si l'industrie semble se conformer à votre demande de façon à ce que cela ne pose pas de problème au pays, prendrez-vous quand même les mesures pour que cela soit adjoint à l'Annexe I ou II, ou, tant que le problème n'existera pas vue que l'industrie se discipline elle-même, laisserez-vous porter la question?

M. Basford: Eh bien, cela dépendrait du produit.

M. Foster: Je pense que cela ne s'appliquerait qu'à l'Annexe II.

M. Basford: Cela dépendrait de la nature du problème.

Dans certains cas, nous essayons d'encourager certains groupes de l'industrie à adopter des codes volontaires et dans certains cas, je pense que cela est facile à concevoir que si le problème est réglé volontairement par l'industrie, il n'y aurait pas lieu d'imposer des règlements. Mais je pense qu'on devrait être autorisé à faire de nouveaux règlements.

Le président: Monsieur Benjamin.

M. Benjamin: Je voudrais traiter davantage d'une question qui a déjà été soulevée au sujet des épreuves que vous faites sur les matériaux et les tissus inflammables. Je comprends que vous voulez faire cela pour que des règlements soient décidés et des additions

[Texte]

Schedule done with all dispatch so that the hazardous products are made known to the public.

In order to save time and possibly costs in the matter of testing, would you be prepared to accept the testing done by other countries, as in England on fabrics, or products that have been tested in the United States? Would you accept their findings as sufficient to satisfy you and the Department, and then bring your regulations down more quickly?

Mr. Basford: Yes.

Mr. Benjamin: That is good.

The Chairman: Dr. Haidasz.

Mr. Haidasz: Mr. Chairman, before we come to the point of discussing Mr. Foster's amendment, I would like to ask the Minister whether he has envisaged any program of education to the public and the scope of this education, and whether it will specifically include the dangers of glue-sniffing.

Mr. Basford: We have not worked out any program at all, or settled on a program, but we have within the Department a consumer communicate which we send out to a rather large mailing list and which gets a fair amount of attention in the consumer columns and housewives' columns of newspapers.

Schedule agreed to.

The Chairman: We have stood Clause 5 and Clause 8. The Chair has received two amend-

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ments. The first is on Clause 5. Dr. Yewchuk's amendment reads:

That Clause 5, subsection (1) be amended by adding, after the word "inspector" the phrase "in possession of a search warrant, or with the permission of the owner or person in charge of a place"

This motion is acceptable to the Chair. Is there any discussion on this amendment?

Mr. Yewchuk: I would just like to make a few comments on it. The reason I brought this in is not because I disagree with removing hazardous products from the market or from places of storage, but strictly from the point of view of civil rights.

[Interprétation]

soient apportées à l'Annexe, le plus vite possible, pour que ces produits dangereux soient connus du public. Pour gagner du temps et pour limiter les frais d'épreuves, si vous êtes convaincu que les tests sont complets, seriez-vous disposés à accepter les tests qui ont été faits par d'autres pays, comme c'est le cas en Angleterre, pour les tissus, et pour autres produits qui ont subi des épreuves aux États-Unis? Accepteriez-vous leurs résultats comme pouvant satisfaire aux exigences du ministère, ce qui vous permettrait de présenter vos règlements plus vite?

Mr. Basford: Oui.

Mr. Benjamin: C'est bien.

Le président: Dr. Haidasz.

Mr. Haidasz: Avant d'étudier l'amendement de M. Foster, monsieur le président, je voudrais demander au ministre s'il songe à des programmes pour éduquer le public et la population pour parler surtout des dangers qu'il y a à respirer la colle?

Mr. Basford: Nous n'avons pas encore de programmes précis. Mais au ministère, lorsque nous avons des communiqués aux consommateurs que nous envoyons d'après une liste de distribution importante. Ces communiqués connaissent une bonne diffusion dans les rubriques des journaux qui s'adressent aux consommateurs et aux ménagères.

L'Annexe est adoptée.

Le président: Nous avons réservé les articles 5 et 8. Le président a reçu deux amendements.

Le premier, est sur l'article 5, proposé par le docteur Yewchuk, que le paragraphe 1 de l'article 5 soit modifié comme suit:

en ajoutant après le mot «inspecteur» les mots «en possession d'un mandat de perquisition ou avec la permission du propriétaire ou de la personne chargée des lieux».

La motion me paraît acceptable.
Voulez-vous en discuter?

Mr. Yewchuk: Je voudrais faire quelques commentaires à ce sujet. J'ai présenté cet amendement non pas parce que je m'oppose au fait de retirer des produits dangereux du marché ou de lieux d'entreposage, mais strictement au point de vue des droits civiques. Si

[Text]

You can place yourselves in the situation where you own a place of business and an inspector may come in and say, "I have heard you have some jequirity beans in your place." You say, "No, I do not have any." He will say, "So and so said that you do have some, and I want to come in and have a look around."

It may be that in the back room of your place of business you may be entertaining someone, or it may not be convenient for you for personal reasons to have the inspector come in at that time and you might ask, "Could you come back in an hour or so?" Without this amendment which I am proposing, he would not have to come back in an hour. He would simply say, "Sorry, but I would like to do it now."

I think the amendment is actually simply giving the individual protection for his civil rights. I want to emphasize that I am not against removing hazardous products or anything such as that, but just looking at it from the other point of view.

The Chairman: Mr. Deakon.

Mr. Deakon: Mr. Chairman, I think that the member has some merit in his amendment. The only thing I would like to comment on in that regard is that he does not specify who is going to be authorized to issue these search warrants. Secondly, I am highly concerned about this business of unreasonable grounds in every subclause of that particular clause, and I think it might be advisable in lieu of this amendment to have the Minister issue directives to the inspectors as to what are reasonable grounds.

I do not believe that the amendment would be in order at this time since there is no directive as to who issues these search warrants.

Mr. Yewchuk: I could add a supplementary comment to my statement. It does not only mean a search warrant. It also means permission from the person who owns the place or who is in charge of the place.

An hon. Member: What about permission at that time?

Mr. Deakon: That may not be so good either, because if it was a hazardous product you may want to get in fast.

Mr. Basford: Mr. Chairman, could I comment? The amendment is in the hands of the Committee, but I would like to say I would hope the Committee would not accept the amendment. I am in some difficulty whether to accept it or not because, as has been

[Interpretation]

vous êtes en affaire, par exemple, dans un local qui vous appartient, et si un inspecteur vient vous dire: «Eh bien, vous avez des graines de jequirity chez vous,» vous dites: «Non, je n'en ai pas.» Il dira: «Je sais que vous en avez, un tel m'a renseigné et je veux procéder à une inspection.»

Il se peut que dans une autre pièce vous ayez des invités ou que cela ne vous convienne pas, pour des raisons personnelles. Alors, vous pourriez peut-être avoir à lui demander de revenir dans une heure. A ce moment, si nous n'avons pas d'amendement comme celui-là, il pourrait s'opposer à revenir dans une heure en disant: «Je regrette, il faut que ce soit immédiatement.»

Je pense que l'on protège ainsi les droits des citoyens avec cet amendement. Je tiens à souligner que je ne m'oppose pas à l'élimination des produits dangereux. Mais je regardais l'autre côté de la médaille.

Le président: Monsieur Deakon.

M. Deakon: Je crois que cet amendement a sa raison d'être. La seule remarque que je désire faire c'est qu'il n'est pas précisé qui autorisera ces mandats de perquisition. Deuxièmement, je suis très préoccupé par cette question de: motifs déraisonnables, à chaque alinéa de cette section en particulier. Il serait peut-être souhaitable que le ministre donne des directives aux inspecteurs de façon à déterminer ce qu'est un motif raisonnable. Je ne pense pas que l'amendement soit recevable maintenant, car on ne précise pas qui émet les mandats de perquisition.

M. Yewchuk: Je pourrais ajouter une remarque à mon énoncé. Il n'est pas seulement question d'un mandat de perquisition. Il y a aussi la permission du propriétaire pour enquêter, ou de la personne qui est chargée des lieux.

Une voix: Qu'en est-il de la permission à ce moment-là?

M. Deakon: Ceci n'est pas tellement bien non plus vu que si le produit est dangereux, il serait peut-être désirable d'agir vite.

M. Basford: Monsieur le président, puis-je commenter? Le Comité se charge d'étudier l'amendement. Mais, si je peux donner mon avis, je voudrais dire que j'espère qu'il ne sera pas accepté. Il paraît difficile de l'accepter, car on a déjà expliqué que le ministère de la

[Texte]

explained earlier, the Department of National Health and Welfare has a considerable involvement in this bill in the interests of public health and safety. This wording has been taken from the Food and Drugs Act, where it has, in the public interest, been regarded as necessary. And as I explained earlier, in the history of that Act there have been no complaints about inspectors acting unreasonably or exceeding their authority.

I think one must remember that if there is something that is a present danger to the health of the public inspectors are going to have to find that quickly for public safety, and sometimes for the safety of the people who have it. And they should have the power contained in Clause 5.

Even if I agreed with the amendment I could not accept it tonight without conferring with my colleague who, as I say, has a considerable interest in the bill. I reiterate that it is taken from the Food and Drugs Act which seems to have worked well for people in the past without any infringement of civil liberties.

I also point out that I think the wording of the bill restricts it to commercial premises or private dwellings being used for storage for sale.

• 2225

I would also point out that some of the products we are dealing with, for example glue, if glue is being stored and held by teenagers who are trafficking in its sale, as we have reports in some instances that they are, the inspectors, I think, are going to have to have the power envisaged by this Act to deal with that situation and to deal with it quickly and effectively. I think the owner of the substances, in cases where he has acquired something that is a hazardous product and has acquired it innocently and unknowingly, has his rights of property protected under the Act.

This section does not take his right of property away. So, I find I cannot agree with the amendment. It is up to the Committee as to what it does with it.

The Chairman: Is there a question? Mr. Guilbault.

Mr. Guilbault: Mr. Chairman, I have been involved in building inspection, having had insurance inspectors under my jurisdiction for years. All sorts of people go into buildings in cities, people such as city health inspectors and fire department inspectors. According to the by-laws of the city they go into buildings

[Interprétation]

Santé et du Bien-être a un grand rôle à jouer dans cette Loi dans l'intérêt de la santé publique et de la sécurité.

Le libellé a été tiré de la Loi sur les aliments et drogues dans laquelle, dans l'intérêt public, il a été considéré comme nécessaire. Et j'ai déjà expliqué qu'il n'y a jamais eu de plaintes depuis que la Loi existe au sujet des inspecteurs de la Division des aliments et drogues à l'effet qu'ils agiraient déraisonnablement ou abuseraient de leur autorité.

Je pense qu'il faut se rappeler que s'il y a un danger imminent pour la santé de la population, les inspecteurs devront trouver les produits rapidement dans l'intérêt du public ou même pour la sécurité des gens qui possèdent ces produits. Ils doivent donc y être autorisés selon l'article 5.

Même si j'étais d'accord avec l'amendement, je devrais avant de l'accepter, m'entretenir avec mes collègues qui, comme je l'ai dit, ont un intérêt considérable dans ce bill. Je répète que nous avons extrait cet article sur la *Loi des aliments et drogues*, qui a donné d'excellents résultats dans le passé. Il n'y avait pas d'infractions aux libertés de l'homme. Je souligne aussi que je crois que le libellé du bill le limite aux locaux commerciaux ou encore habitations privées servant d'entrepôts à des articles destinés à être vendus.

Puis-je ajouter aussi que pour certains produits, comme la colle par exemple, si la colle est entreposée ou encore si elle est en possession d'adolescents qui font le trafic de la colle, comme on nous a dit que c'était le cas, je pense que les inspecteurs devront être autorisés par cette Loi à traiter ces questions-là rapidement et efficacement. Le propriétaire de ces matières ou de ces substances jugées dangereuses, s'il s'est procuré ces choses innocemment à ses droits de propriété protégés par la Loi.

Cet article n'enlève pas le droit de propriété, je ne peux donc pas accepter cet amendement. La décision appartient à ce Comité.

Le président: Y a-t-il des questions? M. Guilbault.

M. Guilbault: Monsieur le président, je me suis occupé d'inspection de bâtiment, pendant des années, j'ai eu des inspecteurs d'assurance sous mes ordres. Toutes sortes de gens vont dans les bâtiments dans les villes, des inspecteurs de la santé, des inspecteurs des services de lutte contre l'incendie, etc. Ils agissent sui-

[Text]

to see what is thrown in the basement, whether or not it is full of flammable materials, or junk, as we call it. People do not object and it is in the people's interests not to object. I suggest the amendment is not necessary. I know that any inspection department is so busy that inspectors do not go around trying to find small things where they do not exist. Usually when they go it is because they have a strong suspicion. Usually they have so many cases that they just do not go around bothering people for nothing.

I understand the idea of the member in trying to protect privacy but I think that the people's interest at large must have precedence and I would be against the amendment myself.

Mr. Yewchuk: May I ask a question, Mr. Chairman? Do health inspectors or fire inspectors or building inspectors go into a building if it is not convenient to the owner? Do they always try to get his permission or do they just go bursting in without his permission? What if he refuses and says that it is not convenient at this time and asks the inspector to come back in an hour? What happens?

Mr. Guilbault: They go between business hours or 9:00 a.m. to 5:00 p.m.

Mr. Yewchuk: I understand that, but what would happen in a case where the owner said, "It is not convenient for you to examine my basement at this time. Could you come back in a few minutes, or an hour, or tomorrow?"

The Chairman: I think we are going beyond the scope of the amendment.

Mr. Yewchuk: The member brought this up as an example and I am just trying to get more information as to whether he is going to back up this matter.

The Chairman: Perhaps you could see him after awhile because...

Mr. Guilbault: I do not see why these inspectors would be any worse than other inspectors.

The Chairman: Are there any other questions? Are you ready for the question? Those in favour of the amendment, please? Those who are against? I declare the amendment lost. Shall Clause 5 carry?

Clause 5 agreed to.

Mr. Foster: I have an amendment to Clause 8. I move:

That Bill S-26, An Act to prohibit the advertising, sale and importation of hazar-

[Interpretation]

vant les statuts de la municipalité, et vont voir ce qui se passe, comment est le sous-sol, si les matériaux sont inflammables ou non, etc. C'est dans l'intérêt des gens et personne n'a d'objections. Je sais que tous les services d'inspection sont tellement occupés que les inspecteurs ne cherchent pas à trouver des choses insignifiantes. C'est seulement quand ils ont une bonne raison qu'ils vont quelque part. Ils ne veulent pas ennuyer les gens pour rien, ils ont trop à faire pour cela.

Je comprends que le député cherche à protéger la vie privée mais je pense que l'intérêt du public en général doit primer et c'est dans cette optique que je serais contre cet amendement.

M. Yewchuk: Puis-je poser une question, monsieur le président? Est-ce que les inspecteurs de santé ou d'incendie ou de construction, entrent dans le bâtiment si ceci ne convient pas au propriétaire? Est-ce qu'ils essaient d'obtenir la permission ou est-ce qu'ils font irruption sans permission? Qu'arrive-t-il si le propriétaire refuse et demande que les inspecteurs reviennent dans une heure?

M. Guilbault: Ils y vont entre les heures de travail.

M. Yewchuk: Je comprends cela, mais supposons que le propriétaire leur dise «ce n'est pas le moment opportun pour examiner mon sous-sol, revenez dans quelques minutes, dans une heure ou demain?»

Le président: Je crois que nous sortons du sujet.

M. Yewchuk: Monsieur le député a amené cela comme exemple et j'essaie de savoir comment il va soutenir son point de vue.

Le président: Peut-être pourriez-vous le voir dans un moment car...

M. Guilbault: Je ne vois pas pourquoi ces inspecteurs seraient pires que les autres.

Le président: D'autres questions? Êtes-vous prêts à passer aux voix? Ceux qui sont pour l'amendement? Ceux qui sont contre l'amendement? L'amendement est rejeté. Passons à l'article 5.

L'article 5 est adopté.

M. Foster: Maintenant, j'ai un amendement à l'article 8. Je propose:

Que le Bill S-26, une Loi concernant la vente, l'annonce et l'importation de pro-

[Texte]

dous products, be amended by striking out subclause (3) of clause 8 on page 7 thereof and substituting the following:

"(3) Every order adding a product or substance to Part I or Part II of the Schedule shall be laid before Parliament not later than fifteen days after it is made or, if Parliament is not then sitting, on any of the first fifteen days next thereafter that Parliament is sitting.

(4) Where an order is laid before Parliament pursuant to subsection (3), a notice of motion in either House signed by twenty-five members thereof and made in accordance with the rules of that House within ten days of the day the order was laid before Parliament, praying that the order or any part thereof be revoked, shall be debated in that House at the first convenient opportunity.

(5) If both Houses of Parliament resolve that an order or any part thereof be revoked, that order or that part thereof is thereupon revoked."

The Chairman: Does everybody have a copy? Is there any discussion on the amendment?

Mr. Foster: I would just like to say, Mr. Chairman, that this amendment would just mean that a product that was placed on the schedule would not automatically lapse after two years if it was not confirmed by Parliament.

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There would still be provision for a group of members of Parliament to appeal against any product being added to the schedule, and the order adding the product to Part I or Part II of the Schedule would have to be laid before Parliament within 15 days. If both Houses of Parliament resolved that an order, or any part thereof, be revoked, then the order would be revoked.

Mr. Benjamin: I presume you are not using the word "confidential" on this?

The Chairman: Confidential? That no longer applies.

Mr. Benjamin: May I comment that it is like flogging a dead horse. It is a long drawn-out way to get rid of that Subclause. Subclause (5) is sort of a two-year process by the time both Houses agree to it.

[Interprétation]

duits dangereux, soit amendé par la suppression du paragraphe 3 de l'article 8 à la page 7 du bill et l'addition de ce qui suit:

(3) Chaque arrêté ajoutant un produit ou une substance à la Partie I ou à la Partie II de l'annexe devra être présenté devant le Parlement dans les quinze jours de son émission ou, si le Parlement n'est pas en session, dans les quinze premiers jours suivant le premier jour de la session.

(4) Lorsqu'un arrêté est présenté devant le Parlement conformément au paragraphe 3, un avis de motion émanant de l'une des deux Chambres et signé par 25 membres de celle-ci, fait en conformité avec les règlements de cette Chambre dans les dix jours suivant le dépôt de l'arrêté devant le Parlement, demandant que l'arrêté, ou partie du dit, soit révoqué, doit être examiné dans cette Chambre dès que possible.

(5) Si les deux Chambres du Parlement décident de révoquer tout ou partie d'un arrêté, l'arrêté, ou la partie de l'arrêté, est révoqué.

Le président: Est-ce que tout le monde a le texte? Y a-t-il des objections à cet amendement?

M. Foster: Je voudrais dire que cet amendement vise tout simplement à ce qu'un article placé sur l'Annexe et qui y reste pendant deux ans ne soit pas retiré de cette liste automatiquement tout simplement parce qu'une loi ou un règlement n'a pas été voté en ce qui le concerne.

Il y aurait encore des dispositions pour qu'un groupe de députés puissent faire appel contre tout produit ajouté à l'annexe et pour qu'une ordonnance ajoutant le produit à la partie I ou à la partie II de l'annexe ait à être déposée devant le Parlement 15 jours après sa mise sur le marché. Si les deux Chambres décident de révoquer l'ordonnance parfait.

M. Benjamin: Je présume que vous n'utilisez pas le mot «confidentiel» sur cela?

Le président: «Confidentiel»? Cela n'existe plus.

M. Benjamin: Puis-je faire remarquer que nous sommes en train de tuer un mort. C'est un moyen bien détourné de se débarrasser d'un paragraphe. C'est un processus qui prendra deux ans avant que les deux Chambres soient d'accord.

[Text]

The Chairman: Is there any discussion on the amendment?

Mr. Basford: The Committee is free to do what it wants. Subclause (3) was put in by the Senate. I objected at the time of the Senate hearings. For reasons I tried to explain in the Senate hearings, I think it adds a degree of rigidity to the administration of the Act which is very undesirable, and Senators were concerned that arbitrary action by ministers was, in effect, as they said, amending legislation by order in council. So, what Mr. Foster has put forward is a sort of compromise arrangement by which, if the Minister has acted in a totally arbitrary way, this would annoy sufficient members of Parliament to sign a motion without, at the same time, putting the rigidity in the administration of the Act which I think Subclause (3) does. Maybe the Committee wants to take Subclause (3) out altogether and not have anything there, which was my original legislation.

The Chairman: Are there any other questions? If not, are you ready for the question? Those who are in favour of the amendment? Those who are against?

Mr. Basford: Why not make it unanimous?

The Chairman: Shall Clause 8, as amended, carry?

Clause 8 as amended agreed to.

Clause 1 agreed to.

Titles agreed to.

The Chairman: Shall the Bill carry?

Some hon. Members: Carried.

The Chairman: Shall I report the Bill?

Some hon. Members: Agreed.

The Chairman: I wish, gentlemen, to thank you very much for your co-operation. I wish also to thank the Minister and officials of the Department of Consumer and Corporate Affairs. By the way, I think we shall appoint them as honorary members of this Committee as they have been here so often.

Adjournment until 8 o'clock Thursday, March 6, to consider the Estimates of the Central Mortgage and Housing Corporation.

[Interpretation]

Le président: Y-a-t-il d'autres objections à l'amendement?

M. Basford: Le comité est libre d'agir comme il l'entend. C'est le Sénat qui a inclus ce paragraphe 3. Je m'y suis opposé à ce moment-là. Pour des raisons que j'ai tenté d'expliquer au Sénat cela donnerait à la Loi une trop grande rigidité, ce qui n'est pas souhaitable. Les sénateurs étaient préoccupés par le fait que des mesures arbitraires de la part de ministres pouvaient en fait amender la législation par arrêté en Conseil. Ce que M. Foster propose est une sorte de compromis, si le ministre agissait de façon trop arbitraire, cela pourrait importuner suffisamment les députés pour qu'ils signent une motion, sans pour autant, qu'il y ait toute la rigidité de l'administration de la Loi, ce qui serait le cas avec le paragraphe 3. Peut-être préférez-vous que nous enlevions complètement ce paragraphe 3, ce qui était mon premier point de vue?

Le président: D'autres questions? Pouvons-nous passer au vote? Ceux pour l'amendement? Ceux qui sont contre?

M. Basford: Pourrions-nous faire l'unanimité?

Le président: L'article 8, tel qu'amendé, est-il adopté?

L'article 8 amendé est adopté.

L'article 1 est adopté.

Le titre est adopté.

Le président: Adopte-t-on le bill?

Des voix: Adopté.

Le président: Dois-je présenter le bill?

Des voix: Oui.

Le président: Je voudrais vous remercier de votre coopération, je voudrais aussi remercier les fonctionnaires du ministère de la Consommation et des Corporations et je pense que nous devrions les nommer membres honoraires de ce Comité, ils sont venus si souvent.

La séance est levée jusqu'à huit heures jeudi le six mars pour étudier les prévisions budgétaires de la Société centrale d'hypothèques et de logement.

OFFICIAL BILINGUAL ISSUE

FASCICULE BILINGUE OFFICIEL

HOUSE OF COMMONS

CHAMBRE DES COMMUNES

First Session

Première session de la

Twenty-eighth Parliament, 1968-69

vingt-huitième législature, 1968-1969

STANDING COMMITTEE

COMITÉ PERMANENT

ON

DE LA

HEALTH, WELFARE AND
SOCIAL AFFAIRSSANTÉ, DU BIEN-ÊTRE SOCIAL
ET DES AFFAIRES SOCIALES*Chairman*

M. Gaston Isabelle

*Président*MINUTES OF PROCEEDINGS
AND EVIDENCEPROCÈS-VERBAUX ET
TÉMOIGNAGES

No. 22

TUESDAY, MARCH 18, 1969

LES MARDI 18 MARS 1969

THURSDAY, MARCH 20, 1969

ET JEUDI 20 MARS 1969

*Respecting*Estimates 1969-70, Central Mortgage
and Housing Corporation.*Concernant*Budget des dépenses 1969-1970, Société
centrale d'hypothèques et de logement.INCLUDING FIFTH REPORT
(BILL S-26)Y COMPRIS LE CINQUIÈME
RAPPORT (BILL S-26)

WITNESSES—TÉMOINS

(See Minutes of Proceedings)

(Voir Procès-verbaux)

THE QUEEN'S PRINTER, OTTAWA, 1969
L'IMPRIMEUR DE LA REINE, OTTAWA, 1969

STANDING COMMITTEE ON
HEALTH, WELFARE AND
SOCIAL AFFAIRS

Chairman
Vice-Chairman

and Messrs.

Forget,
Fortin,
Foster,
¹ Gendron,
² Gilbert,
Godin,
Guilbault,

M. Gaston Isabelle
Mr. Steve Otto

Haidasz,
Howe,
McBride,
² McCleave,
Paproski,
Ritchie,
Robinson,

(Quorum 11)

La secrétaire du Comité,

Gabrielle Savard

Clerk of the Committee,

COMITÉ PERMANENT DE
LA SANTÉ, DU BIEN-ÊTRE SOCIAL
ET DES AFFAIRES SOCIALES

Président
Vice-président

et Messieurs

Rochon,
Rynard,
¹ Skoberg,
Thomas (*Maisonneuve*)
—(20).

Pursuant to S.O. 65(4)(b)

¹ Replaced Mr. Deakon on March 6

² Replaced Mr. Knowles (*Norfolk-Hal-
mand*) on March 18

³ Replaced Mr. Benjamin on March 18

⁴ Replaced Mrs. MacInnis on March 20

Conformément à l'article 65(4)(b) du
Règlement

¹ Remplace M. Deakon le 6 mars

² Remplace M. Knowles (*Norfolk-Hal-
mand*) le 18 mars

³ Remplace M. Benjamin le 18 mars

⁴ Remplace M^{me} MacInnis le 20 mars

ORDER OF REFERENCE

THURSDAY, February 20, 1969.

Ordered,—That Votes 68 and L175 relating to the Central Mortgage and Housing Corporation;

Votes 1, 5, 10 and 15 relating to the Department of Consumer and Corporate Affairs;

Votes 1, 5, 6, 8, 9, 10, 11, 15, 17, 20, 30, 35, 40, 41 and 45 relating to the Department of National Health and Welfare; and

Votes 50 and 55 relating to the Medical Research Council be referred to the Standing Committee on Health, Welfare and Social Affairs.

ATTEST:

The Clerk of the House of Commons

ALISTAIR FRASER

Le Greffier de la Chambre des communes

ORDRE DE RENVOI

Le JEUDI 20 février 1969

Il est ordonné,—Que les crédits n° 68 et L175 concernant la Société centrale d'hypothèques et de logement;

Les crédits n° 1, 5, 10 et 15 concernant le ministère de la Consommation et des Corporations;

Les crédits n° 1, 5, 6, 8, 9, 10, 11, 15, 17, 20, 25, 30, 35, 40, 41 et 45 concernant le ministère de la Santé nationale et du Bien-être social; et

Les crédits n° 50 et 55 concernant le Conseil de la recherche médicale soient renvoyés au comité permanent de la santé, du bien-être social et des affaires sociales.

ATTESTÉ:

REPORT TO THE HOUSE

MONDAY, March 10, 1969.

The Standing Committee on Health, Welfare and Social Affairs has the honour to present its

FIFTH REPORT

Pursuant to its Order of Reference of Monday, February 24, 1969, your Committee has considered Bill S-26, An Act to prohibit the advertising, sale and importation of hazardous products, and has agreed to report it with the following amendment:

Delete subclause (3) of Clause 8 and substitute the following:

Tabling of orders adding to Parts I or II

“(3) Every order adding a product or substance to Part I or Part II of the Schedule shall be laid before Parliament not later than fifteen days after it is made or, if Parliament is not then sitting, on any of the first fifteen days next thereafter that Parliament is sitting.

Opportunity for debate

(4) Where an order is laid before Parliament pursuant to subsection (3), a notice of motion in either House signed by twenty-five members thereof and made in accordance with the rules of that House within ten days of the day the order was laid before Parliament, praying that the order or any part thereof be revoked, shall be debated in that House at the first convenient opportunity.

Revocation of order by resolution

(5) If both Houses of Parliament resolve that an order or any part thereof be revoked,

RAPPORT À LA CHAMBRE

Le LUNDI 10 mars 1969

Le Comité permanent de la santé, du bien-être social et des affaires sociales a l'honneur de présenter son

CINQUIÈME RAPPORT

Conformément à l'ordre de renvoi du lundi 24 février 1969, le Comité a étudié le Bill S-26, Loi interdisant la vente, l'annonce et l'importation de produits dangereux, et est convenu d'en faire rapport avec la modification suivante:

Retrancher le paragraphe (3) de l'article 8 du bill et le remplacer par ce qui suit:

Dépôt des ordonnances apportant des additions aux Parties I et II

«(3) Toute ordonnance ajoutant une substance ou un produit à la Partie I ou à la Partie II de l'Annexe doit être déposée devant le Parlement au plus quinze jours après qu'elle a été établie ou, si le Parlement n'est pas alors en session, l'un des quinze premiers jours où il siège par la suite.

Délai pour le débat

(4) Lorsqu'une ordonnance est déposée devant le Parlement en conformité du paragraphe (3), un avis de motion dans l'une ou l'autre Chambre, signé par vingt-cinq membres de cette Chambre et établi conformément aux règlements de cette Chambre dans un délai de dix jours après que l'ordonnance a été déposée au Parlement, demandant que l'ordonnance ou une partie de celle-ci soit révoquée, sera débattue en cette Chambre à la première occasion favorable.

Révocation de l'ordonnance par une résolution

(5) Si les deux Chambres du Parlement adoptent une résolution révoquant une ordonnance

that order or that part thereof
is thereupon revoked.”

ou une partie de l'ordonnance,
ladite ordonnance ou partie
d'ordonnance est alors révo-
quée.»

A copy of the Minutes of Proceedings and
Evidence relating to this Bill (*Issue No.*
21) is tabled.

Un exemplaire des procès-verbaux et
témoignages relatifs à ce bill (*fascicule n°*
21) est déposé.

Respectfully submitted,

Respectueusement soumis,

Le Président,

GASTON ISABELLE

Chairman

MINUTES OF PROCEEDINGS

[Text]

TUESDAY, March 18, 1969.

(26)

The Standing Committee on Health, Welfare and Social Affairs met this day at 8.15 p.m. The Chairman, Mr. Gaston Isabelle, presided.

Members present: Messrs. Foster, Gendron, Gilbert, Guilbault, Haidasz, Howe, Isabelle, McBride, McCleave, Paproski, Ritchie, Robinson, Rochon, Rynard, Thomas (*Maisonneuve*)—(15).

Other Members present: Messrs. Osler, Schumacher and Yewchuk.

Appearing: The Honourable Paul Hellyer, Minister of Transport.

Witnesses: Representing Central Mortgage and Housing Corporation: Messrs. H. W. Hignett, President; J. Lupien, Vice-President; D. DesBarats, Comptroller; and R. Adamson, Executive Director and Chief Economist.

The Committee proceeded to the consideration of the Estimates, 1969-70 relating to the Central Mortgage and Housing Corporation.

The Chairman called Vote 68—

To reimburse Central Mortgage and Housing Corporation for the calendar year 1969: for expenditures on housing research, etc.\$49,000,000

The Chairman welcomed the Minister of Transport and the officials of Central Mortgage and Housing Corporation.

The Minister read a statement and was questioned thereon.

The officials of Central Mortgage and Housing Corporation also supplied information to the Members.

Vote 68 carried.

At 10.05 p.m., the Committee adjourned to 8.00 o'clock p.m. Thursday, March 20.

PROCÈS-VERBAUX

[Texte]

Le MARDI 18 mars 1969

(26)

Le Comité permanent de la Santé, du Bien-être social et des Affaires sociales se réunit aujourd'hui à 8 h. 15 du soir, sous la présidence de M. Gaston Isabelle.

Présents: MM. Foster, Gendron, Gilbert, Guilbault, Haidasz, Howe, Isabelle, McBride, McCleave, Paproski, Ritchie, Robinson, Rochon, Rynard, Thomas (*Maison-neuve*)—(15).

Autres députés présents: MM. Osler, Schumacher et Yewchuk.

A comparu: L'hon. Paul Hellyer, ministre des Transports.

Témoins: Pour représenter la Société Centrale d'Hypothèques et de Logement: MM. H. W. Hignett, président; Jean Lupien, vice-président; D. DesBarats, contrôleur; et R. Adamson, directeur exécutif et Économiste en chef.

Le Comité entreprend l'étude des prévisions budgétaires pour l'année financière 1969-1970 concernant la Société Centrale d'Hypothèques et de Logement.

Le crédit n° 68—Remboursement à la Société Centrale d'Hypothèques et de Logement au cours de l'année civile 1969 des sommes qu'elle a dépensées aux fins de travaux de recherche sur l'habitation etc. ... \$49,000,000, est mis en délibération par le président qui souhaite la bienvenue au Ministre et aux représentants de la Société.

Le Ministre lit un exposé et est interrogé.

Les représentants de la Société répondent aussi aux questions des membres du Comité.

Le crédit n° 68 est adopté.

A 10 h. 05 p.m. le Comité s'ajourne à 8 heures du soir le jeudi 20 mars.

[Text]

Hon. Paul Theodore Hellyer (Minister of Transport): Thank you very much, Mr. Chairman.

Good housing for all Canadians is a matter of special concern to the members of this Committee. It is for this reason that I am particularly pleased to be here and to have the opportunity of discussing with you progress made in housing last year and our expectations for the immediate years ahead.

In 1968 Canada's housing production proceeded at a pace that far eclipsed any previous year's performance. We ended the year with a starts total of 196,878, almost 32,700 ahead of the 1967 figure of 62,400 above that of 1966. This was an important accomplishment and one deserving proper recognition.

If you look at it in terms of equivalence, that is the equivalent of a city of about 250,000 people added between 1966 and last year. It highlights however the need to do even better next year so that we can meet the demand of our growing population and develop a sufficient vacancy rate to hold the line on cost increases.

The 1968 output places us within easy striking distance of our target of 200,000 units annually which is essential to meet our anticipated minimum requirements of a million new homes in the five-year period ending in 1973.

Certainly the main impetus to the sharp upswing registered in 1968 was the high level to which our private lending institutions increased their financial support—both through loans made on a conventional basis and those insured under the provisions of the National Housing Act. Loans under the latter arrangement were, in fact, more than double the 1967 volume and, I believe, these results justify the Government's action a little over a year ago in virtually freeing the maximum interest rate on this form of lending and may indicate the wisdom of fully freeing the rates.

I am pleased to say that the new year has brought a clear indication that the upward trend in housing starts is continuing. The latest figures we have available cover activity in our urban centres during January and February and show impressive year-to-year gains of 47 and 67 per cent respectively.

[Interpretation]

M. Paul Theodore Hellyer (ministre des Transports): Merci beaucoup monsieur le président. De bons logements pour tous les Canadiens: voilà ce qui intéresse tout particulièrement les membres de ce comité. C'est pour cette raison que je suis particulièrement heureux d'être ici ce soir et d'avoir l'occasion de m'entretenir avec vous des progrès de l'année dernière et des prévisions pour les prochaines années dans le domaine du logement.

En 1968 la production de logements au Canada a progressé à un rythme supérieur à celui de toutes les années antérieures. Nous avons terminé l'année avec un total de mises en chantiers de 196,878, soit à peu près 32,700 de plus que l'année précédente et 62,400 de plus qu'en 1966. C'est là une réalisation importante et qui mérite certainement d'être soulignée.

Si vous faites la comparaison vous verrez que ceci équivaut à une ville d'environ un quart de million de population mise en chantier entre 1966 et l'an dernier. Ce fait illustre clairement le besoin de faire beaucoup plus l'année prochaine afin de satisfaire aux besoins d'une grande population qui s'accroît constamment et pour tirer la ligne du côté de l'augmentation des coûts en créant des logements libres.

La production de 1968 nous place à portée de notre cible de 200,000 logis par année, ce qui est indispensable pour arriver au minimum prévu d'un million de maisons dans une période de cinq ans, soit pour 1973. L'élan le plus important de cet essor de 1968 a été donné par nos organisations de prêts qui ont donné leur appui financier, grâce à des prêts donnés sur une base classique, et grâce à des prêts prévus par la *Loi nationale sur l'habitation*. En fait les prêts en vertu de la Loi citée ont plus que doublé en 1968 par rapport à 1967, et ces résultats justifient les mesures prises par le Gouvernement il y a un peu plus d'un an pour affranchir le taux maximum d'intérêt sur ces prêts; ceci révèle qu'il serait peut-être sage d'enlever toute limitation dans les intérêts.

Je suis heureux de dire que la nouvelle année a clairement montré que la tendance à la hausse des mises en chantier se poursuit. Les derniers chiffres que nous avons à notre disposition couvrent l'activité de nos centres pour janvier et février et montrent que nous faisons des gains impressionnants de 47 p. 100 et de 67 p. 100 respectivement depuis les deux dernières années.

[Texte]

Mr. Chairman, I have little reluctance in stating that we can be confident 1969 will see even last year's record surpassed. The essential factor will be of course money. I have already contacted most of the major lending institutions as well as the trustee pension funds, and from initial responses it appears that an adequate supply of financing will be available to support an expansion in house building activity.

For our part we must assure that this expressed willingness to participate is not inhibited in any measure by failure of housing loans to remain fully competitive in the money market.

The housing programs of the next five years will require expenditures in the order of \$20 billion. Most of this amount must be provided through private investment. We can expect the full support of our traditional lending institutions. But, if there is a deficiency in the private sector new ways and means of broadening the base for mortgage investment must be found. The bulk of government financial resources must be used to serve the areas of social need that cannot be met through the activity of the private market.

As I have stated, Mr. Chairman, our recent housing achievements have been outstanding.

But although we are building housing as never before in our history, there are serious inadequacies and imbalances in our production. Last year's exceptional level of starts was weighted very heavily in favour of apartments. No one denies the continuing need for rental accommodation in multiple high-rise buildings. But there must be a better balance between rental and ownership, and between high-rise, single family and row housing so that Canadians can have a proper selection and choice according to their needs and tastes.

The problem that has developed is that rental units coming on to the market are serving not only the needs of those who prefer this kind of accommodation. Out of necessity, more and more of them are being taken up by families whose basic requirements and desires lie in home-ownership accommodation but who cannot meet current asking prices. Or they are being occupied by tenants who must pay a far disproportionate share of their income to escape living in the worst areas of some of our municipalities.

[Interprétation]

Monsieur le président, je n'hésite pas à déclarer que nous pouvons avoir bon espoir pour 1969 de voir surpasser les résultats de l'an dernier. Le facteur le plus important sera évidemment l'argent. J'ai déjà rejoint la plupart des principales organisations de prêts ainsi que les administrateurs des fonds de pension en dépôt, et d'après les premières réactions je pense que nous avons suffisamment d'argent pour appuyer une expansion des activités de construction domiciliaire.

Nous devons veiller à ce que cette bonne volonté à participer ne soit pas paralysée si les prêts à l'habitation ne pouvaient plus soutenir la concurrence générale.

Les dépenses que l'on prévoit sont de l'ordre de 20 milliards de dollars pour les cinq prochaines années. La plus grande partie de cet argent doit être obtenu d'investissements privés. Nous pouvons nous attendre à avoir l'appui total de nos organisations de prêts traditionnelles. Mais s'il y a faiblesse de ce côté-là, de meilleurs moyens d'élargir la base des investissements hypothécaires doivent être trouvés. L'ensemble des ressources gouvernementales doit servir à répondre aux besoins sociaux auxquels ne peuvent pas répondre les activités du marché ordinaire.

Comme je l'ai dit, monsieur le président, les dernières réalisations en matière de logement ont été formidables. Toutefois, même si la construction domiciliaire n'a jamais été si active, il y a déséquilibre et insuffisance très grands dans la production. L'an dernier, par exemple, les mises en chantier étaient surtout pour des appartements, et personne ne niera le besoin d'avoir des loyers et des édifices-tour. Toutefois, il faut un meilleur équilibre entre la propriété et le loyer et entre les logements domiciliaires dans les édifices-tour, les maisons en rangée et les maisons individuelles, afin de permettre aux Canadiens de choisir leur logement à leur goût et selon leurs besoins.

Le problème qui se dessinait, c'est que les unités de logements à loyer ne répondent pas seulement au besoin de ceux qui préfèrent ce genre de logement, mais de plus en plus des familles qui désiraient acheter une maison qui répondait à leurs besoins sont obligées d'y aller à cause des prix actuels au-dessus de leurs moyens. Ou bien les locataires qui occupent ces logements sont obligés de réserver à cette fin une partie disproportionnée de leur revenu afin de ne pas demeurer dans les pires secteurs de certaines de nos municipalités.

[Text]

In other words, Canadians do not have the freedom of choice to which they are entitled. For this reason, last fall the government reallocated from unused CMHC funds 170 million for direct loans on single family units and condominiums. The results were encouraging, especially in the condominium field where our contributions demonstrated to financial institutions the viability of this form of ownership, and there is now a considerably increased development in condominium construction.

But there still exists a critical imbalance in our housing output—not only the kind of housing but the geographical disparities. And it is in the correction of this imbalance—in matching even greater production with the variety of types of accommodation essential for our population in every part of Canada—that one of the real tests of our national housing abilities and concern rests.

It is this kind of problem, along with others, that led to the establishment of the Task Force on Housing and Urban Development. The essential purpose of the Task Force was to provide a critical assessment of present housing policies and to recommend a program in housing which will enable Canadians to achieve better homes and better cities in the decade ahead.

Among the important recommendations are those designed to overcome the exorbitant cost of serviced land through loans to municipalities and the call for municipal support in eliminating red tape which adds to the cost and frustration of the builder. There were other major proposals advanced concerning the levels and terms of financial assistance afforded under the National Housing Act, and I can assure you Mr. Chairman, we look for early implementation of many of these important measures.

Our intention, Mr. Chairman, is to set the mark for a new scale of action—a new thrust—in the provision of dwellings at prices the average Canadian family can afford. We must tackle the problem of supply, cost and choice, and I believe that in the Task Force Report we have a blue print for providing this kind of housing in Canada.

Mr. Chairman, the estimates being reviewed today are concerned with only a portion of the over-all program administered by Central Mortgage and Housing Corporation on behalf of the federal government. They are designed to give the federal government resources to assist low-income Canadians

[Interpretation]

On n'a pas le choix au Canada auquel on aurait droit; par conséquent, l'automne dernier, on a donné à même les fonds inutilisés de la Société centrale d'Hypothèques et de Logement 170 millions de dollars pour les prêts familiaux. Les résultats ont été encourageants surtout dans le domaine des condominiums où notre aide a montré aux institutions financières la viabilité de ce genre de propriété; la construction de condominiums connaît maintenant un essor considérable.

Il y a encore un déséquilibre critique dans la production des maisons, pas seulement du côté type de logement mais aussi sur le plan des disparités géographiques. Il faut remédier à ce déséquilibre, pas seulement augmenter la production mais la diversité nécessaire pour toute la population partout au Canada, mesure qui mettra à l'essai nos capacités de construction et de logement. C'est ce genre de problème, ainsi que d'autres, qui ont amené l'établissement du groupe de travail sur le logement et le développement urbain. Les objectifs essentiels du groupe de travail est d'évaluer les politiques actuelles en matière de logement et de mettre au point un programme de logement qui permettra aux Canadiens d'avoir de meilleures maisons et de meilleures villes dans les dix prochaines années.

Parmi les recommandations importantes, il y avait celles qui voulaient remédier au coût énorme des terrains desservis par les services publics au moyen de prêts aux municipalités, et qui demandaient l'appui des municipalités pour supprimer la bureaucratie qui ne fait qu'ajouter au coût et la frustration du constructeur. Les principales propositions visaient les niveaux et les moyens d'assistance financière aux termes de la Loi nationale sur l'habitation et nous tenons monsieur le président à appliquer le plus vite possible les recommandations qui ont été faites.

Monsieur le président, notre intention est de proposer un nouvel élan pour avoir des maisons qui soient accessibles aux bourses de la plupart des Canadiens. Il nous faut aborder le problème de l'offre, le rythme de la production, le choix, etc., et du coût et du choix, et je crois que nous avons dans ce rapport un plan qui prévoit ce genre de logement au Canada.

Monsieur le président, les crédits qui sont étudiés aujourd'hui ne sont qu'une partie du programme général géré par la Société centrale d'hypothèques et de logement administrée au nom du gouvernement fédéral. On vise à donner des ressources au gouvernement fédéral pour qu'il aide les Canadiens

[Texte]

achieve good low cost housing and the improvement and quality of our towns and cities.

The financial structuring of the two votes before this Committee are allied to these goals. I firmly believe Mr. Chairman, that in your examination of these estimates, you and the members of your Committee will become convinced of the need to support these financial requirements amounting to \$163.0 million for the fiscal year 1969-1970.

Of this amount, \$49 million is related to direct expenditures incurred through grants and contributions, and administrative costs arising from the federal participation in these fields. Loans, investments and advances are forecast at \$114 million. In relation to the same activities for 1968-1969, the proposed estimates represent an over-all increase of \$34.7 million.

The bulk of these estimates are concerned with programs of providing low-income housing, sewage disposal projects and urban renewal. Sums budgeted for these activities amount to \$125 million, representing about 77 per cent of the combined votes.

There has been a good deal of talk, as we all know, about a freeze on public housing. I think it is time we set the record straight in respect to this. The Task Force was greatly concerned about the problem of housing for low-income Canadians.

After our experience of talking to hundreds of tenants in public housing and in the slums of this nation, we were deeply struck by the problem, just as we were struck by the fact that present programs in public housing are in some cases a poor solution to the problem. Our concern was to find better ways and better programs. The large public housing project creates many problems for the residents. It denies them privacy, has a touch to it of social stigma, it takes away a sense of responsibility. It was made clear to us that there is a need for a new strategy for low-income housing, one combining a variety of techniques designed to meet specific needs. That is why the Task Force recommended a study upon which a new strategy or policy can be designed.

In the meantime, public housing will continue in amended form. I have already announced that over 48 projects, involving some 2500 units, have been approved since February 1st. These are projects that meet standards of acceptable size, location, design and layout, providing an address for each

[Interprétation]

dont le revenu est bas à vivre dans des maisons à loyers modiques et qu'il améliore nos villes.

Il y a deux crédits devant le Comité qui sont alloués à ces deux objectifs. Je suis certain qu'en étudiant ces crédits, monsieur le président, vous serez convaincu qu'il faut appuyer ces besoins de 163 millions pour l'exercice financier 1969-1970.

Sur ce montant, 49 millions visent les dépenses ordinaires, dons et contributions, et le coût administratif découlant de la participation fédérale dans ces domaines. Les prêts, placements et avances sont prévus au montant de 114 millions. Relativement aux mêmes activités pour 68-69, les crédits proposés représentent une augmentation totale de 34.7 millions.

Le gros de ces crédits visent les programmes de logements modiques, d'égouts et de rénovations urbaines, au taux de 125 millions, soit environ 67 p. 100 de l'ensemble des crédits.

On a beaucoup parlé, comme nous savons tous, du gel de la construction de logements domiciliaires publics. Je pense qu'il faut préciser les choses maintenant. Le groupe de travail s'est beaucoup occupé du problème de logement pour les Canadiens à revenus moyens.

Après avoir parlé à des centaines de locataires dans les logements publics et dans les taudis de cette nation, nous avons été fortement frappés par ce problème comme nous avons été frappés de voir que les projets actuels parfois ne résolvent vraiment pas la question. Notre souci est de trouver des meilleurs moyens et de meilleurs programmes. Un grand projet de logements crée beaucoup de problèmes pour les locataires. On n'a pas d'intimité, il y a aussi une espèce de tare sociale et on enlève le sens des responsabilités. On nous a clairement montré qu'il y avait lieu d'établir une nouvelle stratégie pour les logements à loyers modiques conçue pour répondre à des besoins spécifiques. C'est pour cela que l'on a recommandé une étude qui permettait de concevoir de nouvelles politiques.

En même temps, le logement public, se poursuit sous une forme amendée. J'ai déjà annoncé que depuis le 1^{er} février on a approuvé plus de 48 projets, touchant 2,500 unités environ. Ce sont des édifices qui sont mieux conçus, on prévoit des endroits pour les loisirs, pour les enfants, les récréations, et

[Text]

tenant, playground space for children and greater privacy for every member of the family. Proposals of this nature will continue to receive favourable consideration.

These estimates also cover our participation in the development of federal-provincial public housing projects, and their associated land acquisition, design, installation of services, and construction.

There has equally been confusion and misapprehension over the Task Force recommendations on urban renewal. The Report agreed that renewing our cities is a worthy objective. It simply pointed out that present renewal programs are a costly and in some cases damaging way to achieve the goal. Too often renewal means dislocation of local communities, demolition of useful serviceable homes, usually those of low-income people, expensive subsidization of commercial redevelopment, and a host of human problems caused by expropriation and the freezing of whole communities through renewal designation. Too often renewal is nothing more than a method for improving property assessment, not the lives of the local residents.

For example, the practice of blue-pencilling an area for renewal creates a problem. It immobilizes that area, cuts off the natural dynamic of change, often for periods of six to eight years. The alternative is to look at the whole city as a development area, and construct selective projects of redevelopment to meet specific needs.

Secondly, the Task Force recommended that rehabilitation take precedence over demolition as a technique of renewal. Working in company with local residents, renewal programs should be designed to preserve what is good, fix up what is required, and destroy only what is beyond repair. There must be new opportunity for community experimentation, and community action in the rehabilitation of our cities, and these will be supported by the government.

The Task Force came down hard, however, on the fact that we must develop a system that will eliminate slums in the future. If the cities and provinces will require that either the owner maintain his property to certain standards, or demolish it at his expense when it can no longer be maintained to those standards, then the problem of blight and urban renewal can be beaten in the years ahead.

[Interpretation]

plus d'espace pour l'ensemble de la famille. Des propositions de ce genre continueront à être étudiées d'une façon favorable.

Ces prévisions visent à la participation, à l'élaboration des projets fédéraux et l'acquisition de terres, le dessin, l'installation des services, et la construction.

Aussi, on a mal compris les recommandations du Comité sur la rénovation urbaine. Dans notre rapport, nous disons que la rénovation urbaine est un bon objectif. Dans le moment, tout ceci coûte très cher et dans certains cas, c'est une façon nocive d'atteindre le but. Trop souvent, ça veut dire le déménagement des gens, la démolition de maisons qui peuvent encore servir et surtout celles qui appartiennent à des gens dont le revenu est faible, des subventions élevées pour la mise en valeur commerciale, et une foule de problèmes humains dûs au déplacement des gens et la stagnation de collectivités entières à cause de la désignation de certaines régions pour la rénovation. Trop souvent, la rénovation n'est qu'une méthode de modifier l'évaluation des terrains et non la vie des gens qui y habitaient.

Par exemple, on entoure d'une ligne bleue certaines régions pour la rénovation et ceci crée des problèmes. D'abord, on gèle la région, on enlève le dynamisme du changement pour des périodes de six à huit ans souvent. La solution de rechange, c'est de considérer la ville comme une région de développement et construire des projets choisis de redéveloppement pour répondre à des besoins spécifiques.

Deuxièmement, le groupe de travail a recommandé que la réhabilitation ait la priorité sur la démolition comme technique de rénovation. Travaillant de pair avec les résidents de l'endroit, les programmes de rénovation devraient être conçus pour garder ce qui est bon, aménager ce qui est nécessaire et démolir seulement ce que l'on ne peut pas réparer. Il doit y avoir d'autres occasions de faire de l'expérimentation, faire agir la population et réhabiliter nos villes, projets que devra appuyer le gouvernement.

Le groupe de travail toutefois a été très ferme sur le fait qu'on éliminerait les taudis à l'avenir. Si les villes et les provinces exigent que seulement le propriétaire s'occupe de sa propriété pour maintenir certaines normes ou la démolisse à ses frais lorsqu'on ne peut pas répondre à certaines normes; à ce moment-là, le problème de rénovation urbaine peut être réglé dans les années à venir.

[Texte]

This is a program that, obviously, cannot be introduced over night. There must be a good deal of rehabilitation in the interim. But if it comes into effect, we will have an effective way of arresting decline in our urban areas, something which we have not seemed to be able to achieve in any of our great North American cities thus far.

The reason for the present restraint on urban renewal practices follows from the findings of the Task Force. Most of the present applications are for commercial redevelopment. Most of these will be considered on an individual basis, some will be postponed, some will be proceeded with depending on the individual cases.

Furthermore, present plans must be reviewed in some cases to see whether or not redesign is possible to emphasize rehabilitation over demolition, and to take into account the concerns of local residents that their community life be preserved to the maximum extent possible. Again, I believe that there are good reasons for looking at these policies and for making some of the modifications that have been discussed.

Finally, the need for more funds to support the installation and renovation of sewage disposal facilities is apparent. This is a program that has had an important effect in reducing the problem of water pollution and the demands for extended services, as our cities' growth will continue. Including increased expenditures to cover the forgiveness feature on the development of new projects it is estimated that \$70 million will be needed for the 1969-70 period. This represents \$17 million additional to the allocation for 1968-69.

Mr. Chairman, there may have been short-coming in our housing production capability and in our urban development, but this is inevitable in any range of policies designed to improve the quality of life in our cities. With continuing increase in the scale of private institutional lending the greater proportion of federal housing funds can be channeled into those areas which we recognize as having the greatest social and human need. What is of critical importance is that these funds be used in the most effective and responsible way.

The findings of the Task Force, I believe, give us the opportunity for reassessment of our policies and for searching out new policies for assisting low-income families and for improving the environment of our cities.

[Interprétation]

C'est un programme qui évidemment ne peut pas être mis en application du jour au lendemain; il faut qu'il y ait beaucoup de réadaptation entre-temps. Mais si on applique cette recommandation, quand elle entrera en vigueur, on pourra arrêter efficacement le déclin de nos régions urbaines, chose que nous n'avons pu faire jusqu'ici apparemment dans nos grandes villes nord-américaines.

Les raisons de la restriction actuelle sur les pratiques de rénovation urbaine découlent des conclusions du groupe de travail. La plupart des applications touchent le redéveloppement commercial. Ce sont des questions qu'il faudra considérer sur une base individuelle, séparément, il faudra remettre à plus tard certains projets, d'autres pourront continuer suivant chaque cas.

De plus, les plans actuels doivent être revus dans certains cas pour voir si oui ou non il y a lieu de faire une nouvelle conception et éviter la démolition radicale et tenir compte des soucis des résidents de l'endroit pour que la vie communautaire ou collective soit préservée le plus possible. Je crois qu'il y a de bonnes raisons pour examiner ces politiques et faire les modifications.

On a besoin de plus de fonds par exemple, pour appuyer la construction et la rénovation d'installations sanitaires. C'est un programme qui a eu un effet très sérieux pour réduire le problème de pollution de l'eau et fournir de plus en plus de services au fur et à mesure de la croissance de nos villes y compris les dépenses accrues pour les imprévus du développement de nouveaux projets, il faudra \$70 millions pour la période de 1969-1970, soit \$17 millions de plus qu'en 1968-1969.

Monsieur le président, il y a peut-être eu des lacunes dans notre capacité de construction de logements et de l'aménagement des agglomérations, mais c'est inévitable dans toute politique conçue pour améliorer les conditions de vie dans nos villes. Grâce à l'augmentation continue des prêts consentis par les institutions privées, une plus grande partie des fonds de l'État disponibles pour le logement sont consacrés aux domaines qui présentent les besoins humains et sociaux les plus importants. Le plus important, c'est que les fonds en question soient utilisés d'une façon responsable et efficace.

Je pense que les constatations de l'Équipe spéciale nous permettent de reviser nos politiques et de chercher de nouvelles lignes de conduite pour venir en aide aux familles à faible revenu et améliorer le milieu de nos villes.

[Text]

We have an opportunity, Mr. Chairman, to find new approaches and develop improved programs in social housing policy. I welcome the assistance of this Committee in this very important task.

The Chairman: Thank you, Mr. Minister. Before we open the meeting for discussion I would like to point out to you that in order to give a chance to every member to ask questions the first round will be limited to 10 minutes for each member. After that you may ask questions until four o'clock in the morning.

The meeting is open for discussion. The first member I have on my list is Dr. Yewchuk.

Mr. Yewchuk: Mr. Chairman, are we dealing with Vote 68 in the various clauses or just general discussion on the topic of housing?

The Chairman: Vote 68 has been called so you may ask questions on Vote 68, or if you wish to ask something in general of the Minister you may do so since he is here. It is your 10 minutes.

Mr. Yewchuk: Thank you. I would like to ask some questions on the topic of research into public housing and what steps are now being taken along these lines.

Mr. Hellyer: A considerable amount of research has been and is being done. In particular, following on the report of the Task Force, it is anticipated that we will have a major study of this whole area undertaken to consider the economic, social and other consequences of public housing and to compare it with other forms of housing so that we can get some yardstick for evaluation of the various kinds of programs that are available to us.

Mr. Yewchuk: You stated, Mr. Minister, that the public housing program will continue in a modified form. In the meantime, while this research is going on, could you give us some more detail of that?

Mr. Hellyer: Yes; in general we will proceed with projects where they are not too large and where they provide what we consider to be good family accommodation. This can be interpreted as meaning where there are individual street addresses, where there is some privacy and where the total environment is one that we think is conducive to family life.

[Interpretation]

Monsieur le président, nous avons l'occasion de trouver de nouvelles perspectives et de mettre au point de meilleurs programmes vis-à-vis de nos politiques de logement. J'accueille avec plaisir l'assistance du Comité dans cette tâche très importante.

Le président: Merci, monsieur le ministre. Avant d'entamer la discussion, je voudrais vous faire remarquer qu'afin de permettre à chacun des députés de poser des questions, chacun disposera d'abord de dix minutes pour poser des questions. Nous pourrions ensuite continuer jusqu'à 4 h. demain matin. Commençons donc la discussion. Le premier nom sur ma liste est celui de M. Yewchuk.

M. Yewchuk: Monsieur le président, est-ce que nous étudions le crédit 68 en général ou devons-nous restreindre nos questions au logement?

Le président: Le crédit 68 est à l'étude alors vous pouvez poser des questions sur le crédit 68; si vous voulez poser des questions d'ordre général, au ministre, vous pouvez le faire puisqu'il est ici. Vous avez dix minutes.

M. Yewchuk: Merci. Je vais poser quelques questions au sujet de la recherche sur les programmes publics de construction d'habitations et de rénovation et les mesures que l'on prend dans ce domaine.

M. Hellyer: Beaucoup de recherches ont été faites et se font dans ce domaine. En particulier, par suite du rapport du groupe d'étude, on prévoit entreprendre une étude approfondie de tout ce domaine afin d'étudier les aspects économiques et sociaux et les autres conséquences des programmes publics de logement et de les comparer aux autres formes de logement afin d'avoir des critères pour évaluer les divers programmes mis à votre disposition.

M. Yewchuk: Vous avez dit, monsieur le ministre, que le programme public de logement se poursuivra sous une forme modifiée. Pouvez-vous nous donner plus de détails à ce sujet?

M. Hellyer: Oui. Nous poursuivrons les programmes qui ne sont pas trop vastes et qui pourront fournir ce que nous considérons comme des logements satisfaisants pour les familles. Vous pouvez interpréter le sens de ce que je viens de dire comme étant qu'il y ait une adresse pour chacun des logements, qu'il y ait une certaine intimité possible, et que le milieu permettent une vie familiale adéquate.

[Texte]

Mr. Yewchuk: I wanted to ask also about the interest rates. There has been some freeing of the interest rates within the past couple of years and I wondered if you have reassessed the effects of this freeing of the interest rate? I understand it has gone up somewhat, so what are your predictions about what will happen to the interest rate if you free it completely?

Mr. Hellyer: I think there are two questions. I would not care to hazard a guess as to what will happen to the interest rates generally. I know this is a matter of great concern both in this country and in other countries of the western world. It is a question which will have to receive the attention of the governments and of peoples of each of our respective nations.

So far as the fixed ceiling on NHA loans is concerned, I have already stated in the House my opinion, which is that if we did not have the ceiling, which is presently set at 2½ points above the average long-term Government of Canada bond rate, the rate at which loans are made would be lower than is presently the case.

This belief is based first of all on the fact that the rate at which loans are being made now is floating somewhere below the actual maximum, and second on discussions with various of the lending institutions, who gave me the impression that 2½ points above Government of Canada bonds is more than they really need to charge; that the old limit of 1 ¾ points was probably in some cases not enough and that the rate, if it were freed, would float somewhere between those two limits.

Mr. Yewchuk: I also wanted to ask you about whether you have any intentions of changing the income level for those who qualify for NHA loans. Have you given that any thought?

Mr. Hellyer: Are you referring to ownership or rentals?

Mr. Yewchuk: Yes; ownership.

Mr. Hellyer: For ownership the income is related to the ability of the person to repay the loan. The amount of income is really set by the size of the loan, the term of its amortization and the interest rate, plus one-twelfth of the annual taxes.

The only way you can get the figure of income required down is to extend an amortization, to get a lower rate of interest, to reduce the taxes or to the reduce the cost of

[Interprétation]

M. Yewchuk: Je voudrais aussi vous demander au sujet des taux d'intérêt. On a quelque peu libéré les taux d'intérêt au cours des dernières années, et je me demande si vous avez étudié l'incidence de cette libération. Je crois comprendre que le taux a augmenté. Quelles sont vos prévisions sur ce qui adviendra au taux d'intérêt si vous supprimez toute restriction?

M. Hellyer: Il y a deux questions ici. Je n'ose pas me prononcer sur ce qui se produira pour le taux d'intérêt en général. Je sais que cela inquiète énormément tous les Canadiens et d'autres pays dans le monde. Il faudrait que le gouvernement se penche sur cette question et ainsi que tous ceux qui s'intéressent à ce domaine.

Quant au plafond fixé pour les prêts de la Société centrale d'hypothèques et de logement j'ai déjà déclaré à la Chambre mon opinion qui est que si nous n'avions pas ce plafond, présentement établi à deux points et quart au-dessus de la moyenne du taux à long terme des obligations du Canada, le taux d'intérêt sur les prêts serait moins élevé.

Cette opinion est fondée d'abord sur le fait que le taux auquel les prêts sont faits actuellement est en dessous du maximum, et deuxièmement, par suite de discussions avec diverses institutions de prêts, j'ai eu l'impression que deux points et quart au-dessus des obligations de l'État est plus que ce qui serait nécessaire. L'ancien plafond un point et trois quarts était probablement insuffisant dans certains cas, et que si le taux était libéré il fluctuerait entre ces deux extrêmes.

M. Yewchuk: Je voulais aussi vous poser une question. Est-ce que vous avez l'intention de modifier le niveau du revenu des personnes admissibles à un prêt de la Société centrale d'hypothèques et de logement? Y avez-vous songé?

M. Hellyer: Est-ce que vous parlez des propriétaires ou des locataires?

M. Yewchuk: Des propriétaires.

M. Hellyer: Pour les futurs propriétaires le revenu exigé est établi en fonction de l'aptitude de la personne à rembourser le prêt. Tout dépend du montant du prêt, les délais de remboursement, le taux d'intérêt, plus un douzième des taxes annuelles.

La seule façon de faire réduire le montant du revenu exigé c'est d'étendre le délai de remboursement, obtenir un niveau d'intérêt plus bas, faire réduire les taxes ou réduire le

[Text]

the house in the first place, so that the total loan is smaller. These are the combinations of things that can be done, but the amount of income required is automatically related to the product, including the terms of the mortgage that is placed on it.

Mr. Yewchuk: Have you any plans for doing these three things that you mention?

Mr. Hellyer: All three are matters of urgent concern.

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Mr. Yewchuk: As I understand it, at the present time the income that has to be earned by a person to qualify for an NHA loan is somewhere around \$8,000 per year. The national per capita income is about \$2,500 per year; that is a fairly large discrepancy.

Mr. Hellyer: I think your figure is for the maximum loan of \$18,000. Many houses are built with smaller loans than that.

Mr. Yewchuk: Even so, at present it is my impression that possibly more than half of the wage earners cannot qualify for NHA loans because they have to have a fairly high earning capacity before they can qualify.

Mr. Hellyer: This is true in respect of new housing and it is precisely one of the reasons that the Task Force recommended extending the same favourable terms of the National Housing Act to used housing, so that people in a much wider income range would be able to qualify for home ownership if they wished to, and that they would be able to do so without the necessity of secondary mortgage financing which they have to resort to at present.

This was recognized by the Task Force and we felt that the time had come for us not to have two classes of citizens.

The provisions of the National Housing Act should apply equally to new and used housing, and in this way you would provide accommodation to millions of Canadians who otherwise could not be accommodated under the Act.

Mr. Yewchuk: If this recommendation were accepted and implemented what would be the lowest level of income under which a person could qualify to get the cheapest possible used house?

[Interpretation]

coût de la maison de sorte que le prêt ne se pas si considérable. Voilà une combinaison de mesures possibles, mais le niveau de revenu exigé pour recevoir un prêt est en fonction du produit y compris les termes de l'hypothèque.

M. Yewchuk: Est-ce que vous avez l'intention de faire les trois choses dont vous venez de parler?

M. Hellyer: Nous nous intéressons grandement à ces trois problèmes.

M. Yewchuk: Si je comprends bien, à l'heure actuelle, le revenu annuel d'une personne qui désire recevoir un prêt de 18,000 \$ doit être d'environ \$8,000 alors que le revenu annuel moyen par habitant est de \$2,500. Il y a un écart considérable.

M. Hellyer: Je crois que vos chiffres se rapportent au prêt maximal de \$18,000. Un grand nombre de maisons sont construites avec des prêts moins élevés.

M. Yewchuk: De toute façon, à l'heure actuelle, j'ai l'impression que plus de la moitié des salariés du Canada ne sont pas admissibles aux prêts de la SCHL parce qu'ils doivent avoir un revenu assez élevé pour être admissibles.

M. Hellyer: Ce serait vrai dans le cas de nouvelles habitations, et précisément le groupe d'étude spécial a recommandé d'étendre les conditions favorables de la *Loi nationale sur l'habitation* aux logements usagés afin de permettre aux gens d'une échelle de revenu beaucoup plus vaste de devenir propriétaires d'une maison s'ils le désirent, et sans avoir à recourir aux deuxièmes hypothèques, ce qui serait le cas à l'heure actuelle.

Le groupe d'étude spécial s'en est rendu compte et il a décidé qu'il ne doit plus y avoir deux classes de citoyens.

Les dispositions de la *Loi nationale sur l'habitation* devraient s'appliquer également aux différentes catégories d'habitations, neuves ou autres; vous pourriez ainsi procurer une maison à des millions de Canadiens qui, autrement, ne le pourraient pas.

M. Yewchuk: Advenant l'adoption et la mise en vigueur de ces recommandations, quel serait le niveau de revenu le plus bas par lequel une personne satisfairait aux conditions pour s'acheter la maison usagée la moins chère.

[Texte]

Mr. Hellyer: It would depend entirely on the cost of the house. We were doing a financial exercise the other day on a range of housing that was available in St. John's, Newfoundland, for example, and as I recall I think the income required was somewhere between \$4,000 and \$4,500.

Mr. Yewchuk: And what sort of a house would that provide?

Mr. Hellyer: It would be a used house. I do not know how old but it would be in relatively good condition and in the downtown area and it should provide first-class family accommodation.

Mr. Yewchuk: I just want to ask one more question, Mr. Chairman, with regard to the interest rate on building materials and then I will stop. This has been one of your recommendations and I realize there has been some disagreement on this. What are the chances of removing this?

Mr. Hellyer: I do not think there is any disagreement, I think it is just a question of when money will be available for tax reductions. This is something which is strictly a financial matter. I know if money was available for tax reductions that this is one of the first places that would be looked at.

Mr. Yewchuk: What in your opinion are the chances of this happening within the next year or two?

Mr. Hellyer: I really could not speculate on how much new expenditure the Opposition will urge us to make.

Mr. Yewchuk: One of the greatest concerns of the Opposition is to make you cut down on expenditures so that you can do this more quickly.

Mr. Hellyer: Any suggestions you have in that respect would also be welcome.

Mr. Yewchuk: Thank you very much, Mr. Chairman.

The Chairman: Mr. Robinson.

Mr. Robinson: Thank you, Mr. Chairman. I have several questions. First, what research in urban renewal is contemplated at the present time? I notice that in 1967-68 there was \$1.8 million and in 1968-69 there was \$3.8 million, and now you are contemplating \$6.1 million.

[Interprétation]

Mr. Hellyer: Cela dépend entièrement du prix de la maison. Nous avons fait quelques calculs l'autre jour pour déterminer quelles seraient les possibilités offertes à un habitant de St-Jean (Terre-Neuve): si je me souviens bien, il fallait un revenu de l'ordre de \$4,000 à \$4,500.

Mr. Yewchuk: Pour acheter quelle sorte de maison?

Mr. Hellyer: Cela lui permettrait d'acquérir une maison usagée. Je ne sais pas combien d'années aurait cette maison, mais elle serait en bonne condition et serait située dans la région du centre-ville; elle pourrait loger très convenablement une famille.

Mr. Yewchuk: Est-ce que je peux poser une autre question, monsieur le président, en ce qui concerne le taux d'intérêt sur les matériaux de construction? Cette question a fait l'objet d'une de vos recommandations et je crois qu'il y a eu un certain désaccord à ce sujet. Est-ce qu'il y a des chances pour que l'on voie disparaître cette taxe sur les matériaux de construction?

Mr. Hellyer: Je ne crois pas qu'il y ait eu de divergence à ce sujet. S'il y avait l'argent nécessaire, on pourrait réduire les taxes. C'est simplement une question de finance. Si l'argent était disponible pour nous permettre de réduire les taxes, c'est certainement une des premières taxes que nous réduirions ou ferions disparaître.

Mr. Yewchuk: Est-ce que cela pourrait se produire, disons, au cours de la prochaine année?

Mr. Hellyer: Je ne peux vraiment pas prévoir à l'avance quelles nouvelles dépenses l'opposition nous obligera à faire.

Mr. Yewchuk: L'opposition s'inquiète surtout de réduire les dépenses, de sorte que vous pourrez réduire les taxes plus tôt.

Mr. Hellyer: Enfin, toute proposition que vous avez à ce sujet, nous serons trop heureux de la recevoir.

Mr. Yewchuk: Merci beaucoup, monsieur le président.

Le président: Monsieur Robinson.

Mr. Robinson: Merci, monsieur le président. J'ai plusieurs questions. Premièrement, quelle est la recherche qui est prévue à l'heure actuelle dans la rénovation urbaine? J'ai constaté qu'en 1967-1968, vous aviez consacré \$1,800,000 à la recherche; en 1968-1969,

[Text]

With this tremendous increase what research in urban renewal projects is contemplated?

[Interpretation]

\$3,800,000 et maintenant vous songez à \$6,100,000. Avec cette augmentation considérable des crédits, quelles recherches prévoyez-vous effectuer dans le domaine des projets de réaménagement urbain?

Mr. Hellyer: Is your question related to urban renewal research or urban renewal studies?

M. Hellyer: Est-ce que votre question se rattache à des recherches de rénovation urbaine ou à des études de rénovation urbaine?

Mr. Robinson: I think it could be a combination of both.

M. Robinson: Ce pourrait être peut-être une combinaison des deux.

Mr. Hellyer: It really makes quite a difference because...

M. Hellyer: Je crois que cela fait toute une différence...

Mr. Robinson: Perhaps you could explain the difference.

M. Robinson: Peut-être alors pouvez-vous expliquer la différence.

Mr. Hellyer: The urban renewal studies are the policy under which grants have been made to consider specific areas of cities and to decide how urban renewal might apply to those particular areas. On the other hand, if you meant research, this would get into the techniques of urban renewal and any changes in policy or any evaluation of the policies that have already been implemented to see how well they are working and how they might be changed to work more effectively.

M. Hellyer: Les études de rénovation urbaine relèvent de la politique en vertu de laquelle des subventions ont été accordées pour étudier certains quartiers de ville en vue de décider comment la rénovation urbaine pourrait s'y appliquer. Par ailleurs, la recherche concerne les techniques de la rénovation urbaine et tout changement de politique ou toute évaluation des lignes de conduite qui ont été adoptées, pour voir comment elles fonctionnent et comment elles pourraient être changées pour obtenir de meilleurs résultats.

Mr. Robinson: It may be that the vote does not state it clearly. It merely says:

M. Robinson: Il se peut que le crédit du budget des dépenses ne soit pas assez explicite. On y lit seulement:

To reimburse Central Mortgage and Housing Corporation for housing research and community planning as contemplated by Part V of the National Housing Act...

Remboursement à la Société centrale d'hypothèques et de logement du coût de ses travaux de recherches sur l'habitation et de ses travaux d'urbanisme, tel qu'il est prévu à la Partie V de la Loi de 1954 sur l'habitation...

The increase is so tremendous that I am wondering to what extent there is research in the area, it also brings up the point that in view

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of the new expropriation laws, will we actually be involved in urban renewal in the sense that we have considered it in the past?

Les augmentations sont si considérables que je me demande dans quelle mesure il y a des recherches dans ce domaine; cela soulève aussi la question suivante, à savoir si nous allons nous occuper de réaménagement urbain dans le même sens que dans le passé, compte tenu des nouvelles lois sur l'expropriation.

Mr. Hellyer: I think you are referring to the increase in research generally from \$3.8 million to \$6.1 million, which is shown on page 428. This covers the entire range of research done by the Corporation and it deals with such things as urban renewal research or public housing research to methods for making better bathrooms and new building techniques—the whole range of housing research.

M. Hellyer: Je crois que vous voulez parler de l'augmentation du coût des recherches en général, de \$3,800,000 à \$6,100,000, ainsi qu'on le voit à la page 428. Cela couvre toute la gamme de recherches que fait la Société et porte sur des sujets variés, allant des recherches intéressant le réaménagement urbain ou la construction de logements subventionnés jusqu'aux méthodes pour construire et aménager de meilleures salles de bains et aux nouvelles techniques de construction de maison, soit toute la gamme des recherches sur l'habitation.

[Texte]

Mr. Robinson: I see. I notice that in 1967-68 there was a \$3 million loss resulting from the operation of public housing projects. In 1968-69 this went up to \$4.2 million and you are proposing a further loss of \$7.9 million for 1969-70. Why is it that public housing has to be operated at a loss?

Mr. Hellyer: Because the rents are below economic rents. This is the whole purpose of public housing. The more of it you have the higher the losses.

Mr. Robinson: Would you consider the Rochdale College venture at the University of Toronto to be a public housing scheme?

Mr. Hellyer: It is student housing; it is not subsidized.

Mr. Robinson: It is not subsidized, but NHA provided the money to build it. Is that so?

Mr. Hellyer: That is right.

Mr. Robinson: In making their loans does the Department accept this *laissez-faire*, sort of ultrapermissive living approach?

Mr. Hellyer: We do not believe that our place is in the bedrooms or Rochdale College.

Mr. Robinson: I wonder if the Department is contemplating making similar loans for similar projects for similar living?

Mr. Hellyer: I think we are going to make loans for some student housing. I would not want to be too categorical as to the particular types which might be included. This is another area where a great deal of experimentation has taken place and where new policies are being developed. I think the Corporation would probably want to keep an open mind as to the range of types of projects it would finance.

Mr. Robinson: I am not suggesting, Mr. Chairman, that we legislate morality or immorality but I am a bit concerned about the limits that we might set on allowing this kind of loan to be used in this manner.

Mr. Hellyer: One extraneous observation I might make is that the Task Force just raised the question as to the relative priority of student housing and suggested it might not be

[Interprétation]

M. Robinson: Je constate qu'en 1967-1968, 3 millions de dollars ont été perdus pour le subventionnement d'ensembles domiciliaires publics. En 1968-1969, ce poste du budget a été porté à \$4,200,000 et, pour 1969-1970, vous prévoyez une perte de \$7,900,000. Pourquoi le logement public doit-il nécessairement être déficitaire?

M. Hellyer: Parce que les loyers sont en deçà du coût économique du logement. C'est là précisément la raison d'être des logements publics. Plus vous aurez de logements publics, plus les pertes seront élevées.

M. Robinson: Considérez-vous que le collège Rochdale, à l'université de Toronto, est un lieu de résidence du type de logements publics?

M. Hellyer: Non, c'est une résidence pour étudiants et ce n'est pas subventionné.

M. Robinson: De toute façon, vous fournissez des fonds en vue de la construction.

M. Hellyer: C'est exact.

M. Robinson: Dans l'attribution de ses prêts, est-ce que le ministère a tenu compte de ce *laissez-faire*, de cette façon de vivre ultra-permissive qui y règne?

M. Hellyer: En accordant des prêts, nous ne croyons pas que nous avons à nous immiscer dans les chambres à coucher du collège Rochdale.

M. Robinson: Je me demande si on songe à accorder des subventions semblables pour des projets d'habitations semblables?

M. Hellyer: Je crois que nous allons accorder des prêts pour certaines résidences d'étudiants. Je ne veux pas évidemment être trop catégorique quant aux genres qui pourront être inclus. C'est un autre secteur où beaucoup d'expériences ont lieu en ce moment, où de nouvelles lignes de conduite sont mises au point et je crois que la Société veut garder un esprit ouvert quant au genre de projets qu'elle pourra subventionner.

M. Robinson: Je ne dis pas, monsieur le président, que nous devons passer des lois sur la moralité ou l'immoralité, mais je suis quelque peu inquiet et je me demande quelles limites nous pourrions imposer lorsque nous accordons des prêts de cette sorte.

M. Hellyer: Une observation que je peux faire: notre groupe d'étude a soulevé la question de la priorité relative des résidences d'étudiants et a conclu que ces projets ne

[Text]

rated quite as high as it has been in relation to family accommodation, for example, but, having said that, it is still the policy of the government and the Corporation to make sizeable amounts of money available for student housing in the coming year.

Mr. Robinson: On a question of information, I notice one section states:

To reimburse Central Mortgage and Housing Corporation...for the amounts of loans for sewage treatment projects forgiven to a Province, municipality of municipal sewerage corporation...

What municipalities benefit from this kind of program?

Mr. Hellyer: Just about any municipality that applies for and receives a loan under this section, and they extend right across the country.

Mr. Robinson: I am trying to draw a distinction here between a loan that is to be paid back and a loan that is forgiven. How do you apply for a loan that is going to be forgiven? I have constituents and municipalities that would be only too happy to take advantage of this kind of loophole.

Mr. Hellyer: I do not think it is a loophole. Would you like to describe exactly how it works, Mr. Hignett?

Mr. H. W. Hignett (President, Central Mortgage and Housing Corporation): A sewage treatment loan is for two-thirds of the cost of building a sewage treatment plant or truck sewers, and once the project is completed 25 per cent of the amount of the loan is forgiven. This applies to all projects.

Mr. Robinson: In other words, you put up three-quarters of the cost.

Mr. Hignett: Two-thirds.

Mr. Robinson: Two-thirds of the cost to start with.

Mr. Hignett: As a loan.

Mr. Robinson: I see.

Mr. Hignett: And when the work is completed 25 per cent of that loan is written off.

Mr. Robinson: I see. And in total this would amount to this \$9 million estimated for 1969-70?

[Interpretation]

devraient pas être cotés si haut de l'échelle des priorités, comparativement aux logements familiaux, par exemple. Néanmoins, c'est encore la politique du gouvernement et de la Société d'accorder des sommes considérables pour les résidences des étudiants, au cours de l'année qui vient.

M. Robinson: J'ai un renseignement à demander; je lis, dans un article:

Remboursement à la Société centrale d'hypothèques et de logement des montants des prêts consentis aux fins d'entrées de traitement des eaux-vannes qu'elle a remis à un gouvernement provincial, à une municipalité ou à une corporation municipale de service d'égout...

Quelles sont les municipalités qui en bénéficient?

M. Hellyer: N'importe quelle municipalité qui présente une demande de prêt et qui le reçoit en vertu de cet article; il y en a dans tous les coins du pays.

M. Robinson: J'essaie d'établir une distinction entre un prêt qui doit être remboursé et un prêt qu'on n'a pas à rembourser. Comme ça, peut-on obtenir des prêts qui ne sont pas remboursables. J'ai des commettants et j'en connais des municipalités qui aimeraient bien tirer profit de cette sorte d'échappatoire.

M. Hellyer: Ce n'est pas un échappatoire. Pourriez-vous nous dire exactement comment cela fonctionne, monsieur Hignett?

M. H. W. Hignett (président, Société centrale d'hypothèques et de logement): Le prêt portant sur une installation de traitement des eaux-vannes couvre les deux tiers du coût de construction de l'usine de traitement des eaux-vannes ou des égouts collecteurs. Lors que le projet est terminé, 25 p. 100 du montant du prêt est amorti automatiquement. Cette disposition s'applique à tous les projets.

M. Robinson: En d'autres mots, vous déboursez les trois quarts du coût.

M. Hignett: Les deux tiers.

M. Robinson: Deux tiers du coût du prix au départ.

M. Hignett: A titre de prêt.

M. Robinson: Je vois.

M. Hignett: Et lorsque l'ouvrage est complété, 25 p. 100 du prêt est remis.

M. Robinson: Cela correspond donc au total de 9 millions de dollars pour 1969-1970.

[Texte]

[Interprétation]

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Mr. Hignett: That is right.

Mr. Robinson: I wonder if I could have an explanation of what is meant by urban renewal scheme and urban renewal agreement?

Mr. Hignett: Under Section 23 of the National Housing Act provision is made for a federal grant of 50 per cent of the cost of preparing an urban renewal scheme. An urban renewal scheme is a plan of action. It is the identification of a substandard area and the development of a plan for treating that area.

After the plan is completed the community may then apply for a grant to implement that scheme. The scheme, of course, includes not only the plan of action in dealing with the problems in the area but also the cost of doing so.

Mr. Robinson: This pertains to the urban renewal scheme. Would I understand that this is a scheme whereby the federal government will pay 50 per cent of the cost and the provincial government 25 per cent?

Mr. Hignett: It varies from province to province.

Mr. Robinson: I see.

Mr. Hignett: The federal government pays 50 per cent of the cost and the other 50 per cent is paid by someone else. In some provinces it is paid entirely by the municipality, and in other provinces the cost is shared.

Mr. Robinson: How does this differ from the urban renewal agreement?

Mr. Hignett: The urban renewal agreement is an agreement to implement the urban renewal scheme. It provides the funds to do what the scheme plans.

Mr. Robinson: Could you tell me if the department had anything to do with the preparation of the Metropolitan Toronto planning study that was done on urban renewal?

Mr. Hignett: Yes, there was an over-all urban renewal study done of both the City of Toronto and, later, Metropolitan Toronto. They were done under the section we are now considering as urban renewal studies, not as urban renewal schemes. Schemes have developed from those studies.

M. Hignett: C'est exact.

M. Robinson: Je me demande si vous pouvez m'expliquer ce que vous entendez par des plans de rénovation urbaine et des ententes visant la rénovation urbaine.

M. Hignett: Aux termes de l'article 23 de la *Loi nationale sur l'habitation*, on prévoit une subvention fédérale représentant 50 p. 100 du coût de la préparation d'un plan de rénovation urbaine. C'est là un plan d'action. On procède à l'identification d'un quartier marginal et à la mise au point d'un programme pour améliorer ce quartier.

Lorsque le programme est terminé, la collectivité peut alors demander une subvention pour la mise en vigueur du plan de réaménagement. Le plan, bien sûr, comprend non seulement le programme d'action pour régler les problèmes de la région, mais le coût que cela occasionne.

M. Robinson: Cela se rattache, je suppose, au plan de rénovation urbaine comme tel. Je suppose que c'est un projet pour lequel le gouvernement fédéral paiera 50 p. 100 du coût et le gouvernement provincial 25 p. 100? ...

M. Hignett: Cela varie d'une province à l'autre.

M. Robinson: Je vois.

M. Hignett: Le gouvernement fédéral paie 50 p. 100 du coût. L'autre moitié est versée par quelqu'un d'autre. Dans certaines provinces, ce sont les municipalités, et parfois, d'autres provinces partagent les frais avec les municipalités.

M. Robinson: Comment cela est-il différent de l'entente sur la rénovation urbaine?

M. Hignett: L'entente sur la rénovation urbaine vise l'application des programmes qui ont été conçus et elle permet le dégagement de fonds pour réaliser ces projets.

M. Robinson: Pouvez-vous me dire si le ministère a eu quoi que ce soit à faire avec la préparation et l'étude de la planification du Toronto métropolitain?

M. Hignett: Il y a eu une étude d'ensemble de rénovation urbaine qui a été faite pour la ville de Toronto, et par la suite, du Toronto métropolitain. Ces études ont été faites en vertu de l'article dont nous sommes saisis à titre d'études de réaménagement urbain et non pas de programmes. Certains programmes, évidemment, émanent de ces études.

[Text]

Mr. Robinson: Therefore it is the urban renewal study first, then the urban renewal scheme, and then you implement it through the urban renewal agreement.

Mr. Hignett: That is right.

Mr. Robinson: At what stage are we with the Metropolitan Toronto urban renewal study? Or has it gone any further than that as far as your department is concerned?

Mr. Hignett: As far as I know the Metropolitan urban renewal study has now been completed but the Metropolitan government has not applied for the development of an urban renewal scheme or the implementation of one. The City of Toronto has.

Mr. Robinson: One further question and it has to do with the reimbursement of \$2 million for Cité du Havre operating expenses. Could this be explained?

Mr. Hignett: When the fair was over at the end of 1967, the agreements provided that the assets of the corporation were to be divided among the partners. In the division of assets that took place at that time it was agreed among the three partners that the site known as Cité du Havre, which included the Autostad and the Victoria parking yard, be handed to the federal government as their share of the assets.

The reason the area itself was selected was that the old McKay Pier, Cité du Havre, was National Harbours Board land as was the Victoria parking lot, and so the land was largely federal land that had been leased to the World Fair Corporation for the duration of the fair. So it was thought proper that the assets that had been built on that land should become federal assets when the fair was completed.

Mr. Robinson: Will this operating cost occur from year to year?

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Mr. Hignett: The corporation was asked to administer these assets on behalf of the federal government. We undertook to do so at the beginning of 1968. Some of these assets were temporary assets; some were permanent. During the years the Corporation demolished a number of the temporary buildings including, for example, Man and the Community and Man and his Health, that is on cost. The Corporation administered the Administration

[Interpretation]

M. Robinson: Je crois comprendre qu'on fait d'abord une étude, qu'on établit ensuite un programme, qu'on passe à l'exécution de ce programme, d'après l'entente sur le réaménagement urbain.

M. Hignett: C'est exact.

M. Robinson: A quelle étape en sommes-nous de l'étude sur le réaménagement urbain du Toronto métropolitain? Ou, en ce qui concerne le ministère, est-ce que cette étude est plus avancée?

M. Hignett: Sauf erreur, cette étude est terminée, mais le gouvernement du Toronto métropolitain n'a pas présenté de demande en vue de l'établissement ou de la mise en application d'un programme de réaménagement urbain. La Cité de Toronto l'a fait.

M. Robinson: Une autre question qui intéresse le remboursement de 2 millions de dollars à la Société centrale d'hypothèques et de logement des frais d'exploitation de la Cité du Havre.

M. Hignett: A la fin de l'exposition de 1967, les ententes portaient que les biens de la Société soient divisés entre les associés. Dans la division des biens qui eut lieu à cette époque, les trois associés ont convenu que l'emplacement connu sous le nom de Cité du Havre, y compris l'Autostade et le parc de stationnement Victoria devaient revenir au gouvernement fédéral comme sa part des biens.

La raison du choix de ces terrains était que l'ancien quai McKay, à la Cité du Havre faisait partie du terrain du Conseil des ports nationaux, de même que le parc de stationnement Victoria, de sorte que le havre était en grande partie propriété fédérale, qui avait été louée à la Compagnie de l'Exposition universelle canadienne pour la durée de l'EXPO. On a donc pensé qu'il serait approprié de remettre les biens érigés sur cette propriété au gouvernement fédéral, à la fin de l'EXPO.

M. Robinson: Est-ce que ces frais d'opération se répètent annuellement?

M. Hignett: La Compagnie a été invitée à administrer ces biens au nom du gouvernement fédéral. Nous avons entrepris de le faire au début de 1968. Certaines de ces propriétés étaient provisoires, d'autres, permanentes. Au cours de l'année, la Compagnie a payé pour faire démolir bon nombre des bâtiments provisoires, y compris, par exemple, «L'Homme et la société», «L'Homme et la santé.» La Compagnie a administré l'édifice de l'Admi-

[Texte]

Building of the World Fair and during the year sold it to the National Harbours Board. we are still administering such assets as Habitat, the Autostad and some other buildings. In the meantime we are proceeding with the National Harbours Board through consultants to plan the further development of Cité du Havre, and there are some costs involved in this.

The Chairman: Is this your last question, Mr. Robinson? You time is up.

Mr. Robinson: Yes. Is there any revenue as a result of this?

Mr. Hignett: Yes, there are some revenues. There are revenues in the leasing of the Autostad, for example, to the Alouette Football Club. Seventy-two of the apartments in Habitat are now rented, so there are some revenues from a number of assets on Cité du Havre.

The Chairman: Mr. Gilbert?

Mr. Gilbert: Thank you, Mr. Chairman. My first question is to the Minister. Am I right in assuming, Mr. Minister, that as Chairman of the Task Force on Housing Development you were in full agreement with the recommendations contained therein? Is that a proper assumption to proceed on, Mr. Hellyer?

Mr. Hellyer: Yes, I will accept that.

Mr. Gilbert: Mr. Hellyer, are you in favour of the recommendation with regard to setting up a separate ministry of housing and urban development?

Mr. Hellyer: I just said I would not have put it in if I had not been, but at the same time I said long ago that it was by far not the most important one of the recommendations in the Task Force report.

Mr. Gilbert: From the indication of the Prime Minister this afternoon he certainly does not seem to be too enthusiastic about it.

Mr. Hellyer: You may have noticed in the Task Force report the concern that Parkinson's law might take over and it might involve a lot of additional expenditures without corresponding benefits. I think you have to look at this pretty carefully.

[Interprétation]

nistration de l'EXPO et, au cours de l'année, l'a vendu au Conseil des ports nationaux. Nous administrons encore, Habitat, l'Autostade et certains autres bâtiments. Entre-temps, nous poursuivons des négociations par l'entremise d'expert-conseils, avec le Conseil des ports nationaux, afin de planifier la mise en valeur de Cité du Havre, et cela occasionne des frais.

Le président: Est-ce votre dernière question, monsieur Robinson? Votre temps est écoulé.

M. Robinson: Oui. Y a-t-il des recettes qui découlent de cette administration?

M. Hignett: Oui, il y a des recettes dans le cas de la location de l'autostade, par exemple, au club de football Alouette. 72 des appartements d'Habitat sont maintenant loués, de sorte qu'il y a des recettes provenant d'un certain nombre de biens de la Cité du Havre.

Le président: Monsieur Gilbert?

M. Gilbert: Merci, monsieur le président. Je pose ma première question au ministre. Ai-je raison de supposer, monsieur le ministre, qu'à titre de président du Groupe d'étude sur l'habitation, vous étiez pleinement d'accord avec les recommandations qui étaient contenues dans ce rapport? Est-ce que c'est là une bonne hypothèse à poursuivre, monsieur Hellyer?

M. Hellyer: Oui, j'accepte cela.

M. Gilbert: Monsieur Hellyer, est-ce que vous préconisez la recommandation concernant l'établissement d'un ministère séparé de l'Habitation et du Développement urbain?

M. Hellyer: Je viens de dire que je ne l'aurais pas fait insérer dans le rapport si je n'avais pas été en faveur, mais en même temps, j'ai dit, il y a longtemps, que ce n'était peut-être pas, loin de là, la recommandation la plus importante du rapport du Groupe d'étude.

M. Gilbert: D'après les indices que le premier ministre a donnés cet après-midi, il semble qu'il ne soit pas trop enthousiaste là-dessus.

M. Hellyer: Vous avez constaté, dans le rapport du Groupe d'étude, qu'on craint que la Loi Parkinson ne prenne la relève et n'entraîne une foule de dépenses supplémentaires sans bénéfices correspondants. Par conséquent, il faut être très prudent là-dessus.

[Text]

Mr. Gilbert: When could we expect the ministry to be set up, Mr. Minister?

Mr. Hellyer: Not immediately.

Mr. Gilbert: Not immediately. With regard to the 11 per cent sales tax, are you in agreement with that Mr. Minister?

Mr. Hellyer: Mr. Chairman, I think I object to this—not for any particular reason except that it is repetition. I just said that as a member of the Task Force I agreed with everything in the Task force report at the time it was written.

The Chairman: On a point of order, I think you should stick to the vote as much as possible.

Mr. Gilbert: I thought, Mr. Chairman, that the Minister did delve into some of the recommendations in the Task Force report in his opening statement. I was just trying to elicit from him some of the ideas that he had and when he would implement them. That was the reason for it. That is why I asked my last question. When could we expect the removal of the 11 per cent sales tax, Mr. Minister?

Mr. Hellyer: I think as soon as levels of government have sufficient excess of revenues over expenditures you can expect tax relief in many areas, and this would be one of the first to be considered. I would think at both the provincial and federal levels, but this is just my own opinion.

Mr. Gilbert: With regard to the importance of the purchase of land and the high cost of land, Mr. Minister, I notice that there is a recommendation with regard to a capital gains tax. Would you consider that as a high priority item with regard to bringing down the cost of land?

Mr. Hellyer: If the recommendation on land banking were put into effect, it would soon become academic.

Mr. Gilbert: What is your reason for that, Mr. Hellyer?

Mr. Hellyer: As soon as municipalities undertook to acquire and service land as a matter of normal course, when they would be the people who would be in ownership of the land for development and the other problem ceases to exist in its present form.

[Interpretation]

M. Gilbert: A quelle date pouvons-nous attendre à ce que le ministère soit établi, monsieur le ministre?

M. Hellyer: Pas dans un avenir immédiat.

M. Gilbert: Pas dans un avenir immédiat. En ce qui concerne la taxe de 11 p. 100, est-ce que vous souscrivez à cette taxe, monsieur le ministre?

M. Hellyer: Je m'oppose à ce genre de question, monsieur le président, pour la simple raison que c'est une répétition. J'ai dit que, à titre de membre du Groupe d'étude, j'ai souscrit à toutes les recommandations de son rapport au moment qu'il a été rédigé.

Le président: Sur une question de principe je crois que vous devriez vous en tenir aux crédits qui sont à l'étude, le plus possible.

M. Gilbert: Je pensais, monsieur le président, que le ministre, dans sa déclaration initiale, a fouillé dans certaines des recommandations du rapport du Groupe spécial. J'essaie simplement de tirer au clair certaines des idées qu'il a eues et de savoir la date où il entend les concrétiser. C'était le but de ma dernière question.

J'aimerais savoir quand nous pouvons espérer que sera abolie la taxe de vente de 11 p. 100, monsieur le ministre?

M. Hellyer: Je crois que, lorsque les divers paliers du gouvernement auront suffisamment de ressources en excédent sur les dépenses, on pourra peut-être s'attendre à un dégrèvement dans plusieurs domaines, et la taxe de vente de 11 p. 100 sera la première à disparaître. Je crois que cela se fera aux paliers fédéral et provinciaux, mais ce n'est que mon humble opinion.

M. Gilbert: Quant à l'importance de l'achat de terrains et du coût élevé que cela représente, monsieur le ministre, je constate qu'il y a une recommandation concernant une augmentation de la taxe sur les plus-values.

Est-ce que cela est un article prioritaire pour faire baisser le coût des terrains?

M. Hellyer: Si les recommandations sur le regroupement des terrains étaient adoptées, cela deviendrait purement théorique.

M. Gilbert: Pour quelle raison, monsieur Hellyer?

M. Hellyer: Dès que les municipalités auront commencé à acquérir et à lotir les terrains de façon normale, elles seront alors les propriétaires des terrains à développer et les autres problèmes cesseront d'exister dans leur forme actuelle.

[Texte]

Mr. Gilbert: I notice that in the report there is the recommendation to make loans available to municipalities for the acquisition of land. Is there anything in your 1969 budget to permit the acquisition of land by

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municipalities? In other words, are there any moneys available for loans to municipalities?

Mr. Hellyer: There is money available for land banking in the 1969-70 Estimates. The actual amount which will be spent on the various programs has yet to be determined by the government after its policy review is complete.

Mr. Gilbert: I would like to get your views, Mr. Minister, with regard to whether money should be loaned to municipalities to purchase land, or whether it should be loaned to the provincial governments or, in the future, to regional governments? What is your reasoning for municipal loans?

Mr. Hellyer: I support the simplest mechanics possible; in other words, the government with the cleanest lines of communication, the least overhead and the least red tape

Mr. Gilbert: Again the reason I ask that, Mr. Minister, is that in the City of Toronto they have passed over to the Ontario Government the problems of housing and, as you know, it is the Ontario Housing Corporation that determines much of the housing policy. What you are really doing is sort of sending it back to the municipality and saying, "We will make homes available". Am I right in that conclusion?

Mr. Hellyer: You are comparing oranges and apples to a certain extent, in that you are talking about the public housing in the city being turned over—at least, I think that was the reference. The land banking being done in the metropolitan areas is still being done by a partnership.

Mr. Gilbert: Has there been any encouragement from the municipalities relative to the recommendation that they should participate?

Mr. Hellyer: Yes; some of them are very enthusiastic, others not at all. I think this just depends on the municipality, on their experience and on the experience of the people who are in charge of the municipality at the time; but as you will recall from the Task Force Report, there are some places in the country

[Interprétation]

M. Gilbert: Je constate que dans le rapport, on recommande d'accorder des prêts aux municipalités pour l'acquisition de terrains. Y a-t-il quoi que ce soit dans votre budget de 1969, pour permettre l'acquisition de terrains par les municipalités? En d'autres termes, y a-t-il des fonds qui sont disponibles en vue de prêts aux municipalités?

M. Hellyer: Il y a des fonds pour le regroupement des terrains dans les prévisions budgétaires de 1969-1970. Le montant réel qui sera dépensé pour les divers programmes reste à être déterminé par le gouvernement, lorsque ce dernier aura terminé la révision de sa politique.

M. Gilbert: Que pensez-vous, monsieur le ministre? Devrait-on faire des prêts aux municipalités pour l'achat de terrains ou devrait-on les faire aux gouvernements provinciaux, ou à l'avenir, aux gouvernements régionaux? Que pensez-vous des prêts aux municipalités?

M. Hellyer: Je suis en faveur du système le plus simple possible; en d'autres termes, le gouvernement qui a les moyens de communication les plus sains, le moins de frais généraux et le moins de chinoïseries administratives.

M. Gilbert: La raison pour laquelle j'ai posé à nouveau la question c'est parce que à Toronto, on a cédé au gouvernement d'Ontario les problèmes de logement et comme vous le savez, c'est la société d'habitation de l'Ontario qui détermine la plupart des politiques de logement de l'Ontario et ce que vous faites, vous, c'est de renvoyer la balle aux municipalités pour dire: «Nous allons mettre des logements à votre disposition». Est-ce que j'ai raison de conclure cela?

M. Hellyer: Jusqu'à un certain point, vous comparez pommes et oranges lorsque vous dites que le logement public a été cédé à l'Ontario. La mise en commun des terrains qui se fait dans les régions métropolitaines est toujours faite par une association.

M. Gilbert: Est-ce que les municipalités ont laissé entendre qu'elles participeraient?

M. Hellyer: Certaines sont très enthousiastes, certaines pas du tout. Ça dépend de l'expérience qu'on a eue dans la municipalité, de l'expérience des gens qui étaient alors responsables de la municipalité. Si vous vous rappelez le rapport du groupe de travail, il y a certaines parties du pays où on procède de

[Text]

where this is done on a very wide scale and very successfully.

We have considered and believed, on the basis of the experience of those who have undertaken it, that it is a good policy, and we hope that in a few years it will be widespread practice.

Mr. Gilbert: Have you had any response from the City of Toronto, Mr. Hellyer, about this scheme?

Mr. Hellyer: Not on that particular one, that I am aware of.

Mr. Gilbert: May I ask your officials for a breakdown of the housing units last year? You noted 196,878. How many were single-family dwellings, how many were multiple units and how many were public housing units?

Mr. Hellyer: Yes, we have that. Actually, Mr. Gilbert, on March 24 I will be tabling the annual report which has all of the statistical material in it. It will give you a better breakdown, not only by housing type but by region and city, and so on.

Mr. Gilbert: Could one of your officials tell us the number of public housing units that we have in Canada—our total stock?

While he is looking that up, Mr. Hellyer,—I do not want to waste the time of the Committee—I notice that you talk about \$20 billion for housing over a five year period, and \$10 billion to come from the private institutions. That would mean that the other \$10 billion would come, as you say, from direct deposits or other financing plus government moneys; and you have said in the report that it was 42 per cent private institutions, 40 per cent private moneys for deposits and other financing and 18 per cent government moneys. Is the \$20 billion going to be on the same ratio?

Mr. Hellyer: I do not think anyone can say in advance exactly what the ratio will be, but we anticipate the ratio will not change too much from what it has been in the immediate past.

Mr. Gilbert: Is that \$10 billion for new housing, Mr. Hellyer?

Mr. Hellyer: It is all for new housing.

[Interpretation]

cette façon à grande échelle et avec beaucoup de succès.

Nous avons réfléchi sérieusement à la situation et d'après l'expérience, les municipalités où nous avons lancé notre projet, nous avons estimé que c'était une bonne politique et nous espérons que ce sera une pratique bien répandue d'ici quelques années.

M. Gilbert: Avez-vous eu une réponse de la ville de Toronto au sujet de ce programme?

M. Hellyer: Non, pas que je sache.

M. Gilbert: Je voudrais avoir les détails des unités de logements de l'an dernier. Vous avez parlé de 196,878. Est-ce que vous pourriez me dire combien il y avait de logements unifamiliaux, de logements multiples et de logements subventionnés?

M. Hellyer: Oui, nous avons les chiffres. En fait, le 24 mars, je vais déposer le rapport annuel et toutes les statistiques pertinentes. Vous y trouverez les détails pas seulement par type de logement, mais par région, par ville, etc. aussi.

M. Gilbert: Est-ce que de vos hauts fonctionnaires ou collaborateurs pourrait nous dire quelle est la quantité d'unités de logement subventionnés que nous avons au Canada?

Pendant qu'ils regardent leurs chiffres, je ne voudrais pas faire perdre le temps du Comité. Je crois que vous parliez de 20 milliards répartis sur une période de cinq ans et 10 milliards qui doivent venir des institutions privées. Ceci voudrait donc dire que les autres 10 milliards viendraient de dépôts directs ou d'autres sources ainsi que des fonds du gouvernement et vous avez dit dans votre rapport que ça représentait 42 p. 100 pour les institutions privées, 40 p. 100 de dépôts privés, de fonds privés et autre financement et 18 p. 100 de fonds du gouvernement. Est-ce que vous avez gardé la même proportion à l'égard des 20 milliards?

M. Hellyer: On ne peut prévoir quelle sera exactement la proportion. Je pense que la proportion ne changera pas tellement de ce qu'elle était.

M. Gilbert: Est-ce que ces 10 milliards visent les nouveaux logements?

M. Hellyer: C'est entièrement pour les nouveaux logements.

[Texte]

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Mr. Gilbert: How much has been provided for your recommendation that some of the moneys go to old housing?

Mr. Hellyer: Some of the government money available would be invested in older housing; and, of course, do not forget that there is a revolving fund in effect also. We are just talking about new money now, not the re-investment of moneys already in the mortgage field.

Mr. Gilbert: Would there be that much revolving money, Mr. Hellyer?

Mr. Hellyer: Quite a bit.

Mr. Gilbert: Approximately how much would it be?

Mr. Hellyer: Mr. Adamson, with the repayments and capital do you know what the turnover would be in the total housing stock in Canada per year?

Mr. R. Adamson (Executive Director, Chief Economist, Central Mortgage and Housing Corporation): The turnover?

Mr. Hellyer: The capital repayments total?

Mr. Adamson: The institutional repayments are about \$1 billion a year but those are lending institutions. In the case of the other kinds of mortgages we are not quite sure.

Mr. Hellyer: We have in the corporation \$136 million.

Mr. Gilbert: Mr. Hellyer, did you give the figure for the total public housing stock?

Mr. Adamson: About 40,000 units.

Mr. Gilbert: And what percentage of the total housing units would that 40,000 represent?

Mr. Adamson: One per cent.

Mr. Gilbert: Do you know what the ratio of public housing units would be in Great Britain? Would it be 30 percent.

Mr. Hellyer: I do not know; but I imagine it would be quite high.

Mr. Gilbert: Do you know what it would be in the United States, Mr. Hignett?

Mr. Hignett: One or two per cent.

[Interprétation]

M. Gilbert: Alors quels fonds est-ce que l'on a prévus pour les anciens logements?

M. Hellyer: Une partie des fonds du gouvernement servira à des anciens logements; et évidemment on aura un fonds renouvelable, nous parlons simplement de nouveaux fonds et pas de réinvestissements d'argent déjà présent dans le secteur de l'hypothèque.

M. Gilbert: Y aurait-il tant de fonds renouvelables?

M. Hellyer: Pas mal.

M. Gilbert: Approximativement combien?

M. Hellyer: Monsieur Adamson, avec les remboursements et le capital, quel serait le roulement des fonds consacrés au logement au Canada chaque année?

M. R. Adamson (Directeur exécutif et économiste en chef, Société centrale d'hypothèque et de logement): Le roulement?

M. Hellyer: Les remboursements de capitaux au total.

M. Adamson: Environ un milliard de dollars par année pour les institutions de prêts. Quant aux autres sortes d'hypothèques, nous ne sommes pas certains.

M. Hellyer: Dans la société nous avons 136 millions maintenant.

M. Gilbert: Monsieur le ministre avez-vous le chiffre pour l'ensemble des constructions domiciliaires subventionnées?

M. Adamson: Environ 40,000 unités.

M. Gilbert: Quel pourcentage du total des unités de logement représenterait alors ce chiffre?

M. Adamson: 1 p. 100.

M. Gilbert: Et le pourcentage d'unité de logement subventionné au Royaume-Uni, que serait-il, avez-vous une idée? Environ 30 p. 100?

M. Hellyer: Assez élevé, je crois.

M. Gilbert: Savez-vous quel serait le chiffre aux États-Unis.

M. Hignett: Un ou deux p. 100.

[Text]

The Chairman: Your time is up, Mr. Gilbert.

Mr. Gilbert: I will come back on the second round, Mr. Chairman.

The Chairman: Mr. McCleave?

Mr. McCleave: Thank you, Mr. Chairman. I wish to direct a few questions on public housing to the Minister, or to Mr. Hignett or his officials.

Am I correct in understanding that 42 public housing projects have been approved since February?

Mr. Hellyer: Forty-eight, I think. I think the press release says 48.

Mr. McCleave: Do these projects fit within the concept of a good public housing set-up as set forth in the Task Force Report?

Mr. Hellyer: I think they meet the test to the extent that they do not have the intensity of sociological and psychological problems that we found related to particularly the large elevator-type buildings.

There are varying degrees. I think you need more information than is presently available to try to do a thorough assessment of this whole field, but certainly the problems were not nearly so severe, nor nearly so acute, in the dispersed projects and the smaller projects—projects on the ground—where people had more privacy and where the criteria that I mentioned earlier apply.

Mr. McCleave: To balance the 48 projects that have been approved, do you know the number of projects that have been disapproved, again since February 1?

Mr. Hellyer: None have actually been disapproved. I think there are three in particular that have not been approved, which all fall into the category of the big, elevator-type building, and which are still under examination.

Mr. McCleave: What kind of notice has been given to municipalities and provinces—the other elements of the partnership—on the type of project which can go through the sociological and other screens that the Task Force mentioned? In other words, have they been given any kind of notice at all relative to what they should aim for in bringing in the Ottawa end of the partnership?

Mr. Hellyer: At our meeting with them in Toronto I gave them what I believed the cri-

[Interpretation]

Le président: Votre temps de parole est écoulé, monsieur Gilbert.

M. Gilbert: Je reviendrai plus tard, monsieur le président.

Le président: Monsieur McCleave.

M. McCleave: Merci monsieur le président.

Je voudrais poser quelques questions au sujet du logement subventionné au ministre, à M. Hignett ou à un de ses collaborateurs. 42 projets domiciliaires ont été approuvés dites-vous depuis le premier février si j'ai bien compris?

M. Hellyer: Je crois que dans le communiqué de presse, on dit 48.

M. McCleave: Est-ce que ces projets sont conformes à la notion d'un bon contexte de logement subventionné tel que décrit dans le rapport du groupe de travail que vous dirigez?

M. Hellyer: Je pense que les normes respectent ces recommandations, c'est-à-dire que nous n'y voyons pas encore les problèmes sociologiques et autres qu'on trouve en général dans les édifices-tours...

Il y a différents degrés, et je pense qu'il faut plus de renseignements que ceux que nous avons à notre disposition dans le moment pour essayer de faire un évaluation complète de cette situation. Mais c'est certain que les problèmes ne sont pas ni aussi graves, ni aussi aigus dans les projets plus petits où les gens ont plus d'intimité et où s'appliquent les critères que j'ai mentionnés tout à l'heure.

M. McCleave: Pour équilibrer les 48 projets qui ont été approuvés, savez-vous quelle quantité de projets n'ont pas été approuvés depuis février toujours?

M. Hellyer: Aucun n'a été rejeté. Je pense qu'il y en a trois en particulier qui n'ont pas été approuvés, qui entrent tous dans la catégorie des grands édifices-tours et ils sont encore à l'étude.

M. McCleave: Quel genre de préavis a-t-on donné aux municipalités et aux provinces et aux autres éléments de l'association au sujet du genre de projet qui respecte les normes sociologiques et autres mentionnées par le groupe de travail. Autrement dit, leur a-t-on donné un préavis sur ce qu'il fallait faire pour obtenir la collaboration d'Ottawa?

M. Hellyer: Je les ai rencontrés à Toronto et je leur ai dit quels étaient les critères

[Texte]

[Interprétation]

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eria should be for the present time, in general terms; so that they knew what our thinking was. I further said that as soon as the government had completed its review I would end it to them in writing so that they would now, with slightly more precision, what it was that we would entertain and what would not be entertained.

Mr. McCleave: When you refer to the government completing its review are you referring to the further studies in this field, as set forth in the Task Force report?

Mr. Hellyer: No, I am not. I am referring to the immediate policy review, which should be completed very soon.

Mr. McCleave: What about the further studies that are suggested by the Task Force?

Mr. Hellyer: These should be commenced at once, but I would think it will take something of the order of six months to complete them, and they will really apply to next year's building season rather than to this.

Mr. McCleave: Will these be carried out by CHMC itself or will they be commissioned?

Mr. Hellyer: No, they will be commissioned to private organizations.

Mr. McCleave: We note in the vote before us the projected larger increase of the noneys payable to overcome losses in the public housing projects, and a rather startling change there which I presume means one of two things; either there is going to be a great deal more public housing projected this year, or else the losses in the present units will be more substantial. Is it a combination of both?

Mr. Hignett: There were 10,000 units of public housing put under construction in 1968, and of course they do not require subsidies until they are completed and the family has moved in. This is just an indication of the growing stock of public housing.

Mr. McCleave: Has there been any measurement of the type of housing project which imposes the least strain on this particular vote, that is, the least amount of public money needed to support it? Has the Corporation or the Minister found any pattern there from the year to year operating costs as to what project is easiest on the taxpayer?

qu'on attendait pour le moment, en général, pour qu'ils sachent exactement quelle était notre pensée. Je leur ai dit qu'aussitôt que le gouvernement aurait terminé son étude, on leur ferait part du rapport pour qu'ils aient un peu plus de précisions sur ce que nous voulons encourager ou non.

M. McCleave: Quand vous parlez du rapport du gouvernement, vous parlez des autres études que vous encouragez dans votre rapport?

M. Hellyer: Non. Je parle d'une revision immédiate de la politique qui devrait être terminée sous peu.

M. McCleave: Que faites-vous des autres études qui ont été suggérées par le groupe d'étude?

M. Hellyer: Il faudrait les entreprendre dès maintenant mais ça prendrait quelque six mois pour terminer une chose de ce genre. De toute façon, donc ça s'appliquerait à l'année prochaine.

M. McCleave: Est-ce que ces projets seront mis en œuvre par la Société centrale d'hypothèques et de logement ou à contrats?

M. Hellyer: Non, on passera des commandes à des organisations privées.

M. McCleave: Je vois dans le crédit dont nous sommes saisis visant les augmentations prévues pour les fonds de compensation pour les pertes des projets de logements subventionnés. C'est un changement assez étonnant qui, je suppose, veut dire que, de deux choses l'une, il y aura beaucoup plus de logements subventionnés prévus cette année, ou les pertes des logements actuels seront plus substantielles. Est-ce que c'est une combinaison des deux?

M. Hignett: 10,000 unités ont été mises en chantier en 1968, évidemment, il n'y a pas de subventions tant qu'ils ne sont pas terminés et que les familles ne les ont pas emménagés. Ce n'est qu'une indication du taux d'accroissement des logements subventionnés.

M. McCleave: Est-ce qu'on a étudié d'une façon ou d'une autre, le genre de projet de logement dont le fardeau sur ce crédit serait le moins élevé, c'est-à-dire qui exige le moins d'appui financier? Est-ce que la Société, ou est-ce que le ministre a constaté si, à partir des coûts d'exploitation d'une année à l'autre, quel projet serait le moins lourd pour les contribuables?

[Text]

Mr. Hignett: The difficulty, Mr. McCleave, is that in Canada the highest construction costs tend to be in the areas of lowest productivity, so the highest construction costs tend to be in the areas of lowest income. The amount that a person pays for rent in a public housing project is related to income. So incomes tend to be very high in some sections of the country and lower in other sections of the country for the same kinds of housing.

Mr. McCleave: I see your point; it is more an income problem.

Mr. Hignett: It is an income and productivity problem.

Mr. McCleave: The point I was getting at, and perhaps the Minister and Mr. Hignett could comment on it, is that you may find from experience that there are certain parts of the city where you could develop public housing projects which need less help under this vote than in other parts of the city. Has there been any study or finding made in that direction?

Mr. Hignett: Mr. McCleave, one of the important costs of public housing is, of course, the land on which the housing sits. Central land in a city is very expensive.

Mr. McCleave: It becomes more expensive when you have to demolish something that is already there.

Mr. Hignett: If slum clearance is involved it becomes much more expensive again.

Mr. McCleave: Is this factor, the land cost problem that you mentioned, playing a significant role in the new directions that are contemplated for public housing in Canada? I am thinking that instead of large-scale assembly of land for a large-scale public housing project in one part of the city, you might find it simpler to spread it out in smaller units in various parts of the city.

Mr. Hellyer: There are two or three alternatives that have been suggested. One of them, of course, is buying existing housing that is dispersed so that people will blend

[Interpretation]

M. Hignett: Le problème, c'est qu'au Canada, monsieur McCleave, les coûts de construction les plus élevés ont tendance à surgir dans les secteurs de moindre productivité, de sorte que les coûts de construction les plus élevés ont tendance à se trouver dans les régions où le revenu est le plus faible. La somme qu'une personne verse pour son loyer dans un projet de logement subventionnés est liée étroitement à son revenu. Les revenus sont donc très élevés dans certaines parties du pays et inférieurs dans d'autres parties, pour le même genre d'habitation.

M. McCleave: Je comprends. Donc, c'est un problème de revenu.

M. Hignett: C'est un programme de productivité et de revenu.

M. McCleave: Ce que je voulais dire, et M. Hignett ou le ministre pourraient peut-être faire un commentaire à ce sujet, c'est que l'expérience a pu démontrer, je pense, qu'il y a certaines parties d'une ville où vous pouvez mettre sur pied des projets de logements subventionnés qui demanderaient moins d'assistance, par exemple, en vertu de ce crédit que d'autres parties de la ville. Est-ce qu'on fait une étude ou des constatations dans ce sens?

M. Hignett: Monsieur McCleave, un des facteurs importants du coût des logements subventionnés, c'est naturellement le terrain où on construit les logements. Les terrains dans le centre des villes coûtent extrêmement cher.

M. McCleave: Naturellement, c'est encore plus cher lorsque vous devez démolir quelque chose qui s'y trouve déjà.

M. Hignett: S'il faut démolir les taudis, c'est encore beaucoup plus cher.

M. McCleave: Est-ce que ce facteur, le problème du coût du terrain que vous avez mentionné, joue un rôle important dans les nouvelles orientations que l'on envisage pour les logements subventionnés au Canada? Je pense, par exemple, qu'au lieu d'avoir un regroupement de terrains sur une grande échelle, pour un projet de logements subventionnés sur une grande échelle, dans une partie de la ville, il serait peut-être plus simple de l'étendre en de petites unités dans différentes parties de la ville.

M. Hellyer: Deux ou trois autres solutions ont été suggérées. L'une est d'acheter les logements qui existent dans le moment de façon à ce que les gens puissent s'intégrer à la collec-

[Texte]

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[Interprétation]

to the community at large in a more acceptable fashion. Then another one is smaller projects spread around the city, and this is being done in a number of cases. One of the limiting factors, of course, is transportation. You have to have reasonable transportation to the downtown areas or to the work areas for people in public housing. There are a number of factors which have to be taken into account but to the extent that transportation is available and that you can find the other social and community services you want to have, then there is no doubt that spreading smaller projects around the city is more desirable than concentrating them all in one area.

Mr. McCleave: Has any thought been given to the idea of single dwellings as public housing, that is, buying up older homes, perhaps lapping some repairs on them, and making them available?

Mr. Hellyer: Very much so, and this has been done in some cases, and with quite satisfactory results.

Mr. McCleave: Many municipalities use that approach. Is that correct?

Mr. Hellyer: I do not know whether it would be true to say many, but some do in Saskatchewan, in British Columbia; there are some in Victoria, in Toronto, in Windsor, in Ottawa.

Mr. McCleave: And we have some, I know, in my own particular area. Do you anticipate that there will be a greater CMHC involvement in that particular direction?

Mr. Hellyer: There should be. You have to have a sponsor, though; you have to have somebody who wants to do it, whether it is the municipality or the provincial housing corporation. To the extent that they do, of course, it will be looked at. In the Task Force report this was recommended as one of the alternatives while we were looking at the problem of the big projects.

Mr. McCleave: Mr. Chairman, I have other questions, but I can come back later. I just wanted to deal with that field of public housing at the moment.

tivité d'une façon plus acceptable. L'autre solution est d'avoir de plus petits projets répartis dans la ville, et c'est ce qu'on effectue dans bien des endroits. Il y a évidemment certains facteurs restrictifs, dont le problème de transport. Il faut des moyens de transport adéquats pour se rendre au centre de la ville et aux endroits de travail pour les gens qui habitent dans les logements subventionnés. Par conséquent, il faut tenir compte de différents facteurs, mais du moment où le transport est disponible et qu'on fournit les autres services sociaux et communautaires que vous désirez, il n'y a pas de doute que l'éparpillement des projets de moindre envergure autour de la ville, est une solution plus souhaitable que la concentration dans une même section.

Mr. McCleave: Est-ce qu'on a songé à l'idée d'avoir des logements uni-familiaux parmi les logements subventionnés, c'est-à-dire qu'on achèterait une vieille maison, par exemple, on ferait quelques réparations et la mettrait à la disposition de la population?

Mr. Hellyer: Oui. On l'a fait dans certains cas avec des résultats des plus satisfaisants.

Mr. McCleave: C'est ce que font beaucoup de municipalités, n'est-ce pas?

Mr. Hellyer: Je ne dirais pas beaucoup de municipalités, mais on l'a fait en Saskatchewan, en Colombie Britannique, à Victoria. Il y en a à Toronto, à Windsor, à Ottawa.

Mr. McCleave: Et aussi dans ma propre circonscription. Est-ce que vous prévoyez qu'il y aura une plus grande participation de la Société centrale d'hypothèques et de logement dans ce domaine?

Mr. Hellyer: Ils devraient participer davantage. Mais il faut un parrain cependant et quelqu'un qui veuille bien participer, que ce soit la municipalité ou la société provinciale de logement. Nous l'étudierons dans la mesure où ils le feront. C'est ce qu'on a recommandé dans le rapport du groupe d'étude comme une des solutions au problème des projets d'envergure.

Mr. McCleave: J'aurais d'autres questions, monsieur le président, mais j'y reviendrai plus tard. Je voulais simplement aborder cette question de logements subventionnés maintenant.

[Text]

Mr. Haidasz: Mr. Chairman, I want to begin by asking the Minister, or the President of the Central Mortgage and Housing Corporation, how much money under NHA was lent for housing in the metropolitan Toronto area in the last fiscal year.

Mr. Hellyer: It has to be for the calendar year, I think, Mr. Haidasz.

Mr. Haidasz: While the President is looking for the figures, I would also like to know how much of this amount was for public housing. I am asking this question because the Minister and the members of this Task Force were told by the Ontario Housing Corporation that in the city of Toronto on their waiting list for public housing there were approximately 12,000 names. I was just wondering whether they have investigated this very long list, whether this is a list that demands the top priority for co-operation between the Ontario Housing Corporation and the Central Mort-

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gage and Housing Corporation, and what hope there is of accommodating these people as soon as possible, and how. I know that there are many members of the Toronto City Council who are most perturbed about this very long waiting list for public housing.

Mr. Hignett: If I could deal with your question about Metropolitan Toronto public housing, in 1968 there were 15 loans made for 3,872 units of new public housing and 1,397 units of existing housing purchased for public housing purposes, with a total federal investment of \$51,800,000 for public housing only.

Mr. Hellyer: The waiting list at the end of the year would have been as high or higher than at the beginning of the year?

Mr. Hignett: Well, it would have been no less.

Mr. Hellyer: I think that most of these people are housed, some in quite inadequate housing and some in adequate housing. For many it is an income problem rather than a housing problem. I do not think we have an analysis which would really show how many of the 12,000 or 14,000 would be content with the accommodation they have if their income was sufficient to carry it and in how many cases it is because the accommodation itself is completely unsatisfactory.

[Interpretation]

M. Haidasz: Je vais commencer, monsieur le président, en demandant au ministre ou au président de la Société centrale d'hypothèque et de logement, combien d'argent est-ce que la Société centrale d'hypothèques et de logement a prêté pour la construction de logements dans la région métropolitaine de Toronto, au cours du dernier exercice financier?

M. Hellyer: Il faudra que ce soit pour la dernière année civile, je crois, monsieur Haidasz.

M. Haidasz: Pendant qu'on cherche les chiffres, j'aimerais également savoir quelle partie de cette somme a été consacrée aux logements subventionnés. Je vous pose cette question parce que le ministre et les membres de son groupe d'étude ont appris de l'Ontario Housing Corporation que la ville de Toronto a environ 12,000 noms sur sa liste d'attente pour les logements subventionnés. Je me demande s'ils ont étudié cette très longue liste, si cette liste demande la première priorité de collaboration entre l'Ontario Housing Corporation et la Société centrale d'hypothèques

et de logement? Quel chance entrevoyez-vous de régler le problème de ces gens le plus tôt possible, et de quelles façons pouvons-nous le faire? Je sais qu'il y a plusieurs membres du conseil municipal de Toronto qui s'inquiètent énormément de cette longue liste d'attente pour les logements publics.

M. Hignett: Je pourrais traiter de votre question au sujet des logements publics dans le Grand-Toronto. En 1968, il y a eu 15 prêts relatifs à 3,872 nouveaux logements publics et à 1,397 maisons existantes achetées en vue de les convertir en logements publics, correspondant à un investissement total de \$51,800,000 de la part du gouvernement fédéral.

M. Hellyer: La liste d'attente à la fin de l'année aurait été aussi longue, sinon plus, qu'au début de l'année?

M. Hignett: Certainement pas moins.

M. Hellyer: Je crois que la plupart de ces gens sont parfois bien logés, parfois mal. Pour beaucoup d'entre eux, il s'agit surtout d'un problème de revenu, non de logement. Je ne crois pas que nous ayons une analyse qui nous montre réellement combien, parmi ces 12,000 ou 14,000, seraient satisfaits des logements qu'ils ont si leur revenu était assez élevé, et combien croient que leurs conditions actuelles de logement sont nettement insatisfaisantes.

Texte]

I think this is precisely the kind of thing we have to look at in some depth to find out not just the gross figures but what the figures are composed of—how many single people, how many couples without families and how many are satisfactorily housed if they just add the income to carry their present accommodation.

Mr. Haidasz: To your knowledge, was there during the last meeting between the Minister and the Ontario housing authorities any mention made of such a study conducted by the Ontario Housing Corporation which would answer some of these questions?

Mr. Hellyer: I do not think so specifically, but I think it is one area that should be studied.

Mr. Hignett: If I could deal with your question, the total NHA investment in Toronto by the lending institutions and CMHC in 1968 was \$427 million of which, as I said, more than \$51 million was for public housing.

Mr. Haidasz: That is all for the moment, Mr. Chairman.

Mr. Howe: Mr. Chairman, I have been interested for a long time in the question of decentralizing communities. I noticed the Minister is interested in this too because he speaks about satellite cities, new cities and things like that.

I understand that there is a satellite city being set up in the area of Preston. Does the Minister know anything about that?

Mr. Hellyer: Are you talking about a land assembly proposal with the Ontario Housing Corporation which is about midway between Galt, Preston and Kitchener?

Mr. Howe: That may be it. I had understood that it was a type of satellite city that was being proposed in that area.

Mr. Hellyer: If that is the one you are referring to, we are in partnership with the province in acquiring the land but we have not received from them, to the best of my knowledge, any specific proposal as to how it will be developed.

Mr. Howe: Mr. Chairman and Mr. Minister, do not think there is any particular challenge in assembling land in that area, which is one of the highest priced and most productive agricultural land areas in the Province of Ontario. If you were going to accept a chal-

[Interprétation]

Voilà le genre de choses qu'il nous faut étudier en détail pour avoir non seulement les chiffres en gros, mais aussi le nombre de célibataires, de ménages sans enfants, de gens qui seraient satisfaits de leurs logements actuels, s'ils avaient les moyens de les entretenir.

M. Haidasz: A votre connaissance, au cours de la dernière réunion entre le ministre et les responsables du logement en Ontario, a-t-on parlé de l'étude faite par l'Ontario Housing Corporation, dans laquelle il y a peut-être réponse à ces questions?

M. Hellyer: Je ne me souviens pas précisément qu'on en ait parlé, mais la question mérite d'être approfondie, je pense.

M. Hignett: Pour répondre à votre question, le montant total des investissements faits à Toronto en vertu de la loi par les institutions de prêts et le SCHL s'est établi à 427 millions de dollars en 1968, dont plus de 51 millions, je le répète, pour des logements publics.

M. Haidasz: C'est tout pour le moment, monsieur le président.

M. Howe: Monsieur le président, je m'intéresse depuis longtemps à la question de la décentralisation des collectivités. Or, je m'aperçois que le ministre s'y intéresse, lui aussi, parce qu'il parle de villes satellites, de nouvelles villes, et ainsi de suite.

Si je comprends bien, une ville satellite s'érige présentement dans la région de Preston. Est-ce que le ministre serait au courant de la chose?

M. Hellyer: Je suppose que vous parlez d'un projet de regroupement des terres réalisé en collaboration avec l'Ontario Housing Corporation dans une région à mi-chemin entre Galt, Preston et Kitchener.

M. Howe: C'est peut-être cela. Je croyais que l'on projetait un genre de ville satellite dans cette région.

M. Hellyer: Si c'est à ce projet que vous faites allusion, nous avons collaboré avec les provinces à l'acquisition des terrains, mais à ma connaissance nous n'avons pas eu de propositions précises quant à l'aménagement de ces terrains.

M. Howe: Monsieur le président, monsieur le ministre, je ne crois pas que le regroupement des terrains pose des difficultés particulières dans cette région, car il s'agit de terres arables les plus chères et les plus productives de l'Ontario. Là où l'aménagement d'une ville

[Text]

lence in connection with building a satellite city I would suggest you go up to the Bruce peninsula or up around Peterborough.

Mr. Hellyer: There are other places too where the land is not as good as it is in the areas you have referred to.

Mr. Howe: To me I think it is defeating its purpose because after all one of the big dangers and one of the big problems we have with regard to conservation in this nation is the fact that our cities are gobbling up much of our good productive land.

Mr. Hellyer: I do not think you would get much disagreement with that here, and I would urge you to pass the good word on to Mr. Randall and Mr. Robarts too, when you see them.

Mr. Howe: Let me put it another way, Mr. Minister. Has there been any discussion in connection with the optimum size of cities, the rate of growth of cities and things in that area that are creating such tremendous problems in our cities.

Mr. Hellyer: There has been a lot of discussion. I do not know if anyone has all of the answers yet.

Mr. Howe: But no one has come up with any definite decision on this type of thing, have they?

Mr. Hellyer: I think that is true, although there are certain things that can be said in respect of cities. Dr. Doxiadis, for example, has a theory and other people have theories as to how large cities should be, but I do not think there are any absolutes by any means.

Mr. Howe: Of course we do not want to get into the situation that they have in Tokyo where they have to have pushers to get people into the commuter trains so they can get them all into the cities.

Mr. Hellyer: Well, we do that in Toronto too.

Mr. Howe: Oh, you do that in Toronto, too! How many pushers do you have in Toronto?

Mr. Hellyer: There are a few.

Mr. Howe: I understand that there are funds available to the communities to set up these land banks that you were referring to.

Mr. Hellyer: There are funds available for land banking, if you are referring to the proposal of making loans to municipalities direct. This was a suggestion of the task force which has not yet been implemented in law.

[Interpretation]

satellite est un défi que vous pourriez relever c'est à la péninsule Bruce ou aux environs de Peterborough.

M. Hellyer: Il y a d'autres endroits aussi où les terres sont pires qu'aux endroits que vous venez de mentionner.

M. Howe: Je crois que cela va à l'encontre du but recherché, car l'un des grands problèmes ou risques que pose la conservation dans notre pays, c'est que les villes engouffrent beaucoup de nos terres productives.

M. Hellyer: Cela, peu de gens le nient. Alors, passez le bon mot à M. Randall et M. Robarts, lorsque vous les verrez.

M. Howe: Autrement dit, monsieur le ministre, y a-t-il eu des délibérations au sujet de l'ampleur optimale des villes, leur taux de développement et divers autres problèmes qui affligent présentement nos centres urbains?

M. Hellyer: On en a discuté longuement. Je ne crois pas qu'on ait encore trouvé réponse à tout.

M. Howe: Personne n'a pris de décisions bien fermes dans ce domaine, n'est-ce pas?

M. Hellyer: Non, mais il y a des choses qu'on peut dire au sujet des villes. Ainsi, M. Doxiadis, mais bien d'autres aussi, ont tous une théorie quant aux dimensions qu'une ville devrait avoir. À mon avis, toutefois, il n'y a rien d'absolu à cet égard.

M. Howe: Je ne voudrais pas, bien sûr, qu'on en arrive à devoir embaucher des gens, comme à Tokyo, pour pousser les abonnés dans les trains qui les amènent en ville.

M. Hellyer: Nous faisons cela aussi à Toronto.

M. Howe: Ah oui? Combien avez-vous de «pousse-gens» à Toronto?

M. Hellyer: Plusieurs encore.

M. Howe: Sauf erreur, on fournit des fonds aux collectivités qui veulent se charger du regroupement des terrains, n'est-ce pas?

M. Hellyer: C'est-à-dire qu'il y a des sommes affectées à la mise en commun des terres. Quant à consentir des prêts directs aux municipalités à cette fin, la proposition en a été faite par la Commission, mais elle n'a pas encore fait l'objet d'une loi.

[Texte]

Mr. Howe: I thought you intimated that here were funds available for that.

Mr. Hellyer: There are funds available for partnerships between the federal and provincial governments for the acquisition of land and this can be in or adjacent to a municipality, and usually is.

Mr. Howe: And of course you spoke of serviced land. Where will the money come from to service the land?

Mr. Hellyer: The partnership can include the sharing of the costs of servicing the land.

Mr. Howe: Of course this is the old story that I am getting at with regard to the serviced land or the land banks which you are setting up around cities—you are still buying the very expensive land.

Mr. Hellyer: This is true but even then I think you could market it and effect a substantial savings to a potential homeowner over what would be the case if it was marketed in the private sector. Of course some of the land which is being acquired was not close in and therefore was not expensive at the time it was acquired.

Mr. Howe: But Mr. Chairman and Mr. Minister, this is what is creating a false farm land value all over the Province of Ontario—the fact that so many of the people that live around the cities are selling their farms at such fabulous prices. But they still want to farm, they go 50 miles away and do not mind paying twice the actual price of the land to get started back in farming again. I think this whole problem of conservation should be considered in respect of these housing projects. I think just as important as the development of our cities is the conservation problem that they are creating.

What are the regulations in regard to building homes in rural areas? What services do they have to have? Do they have to have sewage, or can they use septic tanks?

Mr. Hignett: In rural areas, yes.

Mr. Howe: And get the CMHC mortgages?

Mr. Hignett: Yes.

Mr. Howe: This was not always the case, was it?

Mr. Hignett: Yes, it has always been the case in rural areas.

[Interprétation]

Mr. Howe: J'ai cru comprendre, de vos propos, que cela se faisait déjà.

Mr. Hellyer: Non, les fonds s'emploient à l'acquisition conjointe de terrains par le gouvernement fédéral et les provinces. Or, ces terrains se trouvent ordinairement dans une municipalité ou un voisinage de celle-ci.

Mr. Howe: Vous avez aussi parlé de terrains aménagés; d'où provient l'argent nécessaire à l'aménagement?

Mr. Hellyer: L'accord fédéral-provincial comprend parfois les frais d'aménagement des terrains.

Mr. Howe: C'est toujours la même rengaine, applicable cette fois aux terrains aménagés ou aux banques de terres créées autour des villes, soit que vous achetez toujours les terrains les plus chers.

Mr. Hellyer: C'est exact, mais même à ce moment-là, il nous est possible de les revendre à un prix beaucoup plus bas, par rapport aux prix courants dans le secteur privé, ce qui occasionne des économies considérables à ceux qui veulent s'y construire une maison. Bien entendu, certaines des terres que nous avons acquises étaient loin des villes et partant, à bas prix.

M. Howe: Justement, monsieur le ministre, monsieur le président, voilà ce qui fausse la valeur des terres arables, et ce dans tout l'Ontario. Les exploitants agricoles qui habitent près des villes vendent leurs terrains à des prix exorbitants. S'ils veulent s'adonner de nouveau à l'agriculture, peu leur importe d'acheter des terrains 50 milles plus loin, et de payer le double de ce que ces terres valent réellement. A mon sens, les responsables des projets de logements publics doivent tenir compte du problème de la conservation des terrains. Cela me semble aussi important que le développement de nos villes.

Y a-t-il des règlements qui régissent la construction de maisons dans les régions rurales? De quels services doivent-elles être dotées? Faut-il prévoir des services d'égouts, ou bien les fosses septiques suffisent-elles?

Mr. Hignett: Oui, dans les régions rurales.

M. Howe: Pour obtenir des hypothèques de la SCHL?

Mr. Hignett: Oui.

M. Howe: Ce ne fut pas toujours ainsi, n'est-ce pas?

M. Hignett: Oui, ce fut toujours le cas dans les régions rurales.

[Text]

Mr. Howe: They could build them under those conditions.

Mr. Hignett: Our problem has been the debate that takes place in the fringe areas of cities and towns where people endeavour to move just beyond the range of services in order to get lower cost land and, hopefully, lower taxes. This is just urban sprawl.

Mr. Howe: In other words, there is an area where they can get it and an area where they cannot get it.

Mr. Hignett: If it is really rural, if it is in the village context, the crossroads context, the farm, yes, but if it is just an escape, say from the outskirts of Hamilton, no.

Mr. Howe: Who makes the decision?

Mr. Hignett: Well, the decision is based on what is the area of influence, say, of Hamilton. It is a decision that has to be made jointly by ourselves, the province and such organizations as OWRC.

Mr. Howe: Thank you, Mr. Chairman.

Mr. McBride: Mr. Chairman, a number of excellent questions have been asked. I certainly will not use my 10 minutes but would be delighted to yield it to others like Mr. Robinson who have extra questions at the end. I want to ask a general question and if it is too general, you may rule it out of order. What five or six cities in Canada have the most severe housing shortages?

Mr. Hignett: I think the cities with the worst shortage tend to be the larger ones. I think Toronto would head the list followed by Ottawa, Vancouver and Halifax in that order.

Mr. McBride: I have one other general question, Mr. Chairman.

I notice that an undue portion of money that went into housing last year went into multi-unit rental facilities, and obviously part of the reason is that people can realize greater profits on their investments, or I assume this is so. Is this the single and only reason, that it is a better investment, or are there other factors that have tended in the past to encourage people to put their money into multi-unit rental type structures instead of homes for private ownership?

[Interpretation]

M. Howe: On peut y construire des maisons, pourvu que ces conditions soient remplies.

M. Hignett: Notre gros problème, ce sont les régions en bordure des villes, que les services n'atteignent pas et où les gens s'établissent pour payer moins cher pour un terrain tout en espérant acquitter moins de taxe. Voilà ce qu'est l'expansion urbaine.

M. Howe: Autrement dit, on ne peut espérer de tels avantages partout.

M. Hignett: Dans une région à caractère rural, dans un village, à un carrefour, dans une ferme, oui, mais à proximité des banlieues d'Hamilton, non.

M. Howe: Qui prend de telles décisions?

M. Hignett: Ces décisions se fondent selon l'emplacement de la région d'influence qui l'entoure, mettons, Hamilton. Elles sont prises conjointement par notre société, les provinces, et des organismes comme l'Ontario Water Resources Commission.

M. Howe: Merci, monsieur le président.

M. McBride: Monsieur le président, d'excellentes questions ont été posées. Je ne prendrai sûrement pas les dix minutes qui me sont allouées, alors je laisserai le temps qui reste à ceux qui, comme M. Robinson, ont des questions supplémentaires. Ma question est d'ordre général, mais pas au point, j'espère qu'elle sera jugée irrecevable. Quelles sont les cinq ou six villes au Canada où la pénurie de logements est à son pire?

M. Hignett: Je croirais que les villes où sévit la plus grande pénurie de logements sont les plus grandes villes. Je crois que Toronto serait en tête de la liste, suivie d'Ottawa, de Vancouver et d'Halifax, dans cet ordre d'importance.

M. McBride: Une autre question d'ordre général, monsieur le président.

Je remarque qu'une part indue de l'argent versée pour l'habitation, l'an dernier, est allée à des maisons à logements multiples, et évidemment, c'est, en partie, parce que les personnes peuvent faire de plus grands bénéfices sur leurs investissements, enfin, je suppose que c'est cela. Est-ce que le fait que c'est un meilleur investissement est la seule et unique raison, ou est-ce qu'il y a d'autres facteurs, qui ont tendu, dans le passé, à encourager les gens à investir leur argent dans des maisons à logements multiples, plutôt qu'à des maisons à propriété privée?

[Texte]

Mr. Hignett: I think there are two principal reasons for it. One is the demographic characteristics of our annual increase in population. We are at the stage now where the youth of the country is exercising a greater demand than it has ever done in the past. Young people are generally well educated and become very quickly good earners and they are highly mobile.

Many of them leave home at a much younger age and establish their own households as single persons or as young married couples. They are not interested in home ownership. They are too mobile for this and they form each year a larger part of the demand for housing. This is a demand that is being met by investors in the large apartment houses in the large Canadian cities.

On the other side, the private financial institutions of this country that are making investments in mortgage loans at any given level of interest rate, find that it costs much less to administer one mortgage on a building that contains 200 suites than mortgages on 200 single family dwellings and for this reason, all other things being equal, the apartment house has a very considerable advantage over the single family dwelling when a financial institution is reviewing its investment possibilities for the year, so the apartment house has everything going for it at the moment.

Mr. McBride: Thank you. I pass.

The Chairman: Mr. Schumacher?

Mr. Schumacher: I would like first of all to ascertain whether I am correct in assuming that the program for lending on existing homes started in 1966.

Mr. Hignett: Yes.

Mr. Schumacher: I am wondering, in view of the increase in values, whether any consideration is being given to upping the amount available per loan on existing housing in the near future.

Mr. Hellyer: This was one of the recommendations of the Task Force and consequently you can assume it is being looked at along with other possible amendments.

Mr. Schumacher: While that is being considered I wonder whether consideration could be given to some more flexible approach to the question of improving those existing homes. I understand the present regulations

[Interprétation]

M. Hignett: Je pense qu'il y a deux raisons principales qui justifient cela. L'une est la caractéristique démographique de l'accroissement annuel de la population. Nous en sommes à l'étape actuellement où les jeunes du pays font de plus grandes demandes, aujourd'hui, qu'ils ne l'ont fait dans le passé. Les jeunes sont, en général, bien instruits et rapidement ils deviennent de bons salariés très mobiles.

Plusieurs quittent le foyer, beaucoup plus jeunes qu'autrefois, ils s'établissent dans leur propre foyer, en temps que célibataires ou en temps que jeunes couples mariés, ils ne sont pas intéressés à acheter leur propre maison. Ils sont beaucoup trop mobiles pour cela et ils augmentent, chaque année, le nombre de ceux qui demandent des logements. C'est une demande à laquelle s'efforcent de répondre les investisseurs dans les grandes maisons de rapport, dans les grandes villes du Canada.

D'autre part, les institutions financières privées du pays qui font des investissements dans les prêts hypothécaires, à quelque niveau de taux d'intérêt que ce soit, trouvent qu'il leur coûte beaucoup moins de gérer une hypothèque sur un édifice qui contient deux cents logements plutôt que des hypothèques sur deux cents maisons unifamiliales, et c'est pourquoi, d'ailleurs, la maison de rapport a un avantage très grand sur la maison unifamiliale lorsqu'une institution financière examine ses possibilités d'investissement pour l'année. La maison de rapport a alors tout en sa faveur.

M. McBride: Merci. Je laisse la parole à d'autres.

Le président: Monsieur Schumacher?

M. Schumacher: Je voudrais d'abord m'assurer si j'ai raison de présumer que le programme de prêt sur les maisons qui existent, a commencé en 1966.

M. Hignett: Oui.

M. Schumacher: Je me demande, vu l'augmentation des valeurs, si l'on a pensé à accroître, prochainement, le montant disponible par prêt sur les maisons qui existent actuellement.

M. Hellyer: C'est une des recommandations du Groupe d'étude et vous pouvez donc supposer que ce problème est étudié en même temps que d'autres modifications possibles.

M. Schumacher: Et bien, pendant que c'est étudié, je me demande si on ne pourrait pas aussi penser à adopter une attitude plus souple quant à la question d'améliorer les maisons qui existent actuellement. Je crois com-

[Text]

call for a minimum of \$1,000 to be spent on an improvement program, and it would seem that in many cases for older type homes that are in good condition this could be money that should not necessarily have to be spent, merely in order to qualify for the loan.

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Mr. Hellyer: I think that point is well taken. It was noted also.

Mr. Schumacher: The second area I would like to question is that of urban renewal. I would like to know what is the average—if there is an average—length of time that could be expected to elapse between the initiation of a study and the completion of an agreement to implement the program.

Mr. Hignett: I assume you mean the preparation of an urban renewal scheme.

Mr. Schumacher: As I understand it, we go through the study and then the scheme and then an agreement to implement it.

Mr. Hignett: They are not all necessary. The urban renewal study is one that is done by many communities to examine the whole community to identify all the areas of blight, but in many communities it is well known what areas of the city are blighted and they have reached their own conclusions about the degree of priority, so they may begin by selecting an area and developing an urban renewal scheme. An urban renewal scheme generally takes about a year to complete and then the urban renewal program relating to that scheme area may be implemented. The implementation takes a very long time.

Mr. Schumacher: Mr. Hignett, is that because of the acquisition time?

Mr. Hignett: The acquisition of the properties is a very slow process. The properties have to be dealt with one at a time and purchased. There is remarkably little expropriation in urban renewal in Canada. Most of it is negotiated and it is a long and tiresome process, but it is one that you just have to go through.

Mr. Schumacher: Mr. Chairman, reference has been made earlier in the meeting this evening about the Toronto problems. I come from an area that is a little less densely populated and I am particularly interested in the

[Interpretation]

prendre que les règlements actuels exigent qu'il y ait une dépense d'au moins \$1,000 pour le programme d'amélioration et il semble qu dans le cas de plusieurs vieilles maisons qui sont en bonne condition, cela pourrait être que l'argent qu'il n'y aurait nécessairement pas lieu de dépenser, simplement afin d'être admissible au prêt?

M. Hellyer: Oui, je crois qu'on a tenu compte de cela aussi.

M. Schumacher: Le second secteur, sur lequel j'aimerais me pencher, c'est la question de la rénovation urbaine. J'aimerais savoir quelle est la moyenne du temps, s'il en existe une, que l'on peut s'attendre à voir s'écouler avant le début d'une étude et la réalisation d'une entente visant à appliquer le programme.

M. Hignett: Vous parlez de la préparation d'un plan de rénovation urbaine?

M. Schumacher: De la façon dont je le comprend, vous préparez l'étude et ensuite le plan, et enfin une entente en vue de sa réalisation.

M. Hignett: Pas nécessairement. L'étude de rénovation urbaine est faite par plusieurs collectivités pour voir l'ensemble de la collectivité afin d'identifier les secteurs de flétrissure, mais dans plusieurs collectivités, il est bien connu quels sont les secteurs qui sont flétris; ils en arrivent à leurs propres conclusions sur le degré de priorité. Ils peuvent donc commencer par choisir un secteur et à établir un plan de rénovation urbaine. Un plan de rénovation urbaine, prend ordinairement un an avant d'être terminé, et à ce moment-là, le programme de rénovation urbaine, en fonction de ce plan, peut être mis en pratique. La mise en pratique est très longue.

M. Schumacher: Monsieur Hignett, est-ce que cela dépend du temps pour faire l'acquisition?

M. Hignett: L'acquisition des propriétés est un procédé très lent. Il faut traiter les propriétés une par une et les acheter. Il y a remarquablement très peu d'expropriation dans la rénovation urbaine au Canada. Il se fait beaucoup de négociations et c'est un procédé long et laborieux, mais il faut passer à travers.

M. Schumacher: Monsieur le président, on a parlé plutôt ce soir du problème de Toronto. Je viens d'une région de population un peu moins dense et je suis particulièrement intéressé aux problèmes de Drumheller,

[Texte]

problems at Drumheller which is the city that I come from.

There seems to be a great deal of difficulty in getting the urban renewal program there under way and it has now been going on for over three years and we still cannot seem to get anywhere near an implementation agreement, and I am wondering whether this is a normal thing to be expected. I think the scheme has been completed for over a year and yet we cannot get into any agreement.

Mr. Hignett: I think at least one of the reasons is that Central Mortgage and Housing Corporation has never had an application from Drumheller to implement an urban renewal scheme. We have had an application from Drumheller, as you know, to develop a scheme and this has been going on, as you say, for some time but no application has come forward yet to implement it.

Mr. Hellyer: That is not an invitation to encourage them, by the way, because we want to get enough houses built first.

Mr. Hignett: It is a very special problem as you know.

Mr. Schumacher: Yes, but I just wanted to get the situation clear in my mind because as I understand it the consulting engineers completed a scheme over a year ago. I know the people at Drumheller are wondering why nothing is happening and they seem to be blaming Central Mortgage and Housing Corporation for the delay. If it is not the Corporation's fault I would like to know whose fault it is.

Mr. Hignett: Our records indicate that a grant of \$38,000 was made for the development of an urban renewal scheme covering three small areas of Drumheller in March of 1968—a year ago now.

Mr. Schumacher: Then so far as your records indicate the scheme has not been completed yet; just the grant was made for...

Mr. Hignett: No application has been made to us to take the next step.

Mr. Schumacher: Which is implementation?

Mr. Hignett: Which would be implementation.

Mr. Schumacher: Thank you. Those are all the questions I have, Mr. Chairman.

[Interprétation]

qui est la ville d'où je viens.

Il semble y avoir là beaucoup de difficultés à mettre en marche le programme de rénovation urbaine. On y travaille depuis au moins trois ans et nous ne semblons pas pouvoir en arriver à une entente en vue de sa mise en application. Est-ce que cela est normal? Je crois que le plan a été terminé il y a un an et on n'en est pas parvenu à une entente quant à la réalisation?

M. Hignett: Je crois qu'au moins l'une des raisons est que la Société centrale d'hypothèques et de logement n'a jamais reçu de demandes de Drumheller pour réaliser un plan de rénovation urbaine. Nous avons eu une demande de Drumheller d'établir un plan et cela s'est fait, comme vous dites, depuis un certain temps, mais on n'a pas encore reçu de demandes pour le réaliser.

M. Hellyer: Ce n'est pas une invitation à l'encouragement, en effet, parce que nous voulons avoir assez de maisons bâties d'abord.

M. Hignett: C'est un problème tout à fait particulier, comme vous le savez.

M. Schumacher: Oui, fort bien. Mais je tiens à ce qu'il n'y ait aucun malentendu. Si j'ai pu comprendre, les ingénieurs-conseils ont terminé un plan, il y a plus d'une année. Je sais que les gens de Drumheller se demandent pourquoi rien ne se passe, et ils semblent blâmer la Société centrale d'hypothèques et de logement pour ce retard. Si ce n'est pas la faute de la Société, j'aimerais savoir qui est le coupable?

M. Hignett: Nos dossiers portent qu'une subvention de \$38,000 a été accordée pour l'établissement d'un plan de rénovation urbaine couvrant trois petits secteurs de Drumheller, en mars 1968. Il y a une année maintenant.

M. Schumacher: En autant que l'indiquent vos dossiers, le projet n'a pas encore été terminé; seule la subvention a été accordée...

M. Hignett: Nous n'avons reçu aucune demande de passer à l'étape suivante.

M. Schumacher: Qui est la réalisation de ce projet?

M. Hignett: Qui serait la réalisation.

M. Schumacher: Je vous remercie, ce sont là toutes les questions que je voulais vous poser, monsieur le président.

[Text]

The Chairman: Mr. Osler?

Mr. Osler: I came in late, Mr. Chairman. If I am backing up on anybody would you please let me know so I will not waste other people's time? I am interested in this research money first, Mr. Chairman, which has increased by \$2.3 million. I wonder what types of research are carried out. Are these researches into physical ways of doing things?

Mr. Hellyer: This covers the whole range of research, physical ways of doing things and the sociological studies, as well as grants to universities.

Mr. Osler: I have a thought that is regrettably fairly obscure, but I wonder if I can express it so that someone may be able to follow it and perhaps help me.

It seems to me that in larger developments there is a capital kick behind investments if the arithmetic works out well. It is like shooting fish. If you put up \$100,000 and you borrow "X" number of dollars, and the arithmetic works well, by the time it is all over you not only have been getting a good return on your \$100,000 but at the end of it you own the whole lot and it might be worth \$800,000.

In theory this is great for the individual home owner because he puts his credit up and borrows against it and in the end he owns his own home. In practice however, when you come to the big operators it is really nothing more or less than an escalation proposition that goes on and on and on.

I wonder if in your research there is some way of looking into the economics of a thing like this and deciding that the arithmetic should be based on 65 or 75 per cent of optimum, or some such figure. As I say, 100 per cent of optimum is like shooting fish. It depends on whether things work out. In the present climate they should work out because you have more and more people needing things and more and more young people coming along and housing is required. There should be no problem about occupancy or about paying rent.

I wonder if there is a built-in extra cost here that is perhaps part of conventional wisdom that does not apply in the case of big buildings? Are you following me at all?

Mr. Hellyer: I thought I was for a moment but I am afraid I am lost now.

[Interpretation]

Le président: Monsieur Osler?

M. Osler: J'arrive en retard, monsieur le président, veuillez me le laisser savoir si je répète des questions qui ont déjà été posées afin que je ne fasse pas perdre leur temps aux autres. Je m'intéresse beaucoup aux fonds qui ont été consacrés aux recherches, monsieur le président, fonds qui ont augmenté de \$2,300,000. Je me demande de quel genre de recherches il s'agit exactement? S'agit-il de recherches sur les méthodes matérielles de procéder?

M. Hellyer: Il s'agit de toute la gamme des recherches, des méthodes matérielles de procéder, et des études sociologiques, et des subventions aux universités.

M. Osler: Il me semble que c'est assez obscur, et je me demande si je pourrais l'exprimer de façon à me faire comprendre.

Il me semble que dans des projets plus vastes, il y a une poussée de capitaux derrière les investissements, si les calculs mathématiques sont bien faits. C'est un peu comme pêcher. Si vous investissez \$100,000, et que vous empruntez tel montant, lorsque tout est terminé, non seulement vous avez obtenu un rendement convenable sur les \$100,000, mais vous êtes propriétaire de biens qui peuvent valoir \$800,000.

En théorie, c'est formidable pour les propriétaires de maisons individuelles, car la personne emprunte et devient propriétaire de sa propre maison. Mais en pratique, en ce qui concerne les gros entrepreneurs, c'est ni plus ni moins une proposition à application variable qui se poursuit indéfiniment.

Je me demande s'il y a moyen, dans les recherches, d'étudier les aspects économiques de ce genre de chose et de décider que le calcul devrait être fondé sur 65 ou 75 p. 100 de l'optimum ou un chiffre de ce genre. 100 p. 100 de l'optimum serait un peu comme la chasse au poisson. Tout dépend si les choses se réalisent. Dans la situation actuelle, de plus en plus de gens ont besoin de quelque chose, il y a de plus en plus de jeunes et il faut des logements. Il ne devrait pas y avoir de problèmes d'habitation ou de loyer.

Je me demande si le facteur coût est ajouté ici puisqu'il ferait partie de la sagesse traditionnelle qui ne vaut pas dans le cas des gros immeubles. Est-ce que vous me comprenez?

M. Hellyer: Je vous ai suivi pendant un instant et puis je me suis égaré dans le labyrinthe de votre pensée.

[Texte]

Mr. Robinson: How would you like to start over again?

Mr. Osler: I do not know if I could. I would probably have to think it out better than I have done. It seems to me that the ordinary criteria for home lending, which really roughly apply to large projects, is a little unfair and a little bit loaded for the operator as long as everything works out.

Mr. Hellyer: You are saying that an apartment building is a good investment.

Mr. Osler: An extraordinarily good investment.

Mr. Hellyer: Right. I think this is right. The Task Force in a sense really recognized some of the things you have in your mind. I think by suggesting that in the future it might be considered whether or not municipalities should not retain in leasehold some of the land that is used for multiple buildings of that kind or for commercial developments. This was not discussed at great length but the idea was introduced because it was felt that often there are socially-created values there.

We were actually talking of a socially-created value resultant upon the population rather than on the leverage in the money.

It is really two applications of the same kind of thing. It was suggested there might be a way that the benefit could be spread more widely. We suggested the possibility of some leasehold arrangements for multiple dwellings and for commercial and industrial development. It was really designed to try to spread more widely the kind of benefit you refer to.

Mr. Osler: Do you think progress is being made in that direction?

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Mr. Hellyer: I think it is a concept that is going to take a while to catch on. It will not happen overnight but perhaps in due course it will be recognized as a method of sharing benefits and keeping taxes down, for one thing.

Mr. Hignett: The lending institutions of this country have caught on.

Mr. Hellyer: The lending institutions have caught on and in many cases they are insisting on a piece of the action in respect of apartment buildings. To answer Mr. McBride's question, that is one more reason why so much money is going into apartments

[Interprétation]

M. Robinson: Est-ce que vous pourriez recommencer?

M. Osler: Je ne sais pas si je pourrais. Il faudrait probablement que j'y repense. Il me semble que les critères ordinaires pour les prêts domiciliaires qui s'appliquent aussi en gros aux programmes d'envergure, sont quelque peu injustes et penchent en faveur de l'entrepreneur si tout va bien.

M. Hellyer: Est-ce que vous voulez dire que les immeubles d'appartements sont de bons investissements?

M. Osler: Oui, un excellent investissement.

M. Hellyer: Oui. Dans un certain sens l'équipe d'étude spéciale a reconnu ce que vous avez en tête, je crois, en proposant qu'à l'avenir, on pourra se demander si les municipalités ne devraient pas conserver certains des terrains et les louer à bail pour une multitude de bâtiments de ce genre ou des programmes de construction domiciliaire et commerciale. Nous en avons discuté longuement et l'idée a été introduite car il nous a semblé qu'il y a là des valeurs créées par la société.

Nous songions aux valeurs sociales qui en résulteraient pour la population plutôt que de l'aspect économique.

C'est en réalité la double application de la même chose. On a proposé qu'il y aurait peut-être moyen de mieux distribuer les bénéfices. Nous avons proposé la possibilité d'avoir certaines ententes de bail pour la construction d'édifices à logements multiples ou la construction de locaux industriels ou commerciaux. Il était surtout destiné à mieux répartir les bénéfices auxquels vous faites allusion.

M. Osler: Y a-t-il des progrès qui sont réalisés dans ce sens?

M. Hellyer: Évidemment, c'est un concept qui mettra longtemps à entrer en vogue. Peut-être qu'en temps et lieu on reconnaîtra cette méthode de partager les bénéfices et de réduire les impôts.

M. Hignett: Les institutions de prêt l'ont accepté d'emblée.

M. Hellyer: Les institutions financières suivent le pas. Elles insistent d'ailleurs pour le faire dans le cas des immeubles d'appartements. Pour répondre à la question de M. McBride, c'est peut-être une autre raison pour laquelle tant de capitaux sont investis

[Text]

and why so little is going into family accommodation.

Mr. Osler: Yes, but that will not solve our problem. If the lending institutions have caught on it will be great for them, but it will not necessarily be great for the people as a whole.

Mr. Hellyer: Except to the extent that they own the lending institutions.

Mr. Osler: Which is not necessarily relevant.

Mr. Hellyer: It depends on whether you are a policy holder or not.

Mr. Osler: With respect to subsidized housing—and again if this is an academic question, Mr. Chairman, you can trip me up on it—how is the subsidy calculated? Perhaps I cannot pay the optimum rent and someone subsidizes it and I get into the place, what is the optimum rent and how is it figured out?

Mr. Hellyer: I will ask Mr. Hignett to answer this question.

Mr. Hignett: There is a rent scale generally in use in Canada for public housing projects. This rent scale ranges from 16 per cent to 30 per cent of income. Families with very low incomes, incomes of \$2,400 a year, would pay 16 per cent of that income for rent. When their income reaches, say, \$5,000 a year they would pay 26 per cent of that income for rent.

Mr. Osler: I think I am asking this question from the other point of view, though. We are the people who have to pay this subsidy, whether it is 16 or 25 per cent. On what basis is the genuine rent calculated? Is it the actual cost of the building?

Mr. Hignett: There is a rent that we call the full recovery rent. That is the rent to recover all of the investment in the building plus municipal taxes and without profit.

Mr. Osler: In "X" number of years.

Mr. Hignett: Yes. That is the base rent for the buildings.

Mr. Osler: And the only profit in the whole thing, then, goes to the contractor who builds it?

Mr. Hignett: Yes, that is right.

[Interpretation]

dans les maisons de rapports et si peu dans les logements familiaux.

M. Osler: Mais cela ne réglera pas notre problème. Si les institutions de prêt, évidemment, se lancent dans cette activité, ce sera une bonne affaire pour elles, mais pas nécessairement pour l'ensemble de la population.

M. Hellyer: A moins que les gens soient propriétaires de ces institutions.

M. Osler: Ce qui n'est pas nécessairement à propos.

M. Hellyer: Tout dépend si vous êtes titulaire d'une police ou non.

M. Osler: Au sujet du logement subventionné, et encore une fois il s'agit d'une question théorique, monsieur le président, comment calcule-t-on les subventions? Si je ne peux pas payer le loyer maximum et que quelqu'un subventionne le loyer, pour me permettre d'y entrer, quel est ce loyer maximum? Comment le calcule-t-on?

M. Hellyer: Je demanderais à M. Hignett de répondre.

M. Hignett: Il y a une échelle des loyers qui est appliquée au Canada pour les programmes publics de logement. Cette échelle des loyers va de 16 p. 100 à 30 p. 100 du revenu des locataires. Les familles dont le revenu est très faible, un revenu annuel de \$2,400, paieraient 16 p. 100 de ce revenu pour le loyer. Lorsque leur revenu annuel atteint \$5,000 ils verseraient 26 p. 100 du revenu en loyer.

M. Osler: Je crois que je pose cette question dans une autre optique. C'est nous qui devons verser cette subvention de 16 ou 30 p. 100. Comment calcule-t-on le loyer réel? est-ce à partir du coût de l'immeuble?

M. Hignett: Il y a ce que nous appelons le loyer de pleine récupération, c'est-à-dire le loyer qui permet de récupérer les taxes municipales et tout l'investissement, mais sans bénéfices.

M. Osler: Dans un nombre X d'années.

M. Hignett: Oui. C'est le loyer de base.

M. Osler: Les seuls bénéfices réalisés sont ceux de l'entrepreneur en construction?

M. Hignett: Oui, c'est exact.

[Texte]

Mr. Osler: As a short aside, does the CBC pay any rent for its property at Cité du Havre?

Mr. Hignett: It owns it.

Mr. Osler: It owns the land too?

Mr. Hignett: No, it leases the land from the National Harbours Board and owns the building.

Mr. Osler: So it just pays on the lease.

The Chairman: Are you finished, Mr. Osler?

Mr. Osler: Not quite, Mr. Chairman, In public housing who owns the units?

Mr. Hignett: There are two kinds of public housing in Canada. One kind is known as federal-provincial housing, which is owned jointly by a federal-provincial partnership. The federal share in ownership is 75 per cent and the provincial share is 25 per cent. The second kind of public housing is by way of loans by the federal government to provincially-created corporations. That kind of public housing is owned by the provinces.

Mr. Osler: I am finished now, Mr. Chairman. Thank you.

Mr. Ritchie: Mr. Chairman, last year there were almost 200,000 starts. These were all new starts, including someone who built a house on his own or a farmer...

Mr. Hellyer: Yes, the total new starts but excluding dormitory-type accommodation, such as students' housing where there is no self-contained kitchen attached.

Mr. Ritchie: Approximately how many people do these new units house? What is the estimate of the Department? Is it about three per unit?

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Mr. Hignett: It would be about three, for a total of about 600,000 persons.

Mr. Ritchie: How many units is it estimated will become obsolete each year or not fit to live in? Is there any estimate of that at all?

Mr. Hignett: The actual losses?

[Interprétation]

M. Osler: Un petit aparté. Est-ce que Radio-Canada, par exemple, paie un loyer sur sa propriété à Cité du Havre?

M. Hignett: Elle en est propriétaire.

M. Osler: Est-elle propriétaire du terrain également?

M. Hignett: Non, la Société loue le terrain du Conseil des ports nationaux et est propriétaire de l'immeuble.

M. Osler: De sorte qu'ils ne paient que sur le bail.

Le président: Avez-vous terminé?

M. Osler: Pas tout à fait, monsieur le président. Dans le cas des programmes publics de logement, qui est propriétaire des unités?

M. Hignett: Il y a deux sortes de logements subventionnés au Canada. Il y a d'abord le programme fédéral-provincial de logement, avec propriété conjointe fédérale-provinciale. La part du gouvernement fédéral étant 75 p. 100, celle des provinces est de 25 p. 100. Le deuxième genre de logements subventionnés est sous forme de prêts accordés par le gouvernement fédéral, aux corporations créées par les provinces. Cette forme de logements subventionnés est la propriété des provinces.

M. Osler: J'ai terminé, monsieur le président. Merci.

M. Ritchie: Monsieur le président, l'an dernier, il y a eu environ 200,000 mises en chantier. Il s'agit de toutes les nouvelles mises en chantier, y compris les gens qui se construisent une maison eux-mêmes, les cultivateurs...

M. Hellyer: Oui, mais à l'exclusion du type de logement genre dortoir, comme les résidences d'étudiants où il n'y a pas de cuisine dans chaque logement.

M. Ritchie: Combien de gens environ vivent dans ces nouveaux logements? Quels sont les calculs du ministère? Est-ce d'environ 3 personnes par unité?

M. Hignett: Oui, environ trois, pour un total de 600,000 personnes.

M. Ritchie: Combien d'unités deviendront désuètes chaque année ou inadéquates chaque année selon vos calculs? Est-ce que vous avez établi ces chiffres?

M. Hignett: Les pertes réelles?

[Text]

Mr. Ritchie: No. I mean dwellings that become so old and uninhabitable...

Mr. Hignett: That are actually demolished for some reason or another?

Mr. Ritchie: No one lives in them for some reason or another.

Mr. Hignett: Is it about 25,000 units a year, Mr. Adamson?

Mr. Adamson: The data on this is extremely sketchy but we estimate about 10,000.

Mr. Hignett: For all reasons?

Mr. Hellyer: There may be more that become obsolete and are not demolished. But this is the destruction rate. So that to answer your question specifically, one would have to do an actual on-the-spot survey every year and say that so many more have passed into a state of obsolescence and should have been demolished if there had been an adequate program of demolition.

Mr. Ritchie: What I was getting at is that our population, according to the Dominion Bureau of Statistics, increased by 310,000. So this means that approximately 300,000 people were housed either in old units or totally new units. Is this change due to people moving, say, from farms and small villages to larger centres? Do you think this was taken up by that type of person?

Mr. Hellyer: You mean where did the effective demand come from?

Mr. Ritchie: Yes, in a sense. I mean, how does the population move?

Mr. Hellyer: I think, the officials can correct me if I am wrong, from a combination of circumstances, from a larger number of non-family formations, from people undoubling where they had previously been doubled up in accommodation, and then from the units that have been demolished as well. So all of these things.

Mr. Ritchie: So on the whole, Canadians are getting more room to live in per individual.

Mr. Hellyer: Yes, absolutely. The physical housing accommodation for a Canadian has improved very substantially in the year just past.

Mr. Ritchie: Have you any research or estimates showing that the average wage earner—assuming he is on the same wages he was 10 years ago, that is, allowing for increases in

[Interpretation]

M. Ritchie: Je veux parler des logements qui deviennent décrépits ou insalubres...

M. Hignett: Qui sont en fait démolis pour une raison ou une autre?

M. Ritchie: Que personne n'habite pour une raison ou une autre.

M. Hignett: Environ 25,000 logements par année. Monsieur Adamson?

M. Adamson: Nos données à ce sujet ne sont pas très complètes, mais je crois que c'est environ 10,000.

M. Hignett: Quelle que soit la raison?

M. Hellyer: Il ya peut-être un certain nombre de logements qui deviennent décrépits ou invivables et qui ne sont pas démolis. Pour avoir des chiffres précis, il faudrait faire des relevés sur place chaque année et dire combien de maisons sont devenues décrépites ou insalubres et devraient être démolies s'il y avait un programme convenable de démolition.

M. Ritchie: Je considère que notre population a augmenté de 310,000. Cela veut donc dire qu'environ 300,000 personnes ont été logées soit dans de vieux logements ou soit dans de nouveaux logements. Est-ce que cela comprend la concentration des fermiers vers les villes?

M. Hellyer: Vous voulez savoir d'où vient la demande?

M. Ritchie: Dans un sens oui. Quel est le mode de déplacement de la population.

M. Hellyer: Il s'agit de tout un éventail de circonstances, des formations non familiales, de gens qui vivent seuls alors qu'ils partageaient des logements auparavant et de gens qui viennent de logements qui ont été démolis.

M. Ritchie: Alors en général, les Canadiens ont donc plus d'espace par individu.

M. Hellyer: Oui, c'est tout à fait vrai. Le caractère physique du logement pour chaque canadien s'est amélioré considérablement au cours de la dernière année.

M. Ritchie: A-t-on fait des recherches au sujet de la proportion du revenu qu'un salarié moyen qui gagne la même chose qu'il y a dix ans—compte tenu de l'augmentation du coût

[Texte]

cost of living—is putting more of his disposable income into housing now than he was 10 years ago? Are there any statistics on this type of thing?

Mr. Adamson: It has certainly gone up in the last three years.

Mr. Hellyer: This is largely due to the increase in interest rates which has resulted in rising rents. Hopefully, if interest rates stop rising, then the trend will reverse itself, and it will take less of a person's income in years ahead.

Mr. Ritchie: I am not quite clear on this. Let us say his income 10 years ago was \$300 a month, and he spent \$100 on housing. If his income is now \$400 a month, assuming his job has not changed but he has gone up with the economy, does he spend \$133 a month on housing, or is it higher?

Mr. Hellyer: Without going into the figures, I think during those last 10 years, for seven of the 10 years his income rose faster than the cost of accommodation.

Mr. Ritchie: Just a moment, is this income or disposable income? Income before income tax or after tax when you are talking about this?

Mr. Hellyer: I imagine it would be both.

Mr. Ritchie: Because there is quite a difference...

Mr. Hellyer: For the last three years it has not. So that for seven of those 10 years, it would require a smaller proportion of his income to provide the equivalent accommodation and for the last three it would take a larger proportion.

Mr. Ritchie: In other words, in the three years it has again been rising. It takes more of his income.

Mr. Hellyer: In the last three years the cost of accommodation has been rising more quickly than his income.

Mr. Ritchie: Is there any evidence to show that certain people, or groups of people, are being hit harder than others? Is cost of accommodation for a family with three small children going up faster than that for single people or couples? Is there any evidence of this?

[Interprétation]

de la vie—consacre au logement? Est-ce que cette proportion du revenu consacré au logement est accrue? Avez-vous des données statistiques là-dessus?

M. Adamson: Oui, cela a augmenté au cours des trois dernières années.

M. Hellyer: Cela est surtout attribuable à l'augmentation des taux d'intérêts qui, en retour, créent des hausses de loyers. Si les taux d'intérêt arrêtent de monter, évidemment la tendance subira un renversement.

M. Ritchie: Peut-être n'avez-vous pas bien saisi ma pensée. Disons que le revenu d'il y a 10 ans était de \$300.00 par mois et qu'on consacrait \$100.00 par mois au logement. Si le revenu d'un salarié moyen maintenant est de \$400.00 par mois, on suppose que son travail n'a pas changé, mais qu'il a eu des augmentations de salaire normales, en vertu de l'économie, est-ce qu'il consacre \$133.00 maintenant pour le logement?

H. Hellyer: Pour sept des dix années, le revenu a augmenté plus rapidement que le coût du logement.

M. Ritchie: Parlez-vous du revenu avant ou après déductions de l'impôt?

M. Hellyer: Je suppose qu'on compte les deux facteurs.

M. Ritchie: Parce qu'il y a toute une différence...

M. Hellyer: Pas pour les trois dernières années. Pendant sept des dix années, il fallait une proportion moins considérable du revenu pour le logement.

M. Ritchie: Autrement dit, pendant les trois dernières années, il a fallu davantage.

M. Hellyer: Au cours des trois dernières années, les loyers ont grimpé plus rapidement que les revenus.

M. Ritchie: Est-ce qu'il y a des preuves ou des faits montrant que certaines personnes souffrent plus que d'autres. Par exemple, pour les familles qui ont trois petits enfants; est-ce que le loyer monte plus rapidement pour ces familles que pour les célibataires ou les couples sans enfant? Avez-vous des données statistiques là-dessus?

[Text]

Mr. Hellyer: I do not know the answer to that question.

[Interpretation]

M. Hellyer: Je ne puis vous répondre.

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Mr. Adamson: We do not have that information. We have no statistics on that.

M. Adamson: Malheureusement nous n'avons pas de chiffres là-dessus.

Mr. Ritchie: As cities become larger, does it become relatively more costly to house people, leaving aside the actual cost of building the dwelling? Do the per unit charges on a house for roads, sewers, streets, schools, and so on tend to rise, the larger the city?

M. Ritchie: Alors que les villes s'étendent, est-ce qu'il est de plus en plus onéreux de se loger, sans tenir compte des frais réels de construction? Est-ce que les frais unitaires perçus pour les routes, les égouts, les rues, les écoles, etc., tendent à s'élever plus la ville est grande?

Mr. Hellyer: It would depend where. This is a very difficult question to answer. I think if you look at the Toronto example, certainly costs have been rising recently because of land cost. But how much of this is just a function of the size and how much is a function of the rate of growth, and how much is the function of other things, I really do not think we know.

M. Hellyer: Cela dépend. C'est là une question fort difficile. Je crois que si vous prenez comme exemple la ville de Toronto, sûrement les prix de revient ont monté récemment, à cause de l'augmentation des terrains. Nous ne savons pas dans quelle mesure ces augmentations sont dues aux facteurs comme l'expansion, l'importance de la ville, etc.

Mr. Ritchie: The Task Force investigated the landbanks. The United Kingdom, I believe, has been involved in this for many years. I understood they were not quite as successful as they had hoped. Did you investigate this in your Task Force, or get information on the United Kingdom's experience?

M. Ritchie: L'équipe spéciale a étudié la mise en commun des terrains. En Angleterre, cela se fait depuis des années. Cela n'a pas été très réussi. Avez-vous fait des études là-dessus?

Mr. Hellyer: Are you talking about landbanking only.

M. Hellyer: Parlez-vous de la mise en commun des terrains uniquement?

Mr. Ritchie: Yes. Just landbanking only.

M. Ritchie: De cela, seulement.

Mr. Hellyer: We did not specifically investigate their landbanking. I think I recall something about it in my earlier experience, that they do it in various ways, making estates available for development, usually on a leasehold basis. But their system is quite different.

M. Hellyer: Nous n'avons pas fait de relevés particuliers sur leurs programmes de mise en commun des terrains. Ils font cela de diverses façons, en permettant la mise en valeur des terrains en vertu de contrats de location. Mais je crois que leur système est assez différent.

Mr. Ritchie: Different than what is envisaged in Canada. Just one last question. Do you feel that the government will have to direct money to pension plans, annuities, all these trust funds and that have been built up? Will they eventually have to direct money into this field? Or will it do as much harm as good or ...?

M. Ritchie: Différent de ce que vous prévoyez au Canada. Une dernière question. Estimez-vous que le gouvernement devra orienter de plus en plus de capitaux vers les rentes, les régimes de pension, et toutes ces sociétés de fiducie qui ont été mis sur pied? Faudra-t-il orienter des capitaux vers ces secteurs ou est-ce que cela fera autant de mal que de bien?

Mr. Hellyer: Into housing?

M. Hellyer: Vers l'habitation?

Mr. Ritchie: Yes, into housing.

M. Ritchie: Oui.

Mr. Hellyer: I think a lot of it is going to come voluntarily. I wrote to all the trustee pension funds, at least the ones that we had records of. The response so far has been very

M. Hellyer: Je crois que bon nombre de ces capitaux seront investis volontairement. Les réponses que nous avons reçues des administrateurs des fonds de pension jusqu'ici ont été

Texte]

encouraging. They have got the message and they are starting to respond, and I think that you will find many millions of dollars more coming into the housing field this year from the trustee pension funds. So that we are quite confident that the need will be met.

Mr. Ritchie: I will just go back once more to large cities. As cities become larger, do you feel that single dwellings become less possible for the owners, or for an individual?

Mr. Hellyer: I think the easy answer to that question is yes, and certainly the conventional wisdom is yes. I think if you designed a new large city from the start, right from the word "go", then you could put that contention to question. If you designed a city around its transportation system and put the high density close to the transportation terminals, then I think you could put lower density out from it, and probably provide a mix of types of accommodation at quite reasonable prices, at economic prices. But certainly if you are talking about existing large cities, it is a very real problem to get land down to an economic rate with low density.

The Chairman: Mr. Foster.

Mr. Foster: Mr. Minister, you have suggested that if we free the interest rate, perhaps it will come down. I am interested in your rationalization, or how you believe this would happen.

Mr. Hellyer: Well, because I think 2½ points above long-term government bonds is too high. I do not know if you have ever had this experience or not, but I have, of going into the bank when there was a controlled rate and having them say the rate is 7 per cent or something, and that after all the government sets this rate. You knew they could make the loan at a lower rate, if it was not for that. They use it as an excuse. And without casting any aspersions, I think this is a tendency, that a rate which is set as a maximum tends in many cases to become a minimum.

In talking to the lending institutions, they have confirmed this, that the 2-4 points is more than they need, and therefore our maximum is higher than they need charge. At the same time they say the old maximum a couple of years ago was sometimes lower than they would be willing to invest money at. So I really think that by taking the ceiling off you get the best of both worlds, that you get a low rate as you are likely to get with the amount of funds that you want, and also continuity because even with the rate adjust-

[Interprétation]

très encourageantes, mais, néanmoins, nous pourrions sans doute trouver des millions et des millions de dollars qui pourront être affectés au logement cette année par suite de l'utilisation des fonds de pension. Nous avons confiance que le besoin sera satisfait.

M. Ritchie: Au fur et à mesure que les villes deviennent plus grandes, pensez-vous que les logements uni-familiaux deviendront de moins en moins possibles pour les propriétaires, ou pour les particuliers?

M. Hellyer: Je crois que la sagesse traditionnelle me fournira une réponse affirmative. Si une ville était aménagée en fonction de son service de transport et que la densité de la population se trouve près des terminus, alors la densité moins importante pourrait être éloignée et on pourrait avoir encore des logements à des prix économiques. Mais s'il s'agit des grandes villes qui existent à l'heure actuelle et non pas des nouveaux aménagements, à ce moment on se bute à des problèmes sérieux quand on veut obtenir des terrains à des prix économiques. C'est tout, monsieur le président.

Le président: Monsieur Foster.

M. Foster: Vous avez dit que si nous libérons les taux d'intérêt, ils diminueraient. Comment cela se produira-t-il?

M. Hellyer: Je crois que l'intérêt, dans le cas des obligations à longs termes du gouvernement, est trop élevé. Très souvent, j'ignore si vous êtes au courant de cette situation ou non. Je vais à la banque où l'on me dit qu'il y a un taux de contrôle, 7 p. 100 ou plus, et qu'après tout c'est le gouvernement qui a établi ce taux. Vous savez qu'ils pourraient prêter à un taux inférieur si ce n'était pas de cette limite qu'ils utilisent comme excuse. C'est une tendance; il suffit d'établir un maximum pour que ce maximum devienne un minimum.

Les institutions financières ont bien montré que c'était le cas, que les 2.25 points sont plus qu'ils ont besoin. Notre maximum est donc supérieur à ce qu'elles doivent percevoir. En même temps, ils disent que le maximum d'il y a 2 ans n'était pas un taux intéressant pour l'investissement. J'estime donc qu'en supprimant le maximum, on obtiendra des taux aussi inférieurs que possible de même qu'une continuité car même s'il y a ajustement tous les trois mois, il y a des poussées. Si le taux tend à monter au bout de trois mois, les fonds

[Text]

ed every three months, you get surges. If the rate is going to go up at the end of the three-month period, the funds dry up for the last few weeks before the end of the period. It means that it is either feast or famine for a few weeks, which was precisely the trouble before when the rate was lower and when it was only adjusted periodically. Sometimes there was too much money available and sometimes there was not enough.

I think in order to get the continuous supply of funds which is not only important to get costs down but also to allow the rate to float down as close to the $1\frac{1}{2}$ points above long-term Government of Canada bonds as the market will allow, that a free interest rate is more likely to accomplish this than the present system.

Mr. Foster: I have other questions but I believe that the Chairman wanted to finish, so I will ask one final question. Do you plan to introduce amendments to the National Housing Act in this session?

Mr. Hellyer: Yes, this is the plan. It was announced some time ago by the House leader as part of the business for the remainder of this session.

Mr. Foster: Thank you.

The Chairman: You had a short question, Mr. Gilbert?

Mr. Gilbert: I have about 20 questions, Mr. Chairman.

Mr. Robinson: I have a lot too, but I would be satisfied with one.

Mr. Gilbert: It is 10 o'clock but I think the Minister is more than agreeable to come back.

Mr. Hellyer: I think I could answer your 20 questions very quickly, Mr. Gilbert, if you would like to wind it up tonight.

Mr. Gilbert: It may take a little longer than you think.

Mr. Hellyer: I do not mind taking a few minutes.

Mr. Gilbert: It is 10 o'clock, Mr. Hellyer, I started this morning at 9.30.

Mr. Hellyer: I started this morning at 8 o'clock and I can stand another 15 minutes if you can.

[Interpretation]

s'épuisent rapidement avant la fin de la période.

C'était précisément la difficulté lorsque le taux était plus bas et qu'il n'était ajusté que périodiquement.

Je crois que pour avoir un approvisionnement continu de fonds, condition pour faire baisser les coûts et pour aider le taux à se rapprocher d'un point et $\frac{1}{2}$ au-dessus des obligations du Canada à long terme, comme le permettra le marché, il est préférable d'avoir un taux d'intérêt libre que le système qui prévaut aujourd'hui.

M. Foster: J'aurais d'autres questions à poser, mais je pense que le président voudrait bien mettre fin à la séance, alors je m'en tiendrai à la suivante. Avez-vous l'intention d'apporter des modifications à la *Loi nationale sur le logement* au cours de la présente session?

M. Hellyer: Oui, c'était notre projet. Le leader de la Chambre a annoncé que cette question allait être traitée au cours de cette session.

M. Foster: Merci.

Le président: Vous avez une brève question à poser monsieur Gilbert?

M. Gilbert: J'ai environ 20 questions, monsieur le président

M. Robinson: J'en ai plusieurs aussi, mais je me satisferais d'une.

M. Gilbert: Il est 10 heures mais je crois que le ministre est plus que gentil de revenir.

M. Hellyer: Je crois que je pourrais répondre à vos vingt questions assez rapidement, monsieur Gilbert, si vous êtes prêt à finir ce soir.

M. Gilbert: Cela peut prendre un peu plus de temps que vous ne le croyez.

M. Hellyer: Ça ne me fait rien de prendre quelques minutes de mon temps.

M. Gilbert: Monsieur le ministre, il est 10 heures et j'ai commencé à 9 heures 30 ce matin.

M. Hellyer: Et moi, à 8 heures et je peux rester encore un quart d'heure, si vous le pouvez.

[texte]

Mr. Robinson: I have only one question. I wonder if I could put it first so I can leave. I have to catch a plane.

Mr. Gilbert: I say it is 10 o'clock, Mr. Chairman. This is a very serious problem in Canada, in fact it is a crisis, and I am sure that the Minister just does not want to—

Mr. Hellyer: No, but we have to be back again before the Committee later on with legislation, Mr. Gilbert. I would hope you would not mind co-operating and letting us finish this up tonight because we have quite a few administrative things to do too in catching up on these public housing projects and getting them approved and out.

Mr. Gilbert: Mr. Hellyer, it may be that you would only have to stay for an hour the next time and we could call on your officials for other information. I do not like to be mean about this, but I think it is necessary that we go into this more fully.

I call it 10 o'clock, Mr. Chairman.

Mr. Robinson: May I ask my last question, Mr. Chairman?

The Chairman: You might as well, Mr. Robinson.

Mr. Robinson: I understand that many Canadians of modest means and modest bank accounts are interested in getting involved in the mortgage field. In fact, I understand the Royal Trust Company has set up what they call an "M" Fund to get involved in this kind of thing and to try and help people with small deposits to get involved in this field.

Has the Minister or his Department considered the feasibility of a scheme whereby CMHC would issue certificates to people—in other words they could purchase certificates if they purchase trust certificates—which would have a rate of interest of maybe 6 per cent or 6.5 per cent, and then with the lower cost to the government to administer this we could have lower housing rates of maybe 7.5 per cent or 8 per cent.

Mr. Hellyer: This has been suggested from time to time as just one means, but we actually get our money from the government through the issue of Canada Saving Bonds, which are another form of cash certificates.

[Interprétation]

M. Robinson: Encore une dernière question je me demande si je ne pourrais pas la poser en premier de façon à pouvoir partir s'il vous plaît très bientôt. Vous comprendrez, j'ai un avion à prendre.

M. Gilbert: Mais il est dix heures, monsieur le président. C'est un problème très important au Canada. En fait, c'est une situation à l'état de crise et je suis certain que le ministre ne veut tout simplement pas...

M. Hellyer: Écoutez, il faut revenir témoigner devant le comité plus tard, alors peut-être que vous voudrez bien nous permettre de terminer cette question ce soir. Il faut absolument qu'on règle des problèmes administratifs relatifs à ce projet de logements publics. Il faut les faire approuver et s'en débarrasser.

M. Gilbert: Si vous ne pouvez rester qu'une heure la prochaine fois, nous pourrions peut-être demander à vos collaborateurs de nous donner les renseignements qui nous manquent. Je ne veux pas être vraiment désagréable, mais je trouve qu'il faut approfondir un peu plus cette question.

Donc, il est dix heures, monsieur le président.

M. Robinson: Puis-je poser ma dernière question, monsieur le président?

Le président: Oui, monsieur Robinson.

M. Robinson: Je crois comprendre que beaucoup de Canadiens de moyens modestes et dont le compte en banque est aussi modeste, seraient intéressés à entrer dans le secteur des hypothèques. En fait, je crois saisir que le Royal Trust a un fonds spécial appelé «M» Fund pour ce genre de fonds, pour aider les gens qui ont de petits dépôts en banque à se lancer dans le secteur des hypothèques.

Est-ce que le ministre ou ses collaborateurs ont étudié la possibilité de mettre au point un programme qui permettrait à la Société centrale de délivrer des certificats aux gens, pour qu'ils puissent les acheter comme on achète des certificats fiduciaires. Cela permettrait un taux d'intérêt de 6 ou 6½ p. 100, en coûtant moins cher d'administration au gouvernement, cela permettrait des taux de logement plus bas, peut-être 7½ p. 100 ou de 8 p. 100.

M. Hellyer: De temps à autre, on propose cette solution. En fait, nos fonds du gouvernement proviennent de la délivrance des Obligations d'épargne du Canada qui sont une autre forme de certificats comptants. Il y a

[Text]

There are many ways of getting funds on the market and that suggestion is just one of them.

The Chairman: Shall we pass Vote 68? If we have to come back we might as well pass this vote and then we can go on and discuss other votes. Are your questions on Vote 68?

Mr. Gilbert: I think we have used Vote 68 as a general clause for a full discussion, Mr. Chairman. If there is no restriction on the other clauses I have no objection to passing Vote 68.

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Vote 68 agreed to.

The Chairman: The meeting is adjourned until Thursday, March 20 at 8 o'clock.

[Interpretation]

plusieurs manières de se procurer des fonds sur le marché et votre suggestion n'est qu'une des possibilités qui nous est offerte.

Le président: Adoptons-nous le crédit 68? Si nous devons y revenir de toute façon, qu'on pourrait aussi bien adopter ce crédit et discuter d'autres crédits? Est-ce que votre question a trait au crédit 68?

M. Gilbert: Je crois que nous avons utilisé le crédit 68 comme un article d'ensemble pour les fins de la discussion. Si on n'apporte aucune réserve aux autres articles, je n'ai pas d'objection à adopter le crédit 68.

Le crédit 68 est adopté.

Le président: La séance est levée. La prochaine réunion aura lieu le jeudi 20 mars, à 8 heures.

Thursday, March 20, 1969

Le mardi 20 mars, 1969.

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The Chairman: We have before us today, gentlemen, Item L175 of the Estimates, 1969-70, relating to the Central Mortgage and Housing Corporation. This Item is listed at pages 468 and 469 of the Blue Book.

Item L175 agreed to.

The Chairman: Mr. Gilbert, at the previous meeting you said you had about 20 questions which will last about 20 minutes. You have the floor, Mr. Gilbert.

Mr. Gilbert: Thank you, Mr. Chairman. I almost feel like Mr. Walker on Wednesday morning, and I am tempted to call the Minister St. Paul, but I will refrain from doing so.

Mr. Hellyer, I think I am right in saying that our stock of public housing units in Canada amounts to 40,000, which would represent about 1 per cent of the housing stock in Canada. At the moment I forget what the different figures are in England. Am I right in saying it is about 30 per cent, Mr. Hignett?

Mr. H. W. Hignett (President, Central Mortgage and Housing Corporation): Yes.

Le président: La séance est ouverte. Aujourd'hui, messieurs, nous allons étudier le crédit L 175 des prévisions budgétaires de l'exercice 1969-1970 relatif à la Société centrale d'Hypothèques et de Logements, page 468 et 469 du Livre bleu.

Le crédit L 175 a été adopté.

Le président: A la dernière réunion, vous avez dit que vous aviez une vingtaine de questions à poser et que cela vous prendrait vingt minutes. Vous avez la parole, monsieur Gilbert.

M. Gilbert: Merci, monsieur le président. Je me sens presque comme M. Walker mercredi matin et je suis tenté d'appeler le ministre Saint-Paul, mais je ne le ferai pas. Monsieur Hellyer, je pense que nos unités de logements à loyer modique se chiffrent à 40,000, ce qui représente environ 1 p. 100 des logements au Canada. Je ne me souviens pas exactement les chiffres en Angleterre. Ai-je raison de dire qu'il y en a 30 p. 100, monsieur Hignett?

M. H. W. Hignett (Président de la SCHL): Oui.

[Texte]

Mr. Gilbert: And in the United States, you paid between 1 and 2 per cent?

Mr. Hignett: Yes.

Mr. Gilbert: Mr. Hellyer, what are the plans of your government relative to the number of public housing units to be built in the year 1969?

The Chairman: Are you asking the Minister for the plans of his Department, or to speak for the government?

Mr. Gilbert: For Central Mortgage and Housing Corporation. Thank you, Mr. Chairman.

The Hon. Paul Hellyer (Minister of Transport): I cannot give you an exact figure, Mr. Gilbert, because the actual division of moneys between the various programs has not yet been finally agreed to; but I can say that a large proportion of the funds of the government will be used for what is called social housing, and this will include public housing and any other programs that may be developed during the course of the year which will provide accommodation to low-income families. In other words, if we were to undertake some programs, for example, of rental supplements or any other experiment designed to meet the needs of the same kinds of people, then it would, of course, come from the same overall allocation.

I cannot give you an exact figure, but I can assure you that there will be a substantial program during the current fiscal year.

Mr. Gilbert: Mr. Hellyer, could you give me the breakdown of the number of different types of units that you had in the year 1968? You say the number of public housing units is 10,000. Do you have the breakdown for the single dwelling, and so forth?

Mr. Hellyer: Are you referring now to moneys dispersed by Central Mortgage and Housing Corporation, or by...

Mr. Gilbert: Yes, you are right, Mr. Hellyer. In other words, the amount spent on direct lending loans, the amount on public housing and the amount on home improvements.

Mr. Hellyer: You are asking for this in terms of units?

Mr. Gilbert: Yes; and also in terms of money.

[Interprétation]

Mr. Gilbert: Et aux États-Unis, entre 1 et 2 p. 100?

Mr. Hignett: Oui.

Mr. Gilbert: Monsieur Hellyer, quels sont les plans du gouvernement au sujet du nombre de domiciles à loyer modique qui doivent être construits en 1969?

Le président: Demandez-vous au ministre de répondre ou non de son ministère ou du gouvernement?

Mr. Gilbert: Au nom de la Société centrale, c'est ce que je demande. Merci, monsieur le président.

Hon. P. Hellyer (ministre des Transports): Monsieur Gilbert, je ne peux vous donner de chiffres exacts, car on ne s'est pas encore mis d'accord sur la répartition définitive des fonds entre les divers programmes, mais je peux dire qu'une grande partie des fonds du gouvernement seront utilisés pour ce qu'on appelle des logements à loyer modique et d'autres programmes qui seront mis sur pied au cours de l'année pour fournir des logements aux familles à revenu modique. Par exemple, si nous avons des programmes pour subventionner les loyers ou encore d'autres expériences pour répondre aux besoins de ce même groupe de personnes, les fonds proviendraient de la même source. Je ne peux vous donner de chiffres exacts, mais je peux vous assurer qu'il y aura un important programme au cours de l'année financière courante.

Mr. Gilbert: Pourriez-vous me donner la ventilation à propos du nombre des divers types d'unités construites en 1968? D'après vos dires on a construit 10,000 logements publics. Pouvez-vous me dire le nombre des maisons unifamiliales, etc.?

Mr. Hellyer: Parlez-vous de l'argent dépensé par la Société centrale d'Hypothèques et de Logements, monsieur Gilbert?

Mr. Gilbert: Oui. Vous avez raison monsieur Hellyer. En d'autres termes, les sommes accordées en prêts et pour les améliorations apportées aux habitations.

Mr. Hellyer: Vous demandez le nombre d'unités, n'est-ce pas, monsieur Gilbert?

Mr. Gilbert: Oui, les chiffres ainsi que les montants.

[Text]

Mr. Hellyer: In terms of money, I have it here. I am not sure that I can give it to you in units.

[Interpretation]

M. Hellyer: Je peux vous donner les montants. Quant au nombre d'unités, je ne peux vous le dire pour sûr.

	\$
Section 40—Home Ownership & Rentals	272,442,000
Section 16—Low Income Entrepreneur	5,883,000
Section 16A—Low Income Non-profit	31,130,000
Section 35C—Public Housing Land Assembly and	
Section 35D—Public Housing Rental Housing	88,111,000
Section 36B—Student Housing	60,593,000
Section 36H—Sewage Treatment Projects	27,532,000
Section 23C—Urban Renewal	1,821,000
Section 35A—Land Assembly	9,701,000
Section 35A—Rental Housing	13,706,000
Section 37—Acquisition & Construction	195,000
	<hr/> 511,114,000

	\$
Section 40—Propriété domiciliaire et locations	272,442,000
Section 16—Entrepreneur à revenu modique	5,883,000
Section 16A—Revenu modique, but non lucratif	31,130,000
Section 35C—Aménagement de terrain pour les habitations publiques, et	
Section 35D—Habitations publiques et habitations de location	88,111,000
Section 36B—Habitations pour étudiants	60,593,000
Section 36H—Projets de traitement des eaux d'égout	27,532,000
Section 23C—Rénovation urbaine	1,821,000
Section 35A—Aménagement de terrains	9,701,000
Section 35A—Habitations de location	13,706,000
Section 37—Acquisition et construction	195,000
	<hr/> 511,114,000

Mr. Gilbert: That would be less than was spent in 1967, Mr. Hellyer?

Mr. Hellyer: Yes.

Mr. Gilbert: As I recall, it was, as a round figure, \$650 million for 1967; is that right?

Mr. Hellyer: That is correct.

Mr. Gilbert: Therefore, we are down roughly \$140 million from 1967.

Mr. Hellyer: Something of that order.

Mr. Gilbert: What is the projected amount for 1969?

Mr. Hellyer: It is \$636 million for the current fiscal year.

Mr. Gilbert: Which is approximately the same as for 1967?

Mr. Hellyer: Approximately the same as for 1967, yes.

Mr. Gilbert: And you have no projected figures on the amount of moneys that we have spent on public housing...

Mr. Hellyer: We do not have the final figures yet, no. A substantial proportion will be for public housing; a substantial proportion will be for student housing; a very sizeable

M. Gilbert: C'est moins que ce qu'on a dépensé en 1967.

M. Hellyer: Oui.

M. Gilbert: Je pense qu'on avait dépensé environ \$650,000,000 en 1967.

M. Hellyer: C'est juste.

M. Gilbert: C'est donc \$140,000,000 de moins qu'en 1967.

M. Hellyer: C'est à peu près cela.

M. Gilbert: Quelles sont les prévisions pour 1969.

M. Hellyer: \$636,000,000 pour l'année financière actuelle.

M. Gilbert: C'est à peu près la même chose qu'en 1967.

M. Hellyer: Oui, à peu près la même chose qu'en 1967.

M. Gilbert: Et avez-vous des prévisions sur les sommes dépensées pour les habitations publiques?

M. Hellyer: Nous n'avons pas encore les chiffres définitifs. Une proportion substantielle sera attribuée aux habitations publiques, et aux maisons d'étudiants; une somme

[Texte]

ble amount will be for sewage treatment projects; there will be some money for urban renewal; I would say probably an increased amount for low-income, non-profit corporations, for a section 16, low-income entrepreneur; and then the balance of what is left, of course, will be available for home ownership and rentals.

Mr. Gilbert: Mr. Hellyer, are you satisfied quantitatively with the 40,000 public housing units we have at the moment?

Mr. Hellyer: That is a difficult question to answer, Mr. Gilbert, because I think one has to go further and do a qualitative as well as a quantitative analysis of where the units are.

I am not satisfied with the housing available for low-income Canadians. I want to see more accommodation available to them, both quantitatively and qualitatively.

As to the regional breakdown and the number of units per city and town across the country, I think one has to examine each one to see whether or not it is adequate to meet the immediate needs. I think in most cases you find that certainly additional accommodation is required either for rental or for purchase by low-income people.

Mr. Gilbert: What plans, if any, have you, Mr. Hellyer, for improving the public housing units that we have at the moment? I am thinking of places such as the Regents Park development. One of the major criticisms has been that CMHC have not provided moneys for social and recreational facilities.

Mr. Hellyer: This is a matter of concern. There are no firm plans, but we have been looking, for example, at a suggestion that was made on the possibility of the construction of a YMCA in the area. The hon. Donald Macdonald has taken a very keen interest in this because he represents that area in the House of Commons.

It might be possible to work out an arrangement with the YMCA whereby they could build dormitory facilities and provide some of the social amenities and some of the services, which would be of great benefit to the people living in Regents Park and in the area immediately adjacent to it. We are not unaware of the problem and you may be sure that anything that can reasonably be done will be thoughtfully considered.

Mr. Gilbert: Is it part of your planning in the public housing projects to include social and recreational facilities for the coming year and for future years? Is that not one of the main criticisms with regard to public housing?

[Interprétation]

importante pour les projets d'égouts; un certain montant sera alloué à la rénovation urbaine et peut-être aussi une somme accrue pour les sociétés de logement à revenu modique sans but lucratif, et pour les entrepreneurs en construction de logements à loyer modique; et ce qui reste sera alloué aux propriétés domiciliaires et de location.

M. Gilbert: Monsieur le ministre, pensez-vous que 40,000 unités de logement soient suffisantes pour le moment?

M. Hellyer: Il est difficile de répondre à cette question car il faut faire une analyse tant qualitative que quantitative. Je ne suis pas satisfait des facilités domiciliaires pour les canadiens au revenu modique. Je veux qu'il y ait plus de logement à leur disposition, tout du point de vue de la qualité que de la quantité. Quant à la ventilation par région, et le nombre d'unités par ville à travers le pays, je pense qu'il faut étudier chacun en particulier pour savoir si cela répond aux besoins immédiats. Dans la plupart des cas, des logements supplémentaires sont nécessaires, soit pour être loués, soit pour être vendus aux personnes ayant un revenu modique.

M. Gilbert: Quels sont vos plans, monsieur le ministre, pour améliorer les logements qui existent déjà? Je songe par exemple au développement de la région de Regent Park. On a dit que la Société centrale n'a pas fourni des fonds pour les installations sociales et récréatives.

M. Hellyer: Oui, c'est une question qui nous préoccupe. Il n'y a pas de plans bien établis mais nous avons étudié une suggestion qui nous a été faite en vue de la construction par exemple d'un Y.M.C.A. dans la région. Nous nous y intéressons vivement, nous en avons parlé avec le député de cette circonscription monsieur Donald Macdonald qui s'est beaucoup intéressé étant donné qu'il représente cette région à la Chambre.

Il sera peut-être possible de conclure une entente avec le Y.M.C.A. qui pourra fournir un centre récréatif qui serait fort utile aux gens de la région. Nous sommes bien au courant de la situation et soyez sûrs que nous essaierons de faire tout ce qu'il sera possible de faire.

M. Gilbert: Dans le domaine des logements à loyer modique, songez-vous à inclure des installations ou des centres récréatifs, au cours des années à venir? N'est-ce pas une des principales critiques qu'on a formulées à l'égard des logements à loyer modique?

[Text]

Mr. Hellyer: I am informed that under the Act as it presently exists we can consider this kind of thing only within the project itself, and not finance this kind of facility in the neighbourhood. Traditionally, I think, it was the position of the federal government that these were services which normally should be provided by the municipality, not just to the people in public housing but to all the citizens on an equal basis.

In respect to new projects, of course, consideration will be given as to what amenities should be provided and insofar as the existing projects are concerned this is something that will have to await further consideration of possible changes in the Act or some other arrangements which would allow us to experiment and see how the quality of life in the existing projects could be ameliorated.

Mr. Gilbert: Are you saying that you have not the power within the Act at the moment?

Mr. Hellyer: To provide the type of facility you are talking about, except in the context of say a YMCA building which is covered under another section.

Mr. Howe: What assistance is given to YMCAs? Is it through some part of this act?

Mr. Hellyer: We are in a position to provide loans to YMCAs, if I remember correctly, and this is possible under the Act as it presently exists.

Mr. Howe: Does this include community centres? Does the federal government participate in the community centres?

Mr. Hellyer: We finance the dormitory part of it. It is possible to work out with the YMCA the harmonious marriage of the dormitory and other community facilities, to the mutual advantage of the inhabitants of both the Y and the area.

Mr. Gilbert: The initiative would have to come from the YMCA and you would finance the dormitory aspect of the project.

Mr. Hellyer: That is correct, except that in this case the initiative might be mutual in the sense that we have been thinking about the possibility of doing something like this and there has been a considerable discussion about it.

Mr. Gilbert: Am I right in inferring that you have not the power under the Act to include in any public housing project the acquisition of land and the erection of a building to provide recreational facilities?

[Interpretation]

M. Hellyer: Conformément à la loi actuelle nous pouvons seulement songer à cela dans le cadre du projet oui-même; nous ne pouvons pas le faire dans le cadre du projet lui-même; nous ne pouvons pas le faire habituellement, je crois, le gouvernement fédéral jugeait qu'il s'agissait là de services qui devaient normalement être fournis par les municipalités, non seulement aux habitants des logements à loyer modique mais à toute la population.

Dans le cas des nouveaux projets, nous songerons aux installations à fournir, et pour ce qui est des projets qui existent déjà, il nous faudra y songer encore, et il faudra peut-être modifier la loi, ou encore conclure d'autres arrangements qui nous permettront d'expérimenter certaines choses et de voir s'il est possible d'améliorer les conditions de vie dans ces habitations.

M. Gilbert: La loi ne vous y autorise donc pas à l'heure actuelle?

M. Hellyer: Pour fournir ce genre d'installations, sauf par exemple lorsqu'il s'agit d'un YMCA qui relève d'un autre article de la loi.

M. Howe: Quelle aide accorde-t-on aux YMCAs? Est-ce que cette aide est prévue dans la loi?

M. Hellyer: Nous sommes en mesure d'accorder des prêts aux YMCAs, si je me souviens bien, et la loi actuelle le permet.

M. Howe: Est-ce que cela comprend les centres communautaires? Est-ce que le gouvernement fédéral y participe?

M. Hellyer: Nous finançons les maisons de pension. Il semble possible avec l'organisation des YMCAs de relier les installations communautaires et les maisons de pension pour que cela soit à l'avantage de la population.

M. Gilbert: L'initiative doit être prise par le YMCA et vous financeriez les maisons de pension.

M. Hellyer: C'est juste, sauf que dans ce cas, l'initiative peut être prise dans les deux sens. Nous songeons à un projet de ce genre, nous en avons beaucoup parlé.

M. Gilbert: Ai-je raison de dire que la loi ne vous autorise pas à inclure dans un programme de logements à loyer modique l'achat de terrains, la construction d'immeubles pour des centres récréatifs?

[Texte]

Mr. Hellyer: In new projects there is power to include them as an integral part.

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Mr. Gilbert: I hope this will be part of your plans for 1969.

Mr. Hellyer: Your representations will be well noted, Mr. Gilbert.

Mr. Gilbert: Thank you. With regard to the 40,000, the Member for Parkdale last evening mentioned that there are a minimum of 13,000 persons on the waiting list in Toronto alone for public housing. I happened to read an article, a memorandum to the Task Force report, put out by the Canadian Welfare Council. It contains the following:

The scope of this problem has been amply described in the provincial housing profiles prepared for the Conference, in the report's own figures of half a million substandard dwellings and 400,000 families sharing accommodation, in the 100,000 families on the waiting lists for public housing and the one Canadian in every five using 70 per cent or more of their incomes for food, clothing and shelter.

This is a quote from the Economic Council of Canada, *Fifth Annual Review*, page 110, which indicates that there is a waiting list of 100,000 people for public housing units across Canada. On the basis of performance in 1968 of 10,000, and keeping in mind the 40,000 total stock, what is your position with regard to increasing the stock to take care of this very serious and urgent problem?

Mr. Hellyer: I think, Mr. Gilbert, that you would find if you examined the list of 14,000 carefully that, first of all, all of these people are housed, although not all of them satisfactorily. My guess is that you would find that the main problem of a fair proportion of them is income. If they had adequate income to pay for their present accommodation many of them would not wish to move into public housing. I think it is because in many cases their income is so low, and the rents that they are paying are so high, that they have put themselves on the waiting list for public housing.

There is an alternative, and that is to raise their incomes in such a way that they would be able to afford the accommodation they are presently in, if it is suitable, or to seek alternative accommodation in the event that it is not suitable.

[Interprétation]

M. Hellyer: Nous avons de nouveaux programmes où nous pouvons les inclure, comme partie intégrante?

M. Gilbert: J'espère que cela fera partie de vos plans pour 1969.

M. Hellyer: Nous tiendrons compte de vos instances, monsieur Gilbert.

M. Gilbert: Merci. En ce qui a trait aux 40,000 unités, le député de Parkdale a dit hier soir qu'il y a au moins 13,000 personnes sur une liste d'attente, à Toronto, qui attendent des logements subventionnés. J'ai lu un mémoire remis à l'Équipe spéciale par le Conseil canadien du bien-être. Dans cet article, on dit que:

L'importance de ce problème a été bien décrite dans les rapports de chaque province, préparés pour la Conférence. Il semble y avoir un demi-million de logements inadéquats et 400,000 familles qui partagent des logements, environ 100,000 attendent des logements à loyer modique, et un Canadien sur cinq dépense 70 p. 100 ou plus de son revenu pour le logement, la nourriture et le vêtement.

Ces chiffres figurent à la page 110 du cinquième exposé annuel du Conseil économique du Canada. Il y a une liste d'attente de 100,000 personnes, au Canada, qui attendent des logements à loyer modique. En 1968, on en a construit 10,000, et compte tenu du total de 40,000 unités, quelle est votre opinion à ce sujet? Devrions-nous en augmenter le nombre pour répondre à ce problème urgent?

M. Hellyer: Si vous examinez cette liste de 14,000 avec soin, monsieur Gilbert, vous découvrirez que toutes ces personnes ont un logement, même s'il n'est pas tout à fait satisfaisant. Je pense qu'une bonne proportion de ces gens ont plutôt des problèmes de revenu. S'ils avaient des meilleurs revenus pour payer leur logement, un grand nombre d'entre eux ne voudraient pas déménager dans les logements subventionnés. Dans plusieurs cas, leurs revenus sont si bas et les loyers qu'ils paient sont si élevés qu'ils s'incrivent sur la liste.

Mais il y a une autre possibilité: on pourrait augmenter leurs revenus de façon à leur permettre de pouvoir payer leur loyer, ou encore de trouver d'autres logements si le leur n'est pas satisfaisant.

[Text]

There are different ways of approaching this problem. I would not exclude any way. Certainly the Task Force indicated, and it is government policy to continue with the construction of public housing. We feel, however, that it is worthwhile experimenting with other solutions to see how they compare in cost and from the standpoint of the social and other benefits available to the people.

This is really what we are suggesting, that there is much room for experiment. There is an opportunity for new initiatives to see if there are not, in fact, some much better ways of doing things. And it would be our wish to undertake perhaps as many as eight or ten different kinds of projects, hopefully during the course of this year. So that we would then be able to measure them not just from the standpoint of costs in dollars and cents but also from the standpoint of the effect they have on the lives of the people who are being accommodated. And then from those eight or ten different kinds of projects we might be able to select the five or six policies which are most suitable and discard those that are least suitable.

Mr. Gilbert: Could you describe a few of the planned projects you have to meet this problem?

Mr. Hellyer: I can give you two or three of the options available. One would be to make money available for units for sale to low-income families. One policy would be to rent through bulk lease units dispersed in existing but unoccupied units and to make those available on a subsidized basis to people who are waiting to get into public housing. I have already indicated, of course, that there is a

[Interpretation]

Il y a d'autres attitudes devant le problème; et je ne veux pas en exclure. Le groupe de travail l'a indiqué, le gouvernement continuera à construire des HLM. Mais il vaut la peine d'étudier d'autres solutions et de les comparer. Comparer les coûts et comparer les avantages sociaux et autres.

C'est vraiment ce que nous suggérons. Nous pourrions faire toutes sortes d'expérience cela permettra de nouvelles initiatives. Il y a peut-être de meilleures façons d'agir, et nous voudrions entreprendre peut-être huit ou dix différents types de projets au cours de l'année qui vient. Nous pourrions alors mesurer les résultats non seulement en termes de coûts mais aussi en termes d'efficacité pour ces familles; et si nous avons 8 ou 10 projets différents, on pourra peut-être choisir les cinq ou six politiques qui semblent les meilleures et on pourra mettre les autres de côté.

M. Gilbert: Pourriez-vous nous parler de quelques projets auxquels vous songez pour résoudre ce problème?

M. Hellyer: Je peux vous parler de deux ou trois projets. Premièrement, placer de l'argent à la disposition des unités domiciliaires à vendre aux familles à revenus modiques. On pourrait louer au moyen d'un loyer global des unités qui sont dispersées ou inoccupées et on les offrirait aux gens qui sont sur la liste. On a déjà dit qu'on insisterait sur les propriétés conjointes, et on insisterait beaucoup plus sur

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greater emphasis on condominium in the normal rental field, a greater emphasis on co-operative housing in its several forms, a greater emphasis on Section 16, low income entrepreneur, a greater emphasis on Section 16(a), low income non-profit.

Mr. Gilbert: Are you talking about limited-dividend housing when you talk about Section 16?

Mr. Hellyer: Section 16 is limited-dividend. So there are at least six or eight kinds of policies which could be tried to find out how successful they are and whether or not they were more or less successful than those policies presently in effect.

Mr. Gilbert: They would have to be pilot projects at their best to determine just which one or which few would be the ..

les logements coopératifs sous toutes leurs formes, et on insistera en outre sur l'article 16, les entrepreneurs à revenu modique, et sur l'article 16(a), les logements sans but lucratif.

M. Gilbert: Parlez-vous des logements à dividendes limités, lorsque vous parlez de l'article 16?

M. Hellyer: Oui, c'est ça. Alors, il y a au moins six ou huit sortes de politiques qui pourraient être mises à l'essai pour savoir si elles sont satisfaisantes ou non.

M. Gilbert: Il faut que ce soient des projets pilotes, pour savoir quels seront les meilleurs.

[Texte]

Mr. Hellyer: Any new project is a pilot project in that sense and I think it would be wise not to undertake just one but perhaps the same kind of policy in two or three places across the country so that your measurement would be a fair measurement.

Mr. Gilbert: With regard to making money available for the purchase of older homes and also for the renting of other homes by giving subsidized rents or income supplements, that would not add any stock to the existing stock that we have now, would it?

Mr. Hellyer: No, it would not, but there is some vacancy. For example, there are apartments available in Toronto at the present time which are unoccupied, and to the extent that you use an income supplement the cost of the subsidization would probably not be greater than that related to public housing and you would have the capital available for building additional family accommodation. I think as far as the completion of the housing stock is concerned, it is the number of units you get out of the capital available and we would try to maximize that regardless of which policy we were to undertake.

Mr. Gilbert: The Chairman has just indicated his watch to me and I am prepared to yield to let somebody else in, with the right to return.

Mr. Robinson: Mr. Chairman, he has only had 12 questions if my count is correct and I think we could allow him to have eight more.

Mr. Gilbert: I am good for another 25.

The Chairman: Perhaps we should pass on to Mr. Skoberg.

Mr. Skoberg: If it is agreeable to the Committee I will certainly yield to Mr. Gilbert and let him complete his questioning at this time.

Mr. Robinson: I think we should let Mr. Gilbert complete his questioning.

Mr. Gilbert: Thank you, Mr. Chairman and members of the Committee. Mr. Minister, what amount of money do you think would be required for these rental income supplements? What would be a projected amount?

Mr. Hellyer: The average subsidy of all units in the public housing in Canada is \$40 but it can range as high as \$100 per unit in some places.

Mr. Gilbert: Do you think that by giving a rental supplement what you are really doing

[Interprétation]

M. Hellyer: Chacun de ces projets est un projet pilote, en ce sens-là, et il serait sage de ne pas en essayer qu'un seul. Il faudrait les essayer à deux ou trois endroits dans le pays afin d'en avoir une évaluation juste.

M. Gilbert: Pour avoir de l'argent pour acheter des maisons qui ne sont pas neuves et pour en louer d'autres au moyen de loyers subventionnés ou en fournissant un supplément de revenus, cela n'augmentera pas la quantité d'unités que nous avons maintenant.

M. Hellyer: Non. Mais, il y a des appartements à Toronto qui ne sont pas occupés; certains pourraient utiliser un supplément de revenus, le coût des subventions ne sera pas plus élevé que les subventions accordées pour les HLM et nous aurons du capital pour construire d'autres habitations. Alors pour ce qui a trait à augmenter le plus possible le nombre d'unités avec un capital plus important, nous pourrions le faire, peu importe la politique que nous suivrons.

M. Gilbert: Le président vient de me jeter un coup d'œil et je suis prêt à céder la parole à quelqu'un d'autre, mais j'aimerais bien reprendre la parole.

M. Robinson: Si j'ai bien calculé, il a posé douze questions seulement et je pense qu'on pourrait lui en accorder huit autres.

M. Gilbert: Je suis prêt à en poser vingt-cinq autres.

Le président: Nous devrions peut-être passer à M. Skoberg.

M. Skoberg: Si cela convient au Comité, je céderai la parole à M. Gilbert.

M. Robinson: Nous devrions permettre à M. Gilbert de terminer ses questions.

M. Gilbert: Merci, monsieur le président. Monsieur le ministre, quelle somme serait nécessaire pour ces suppléments des unités louées? Quel montant envisagez-vous?

M. Hellyer: La subvention moyenne pour toutes les unités est de \$40 mais cela peut s'élever jusqu'à \$100 dans certains endroits.

M. Gilbert: Pensez-vous qu'en subventionnant les loyers, ce que l'on ferait, serait de

[Text]

is subsidizing the landlord and tending to increase the rents in a particular community?

Mr. Hellyer: No. If the agreement was by long-term lease that would not be the case. And assuming the subsidy was the same or less than would be the case with public housing it would be a net saving to the taxpayers, which is something that I am sure you would concur with.

Mr. Gilbert: I just happen to have read in today's paper that Mr. Robarts, the Ontario Premier, is blaming the federal government for delays in housing and I thought I had better apprise you of this by reading a paragraph or two. It says, that Ontario Premier John Robarts is blaming the federal government for delaying public housing projects. He said Wednesday night Ottawa is not providing funds needed for these projects. There is a backlog of 1,000 families in Ottawa applying for accommodation, he said. Is there anything the Province can do to assist low income families?

I am sorry—I was trying to shorten it. It was Controller Heit who asked if there was anything the province could do to expedite public housing. What is your reaction to the blame that is being placed at your doorstep by the Premier of Ontario with regard to delays in public housing?

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Mr. Hellyer: I have broad shoulders.

Mr. Gilbert: I am sorry. I missed your answer. I heard a side remark by the member for Parkdale.

Mr. Hellyer: I think the Premier is a little out of date with his information. Had he consulted his Minister in charge of housing he would have realized that there are only two projects which have been held up for further consideration. The rest are all in process.

Mr. Gilbert: In process. Is it your intention to set up a committee to study the social, psychological and economic effects of public housing?

Mr. Hellyer: A study, yes. This will be done by an independent group who will try to measure all of these things. It was suggested that design should also be included. It was certainly intended that design and all of the factors would be included so that you would get some measurement of the reaction of people to their environment.

[Interpretation]

subventionner les propriétaires et tenter de hausser les loyers dans certaines régions?

M. Hellyer: Non, pour un bail à long terme, tel n'est pas le cas. En supposant que la subvention serait moindre ou plus élevée, que des habitations à prix modiques, cela équivaldrait à une nette économie pour les contribuables, chose avec laquelle vous êtes certainement d'accord.

M. Gilbert: J'ai lu, dans le journal d'aujourd'hui, que le premier ministre de la province de l'Ontario, M. Robarts, blâme le gouvernement fédéral pour les délais dans la construction d'habitations. Je voudrais vous lire un paragraphe. Le premier ministre Robarts blâme le gouvernement Fédéral d'avoir retardé les projets de construction d'habitations à loyers modiques. Mercredi soir, il a dit qu'Ottawa ne fournit pas les fonds nécessaires pour ces projets. Il y a environ 1,000 familles à Ottawa qui attendent pour des logements. Est-ce que la province peut faire quelque chose pour aider les familles à faible revenu?

J'essayais d'abrégé. C'est le commissaire Heit qui a demandé si la province pouvait faire quelque chose pour activer les choses dans le domaine des logements subventionnés? Qu'est-ce que vous pensez de cette critique par le premier ministre de l'Ontario, au sujet des habitations subventionnées?

M. Hellyer: J'ai les épaules larges.

M. Gilbert: Je regrette, mais je n'ai pas entendu votre réponse. J'écoutais un commentaire du député de Parkdale.

M. Hellyer: Je pense que le premier ministre de l'Ontario n'est plus à la page. S'il avait consulté son ministre, il aurait vu qu'il n'avait que deux projets qui étaient retardés. Les autres sont en voie de construction.

M. Gilbert: En voie de construction. Est-ce que vous avez l'intention d'établir un Comité pour étudier les effets socio-économiques et psychologiques de ces programmes?

M. Hellyer: Oui, nous ferons faire cette étude par un groupe indépendant qui essaiera d'évaluer tout cela. On a suggéré d'inclure aussi la conception. Il faudrait inclure la conception et tous les facteurs afin qu'on puisse établir une sorte de barème de la réaction des gens, à leur milieu.

[Texte]

Mr. Gilbert: Is there going to be a holdback on public housing until this report is completed?

Mr. Hellyer: No. As I indicated in the House, Mr. Gilbert, the criterion will be that good family accommodation will be approved. The only area in which we would go slow or withhold approval would be in what we have described as the large elevated-type projects—the ones which we found most unsatisfactory in talking to the people who live in them. Provided the projects which are received meet the qualifications, of course, there will be no delay.

Mr. Gilbert: Swinging to the problem of financing of homes, Mr. Minister, you expressed an optimism with regard to obtaining sufficient moneys so that we would have a steady flow of mortgage moneys for the year 1969. Keeping in mind the problems that were faced in 1968—and I am reminding you of the invitation that you gave to financial institutions to discuss this problem with you in August of 1968 and then your actions in September of transferring moneys earmarked for public housing for direct lending, \$170 million in September—what gives you this optimism with regard to the steady flow of money?

Mr. Hellyer: Because since I met with them last August there has been no shortage of funds. The funds have been flowing at a good rate. The problem now is the imbalance in housing type, and most of the institutions have been putting their housing into multiple dwellings, particularly high-rise apartments. Consequently, the number of single family houses, of duplexes, of semi-detached and of row housing is not adequate, in my opinion and I think it is an opinion shared by the Corporation. The balance has been distorted because of the financial advantages there are to build the multiple high-rise types, and it was largely for this reason that a particular market was not being met. The particular market was for accommodation on the ground for family accommodation and, as a result of that, we made funds available so that the production of that kind of housing would be greater than otherwise it would have been. We have exactly the same problem this year.

The rate so far has been away up over last year—56.1 per cent above last year for the first two months. That is a pretty substantial increase but if you look at the breakdown you will find that a very large proportion of the increase is in multiple dwellings and we will

[Interprétation]

M. Gilbert: Est-ce qu'il nous faudra attendre ce rapport?

M. Hellyer: Non. Comme je l'ai indiqué à la Chambre, M. Gilbert, les critères seraient, que de bons logements familiaux seraient fournis. La seule chose qui pourrait tarder serait les projets en hauteur, ceux qui ont été jugés très peu satisfaisants par les personnes qui y habitent, à condition que l'on puisse satisfaire aux exigences.

M. Gilbert: Passons maintenant au problème de financement des habitations. Vous avez semblé optimiste au sujet des fonds afin que nous ayons un débit constant de sommes d'argent pour les hypothèques pendant 1969. Et vu les problèmes auxquels nous avons dû faire face en 1968, et l'invitation que vous avez lancée aux institutions financières de venir discuter de ce problème avec vous, au mois d'août 1968, et ensuite votre décision au mois de septembre, de transférer les sommes prévues pour les logements publics à des prêts, 170 millions, quelle est la raison de votre attitude à cet égard?

M. Hellyer: Depuis cette réunion, il n'y a pas eu de pénuries de fonds, l'argent circule librement. Il y a cependant un manque d'équilibre dans les types de logements; on semble vouloir plutôt construire des logements multiples et des appartements. A mon avis, et c'est l'avis de la Société, il n'y a pas assez de logements uni-familiaux, de duplexes, de maisons jumelées et d'habitations continues. L'équilibre est rompu à cause des avantages financiers qu'offre la construction d'appartements et de logements multi-familiaux. Et c'est surtout pour cette raison qu'il y a un marché que l'on ne pouvait pas satisfaire, celui des logements uni-familiaux. Et, par conséquent, on a mis des fonds disponibles pour en accroître la production. Nous avons le même problème cette année.

Les taux, jusqu'ici, ont été beaucoup plus élevés que l'année dernière, 56.1 p. 100 de plus que l'an dernier pour les deux premiers mois. C'est une augmentation assez substantielle, mais si vous regardez la ventilation, vous verrez qu'une grande partie de ces aug-

[Text]

still have a problem getting sufficient family accommodation built.

Mr. Gilbert: Are you hoping to be able to persuade the financial institutions and possibly the builders to get a more balanced allo-

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cation of their moneys on the types of homes that are required to be built so that you do not get that imbalance in 1969?

Mr. Hellyer: The builders will build them if the money is available. The big problem is getting the financial institutions interested in that kind of housing. I certainly will encourage them to make funds available for a better mix of housing types but it may be necessary in addition that the government with its funds do what it can to redress the balance and not to accentuate it.

Mr. Gilbert: I just do not follow your last comment.

Mr. Hellyer: To be more specific, I think two or three people have suggested that we should build high-rise public housing, for example. But when so much high-rise is being built and, in our opinion, too much of the total, then this is just one more reason that we should concentrate on family accommodation, if the private lenders are going to concentrate so sharply on the kind of accommodation which is less satisfactory for families.

Mr. Gilbert: Mr. Minister, there is a difference in philosophy with regard to public housing in Canada compared to England.

Mr. Hellyer: Very much so.

Mr. Gilbert: You have 30 per cent in England, according to Mr. Hignett, and I think he is right. Many social workers say that the problem with public housing in Canada is that there is not enough of it.

In other words, what we have done to date with regard to public housing is to earmark it for people with low incomes. In England and in other countries, this is not done; it is directed not only for low incomes but for middle incomes. What do you think of a change in philosophy in regard to this?

Mr. Hellyer: Frankly, I think it would be wasteful, but that is just my own opinion. I

[Interpretation]

mentations est attribuable aux logements multi-familiaux. Nous aurons encore le problème de faire construire un nombre suffisant d'habitations familiales.

M. Gilbert: Vous espérez donc pouvoir persuader les institutions financières et les entrepreneurs d'en venir à une allocation plus

équilibrée des sommes attribuées aux différents types d'habitations à construire afin de ne pas avoir un déséquilibre en 1969?

M. Hellyer: Les entrepreneurs les construiront si l'argent est disponible. Le grand problème consiste à convaincre les institutions financières. J'encourage certainement les institutions à fournir des fonds pour des unités diverses. Je leur demande surtout d'essayer de rétablir l'équilibre, et non pas de l'accentuer.

M. Gilbert: Je ne comprends pas très bien votre dernier commentaire.

M. Hellyer: Plus particulièrement, je crois que deux ou trois personnes ont suggéré que le gouvernement devrait construire des appartements en hauteur. Mais puisqu'on en construit tellement de nos jours, nous croyons que cela constitue une trop grande proportion de la construction, une autre raison donc pour laquelle nous devons nous concentrer surtout sur les logements unifamiliaux.

M. Gilbert: Monsieur le ministre, les principes sont différents. Il y a une philosophie différente au Canada que celle qui existe en Angleterre.

M. Hellyer: De beaucoup.

M. Gilbert: En Angleterre, la proportion est de 30 p. 100, selon M. Hignett, et je crois que c'est vrai. Un grand nombre de sociologues prétendent que le problème au Canada c'est qu'il n'y a pas assez de logements.

En d'autres termes, jusqu'ici ce que nous avons fait en ce qui concerne le logement subventionné, c'est que nous visons surtout à fournir des logements aux personnes qui ont des revenus peu élevés. En Angleterre et en d'autres pays, on ne fait pas cela; le programme s'applique à ceux qui ont des revenus moyens aussi. Que pensez-vous d'un changement de philosophie?

M. Hellyer: Je pense franchement que ce serait un gaspillage, mais c'est une opinion

[Texte]

think it would produce less housing for the same cost, less satisfactory housing, because so many decisions would be made by governments and too few by the people themselves. If you wanted to increase the cost and decrease the quality that would be a policy that you might pursue, but if you want to go in the other direction and increase the quality and decrease the cost then I would respectfully submit that our philosophy is more productive than theirs, our economy is more productive than theirs, and I cannot see any reason that we should change it until we can find a better one.

Some hon. Members: Hear, hear.

Mr. Gilbert: Has this been the result of our studies in other countries or is this just personal opinion.

Mr. Hellyer: It is the result of many long years of pondering these problems, of visiting public housing in England and in other places and of getting some feel of the situation here.

I think every country has its own philosophy, every country has its own way of doing things and all I know is that ours has produced as good or better results than any other country in the world. As grandfather used to say, "The biggest room in the world is the room for improvement." We still are not doing as well as we can and it is for this reason that the Task Force was quite critical of some of the policies that we are presently following and suggested many improvements that could be made.

I would hope that if most or all of the suggestions that were made in the Task Force report are implemented over a reasonable period of time that we would have the best housed people in the world bar none. That is our objective and I think that what we are presently doing with the changes proposed is most likely to bring about that result.

Mr. Gilbert: I notice that the President of co-op housing said that if we were to have the proper mix—I think the mix was 65 per cent residential, between 10 and 20 per cent public, and 15 per cent co-operative—that we would be the best housed people in the world. At the moment we have one per cent and here you have an authority on housing—I think it was Dr. Laidlaw who prepared that report; he was also a director of CMHC—making the suggestion of between 10,000 and

[Interprétation]

personnelle. Je pense que pour la même somme d'argent, on obtiendrait des unités de logement moins nombreuses et moins satisfaisantes, parce que trop de décisions seraient prises par les gouvernements et trop peu par les gens. Si on voulait augmenter le prix et diminuer la qualité, ce serait un bon moyen de le faire, mais si on veut faire le contraire et augmenter la qualité et faire diminuer le coût, en toute déférence, je dirais que notre philosophie est plus productive que la leur, notre économie est plus productive que la leur et je ne vois aucune raison de changer notre attitude jusqu'à ce que nous ayons trouvé un meilleur moyen.

Des voix: Très bien!

M. Gilbert: Est-ce le résultat de vos études dans d'autres pays, ou est-ce simplement une opinion personnelle?

M. Hellyer: C'est le résultat de longues années d'études de ma part, après avoir visité les unités de logement en Angleterre et dans d'autres pays, ainsi qu'au Canada, et j'ai vu la situation un peu partout.

Je pense que chaque pays a sa manière d'agir, chaque pays a sa façon de procéder, et tout ce que je sais, c'est que notre méthode a produit des résultats aussi bons ou meilleurs que dans les autres pays. Mon grand-père avait coutume de dire: «Le lieu le plus grand au monde est celui de l'amélioration». Nous ne faisons pas encore tout ce que nous pouvons et c'est la raison pour laquelle l'équipe spéciale a critiqué certaines des politiques que nous appliquons présentement, mais qu'il y a moyen d'améliorer la situation.

J'espère que si on peut appliquer la plupart ou toutes les recommandations qui ont été faites dans le rapport de l'équipe spéciale, que nous aurons la meilleure situation du monde au point de vue de l'habitation. C'est notre but et je crois que ce que nous faisons avec les changements proposés nous donnera de bons résultats.

M. Gilbert: Je note que le président de l'Union des coopératives de logement prétend que si nous avions un mélange satisfaisant, à 65 p. 100 résidentiel, de 10 à 20 p. 100 de logements subventionnés, et 15 p. 100 de coopératives, nous aurions le meilleur système de logement au monde. Présentement, nous avons un pour cent et vous avez ici un autorisé en logement, je crois que c'est la docteur Laidlaw qui a préparé ce rapport; il était aussi un directeur de la Société centrale

[Text]

15,000 for public housing. Are we to ignore men like him?

Mr. Hellyer: No, we cannot ignore anybody but it is just one man's opinion. I somehow distrust anyone who has a categorical answer on what the breakdown should be. I would prefer mechanics whereby the kind of housing for which there was a demand could be provided and where the decisions were really made by the individuals who are being housed. I think from time to time I know better what I want by way of housing than anyone who would make that decision for me, I think the poor people of Canada would be in precisely the same position if they had the income and that they would be the best people from time to time to decide whether they wanted to live in apartments or in houses on the ground—and the object of the Task Force Report was to make it as possible as we could for them to make that kind of judgment.

It is really to allow people to make some of their own judgments that we felt the mechanics should be improved rather than leaving this kind of decision in the hands of governmental or social service agencies or anyone else, regardless of how well meaning they might be.

Mr. Gilbert: Well at the moment you are leaving the decision in the hands of the builders.

Mr. Hellyer: I think more in the hands of the lending institutions than the builders.

Mr. Gilbert: Okay, we will accept that, in the hands of the builders and the lending institutions. Here we have public housing of 1 per cent, we have a 1967 performance of 164,000 and a 1966 performance of 134,000. Last year, 1968, we had a performance of 196,000 which was only brought up by the injection of moneys by the federal government in September.

Mr. Hellyer: I do not think that is fair because, as you pointed out, we put less money in the market than we had in 1967 and yet you had this phenomenal increase in total production.

Mr. Gilbert: I will come in a minute, Mr. Minister, to the breakdown as the result of that \$170 million. But here we have this poor housing record for the last few years and the Economic Council of Canada says we need 190,000. Are you still prepared to leave the decision within the hands of the builders and

[Interpretation]

d'hypothèque et de logement et il a suggéré de 10 à 20 mille pour les logements subventionnés. Allons-nous ignorer des gens comme ça?

M. Hellyer: Non, on ne peut pas ignorer ces remarques, mais c'est simplement l'opinion d'une personne. Je n'ai pas confiance en une personne qui a une réponse définitive à un problème. Je préfère la méthode qui voit à ce que l'on satisfasse la demande pour le logement. Je pense que de temps en temps je sais mieux que quiconque ce que je veux comme logement que les autres personnes qui voudraient prendre une décision pour moi. La plupart des gens sont dans la même situation. Les gens savent, d'après leurs revenus, s'ils veulent habiter dans une maison unifamiliale ou dans un appartement, et le but du rapport c'était de permettre à ces gens-là de prendre sa décision.

Nous voulons que les gens eux-mêmes rendent leur propre jugement sur la façon d'améliorer la méthode plutôt que de laisser la décision à la discrétion des agences sociales ou des fonctionnaires.

M. Gilbert: En ce moment, vous laissez la décision aux entrepreneurs, ceux qui construisent les maisons.

M. Hellyer: Non, je pense que c'est plutôt les institutions financières.

M. Gilbert: Très bien, nous acceptons que ce soit entre les mains des entrepreneurs ou des financiers. Nous avons 1 p. 100 de logements subventionnés en 1967, 164,000 et en 1966, 134,000. L'an dernier, nous avons atteint 196,000, ce qui a simplement été augmenté à la suite d'une injection de capitaux de la part du gouvernement fédéral, au mois de septembre.

M. Hellyer: Je ne crois pas que ceci soit juste, parce que, comme vous l'avez souligné, nous avons insufflé beaucoup moins d'argent qu'en 1967, et vous avez quand même eu cette augmentation formidable de la production globale.

M. Gilbert: J'en viendrai à cela dans un moment, monsieur le ministre, en ce qui concerne la ventilation de ces 170 millions de dollars. Mais nous avons un piètre record depuis quelques années et le Conseil économique du Canada dit que nous avons besoin de 190,000 logements. Est-ce que vous êtes tou-

[Texte]

the financial institutions on the basis of that performance?

Mr. Hellyer: I think the people will make the decisions if we do not load the financial dice in favour of any particular form of housing. The reason we have been getting this imbalance is that the dice has been loaded in favour of the multiple dwelling. I do not say that we are going to correct that completely but I do say that the recommendations of the Task Force will make it easier for the market to meet the real demands rather than putting too much of a premium on any particular form.

The Chairman: Are you through, Mr. Gilbert?

Mr. Gilbert: No, I am not, Mr. Chairman. Would you like to pass on to somebody else?

The Chairman: No.

Mr. Gilbert: I do not want to monopolize all the time.

Some hon. Members: Go ahead.

The Chairman: Order, please.

Mr. Gilbert: Mr. Minister, with regard to the performance in 1968, we had 196,000 units built. Could you tell me what the performance was as of September 1968 prior to the injection of the moneys by the federal government? How many actual dwellings did we have completed?

Mr. Hellyer: Perhaps we can get the answer to that question but I think we could work at it backwards by indicating how many starts were financed by that change in policy. This resulted in an additional 12,000 single family dwellings. So I think if you subtract that from the total you would get some indication of what would have happened otherwise.

Mr. Gilbert: So we would have had about 184,000 units.

Mr. Hellyer: Assuming that that money had not been spent by government on some other program, which appeared to be the case at the time.

Mr. Gilbert: It would be fair to say then on the basis of that that we spent less than \$100 million on public housing in 1968.

Mr. Hignett: It was about \$150 million in total.

[Interprétation]

jours prêts à laisser les entrepreneurs et les institutions financières prendre les décisions?

M. Hellyer: Les personnes qui prennent les décisions nous demandent de ne pas favoriser un genre de logement plutôt qu'un autre. Nous ne pourrions pas corriger cette situation complètement, mais les recommandations de l'équipe spéciale faciliteront, aideront à rencontrer les demandes à satisfaire les demandes du marché.

Le président: Avez-vous fini, monsieur Gilbert?

M. Gilbert: Non, monsieur le président, est-ce que vous voulez donner la parole à quelqu'un d'autre?

Le président: Non.

M. Gilbert: Je ne voudrais pas monopoliser la réunion.

Des voix: Allez-y.

Le président: A l'ordre, s'il-vous-plaît.

M. Gilbert: Monsieur le ministre, pour ce qui est de l'exécution en 1968, nous avons 196,000 unités construites. Voulez-vous nous dire quelle était la situation jusqu'à 1968, jusqu'à cet apport de capitaux de la part du gouvernement fédéral? Combien de maisons avions-nous achevé à ce moment-là?

M. Hellyer: Nous pourrions obtenir la réponse à cette question, mais nous pourrions vous dire combien de maisons ont été entreprises à la suite de cet apport de capitaux. 12,000 maisons unifamiliales, et cela vous donne l'indication de ce qui serait arrivé sans cet apport.

M. Gilbert: Par conséquent, nous aurions eu environ 184,000 unités.

M. Hellyer: Si ces sommes n'avaient pas été dépensées sur d'autres programmes, ce qui semblait être le cas à cette époque.

M. Gilbert: Il serait peut-être équitable de dire que nous avons dépensé moins de 100 millions de dollars pour les logements subventionnés en 1968.

M. Hignett: En tout, c'était environ 150 millions.

[Text]

Mr. Gilbert: To build 10,000 units?

Mr. Hignett: Yes. They run about \$15,000 each.

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Mr. Gilbert: So it was roughly \$150 million that we spent on public housing.

Mr. Hignett: Yes.

Mr. Gilbert: Mr. Minister, could you recommend some mechanism that would take away the decision-making from the builders and the financial institutions so that Mr. Average Man or John Q. Public could have some determination in the type of home that he wants?

Mr. Hellyer: Well, as I just suggested, I think that as long as the financial dice are not loaded in favour of any one particular form of housing then, through the market, the individual will exercise his choice.

Mr. Gilbert: That is the hope you have?

Mr. Hellyer: That is correct.

Mr. Gilbert: And it is in the absence of any direction to the financial institutions and it is dependent on persuasion?

Mr. Hellyer: It is dependent on a market.

The Chairman: Have you finished, Mr. Gilbert?

Mr. Gilbert: No, I have not, Mr. Chairman.

What is your position on condominium housing, Mr. Hellyer?

Mr. Hellyer: I think it is a wonderful idea. One of the first dividends from the Task Force was a loan made by one of the chartered banks for a condominium in Toronto; and that institution, along with Central Mortgage and Housing Corporation, are proving to the financial institutions and builders of Canada that this is an excellent addition to the total range of policies; and I hope that it will be used very much more in the immediate future.

It offers some very real advantages, in that individuals are able to buy a share in a multiple unit, either a high-rise, or a maisonnette, or row housing, and in this way you can bring the cost of home ownership down.

There will be condominium-type housing built this year, I would suspect, for sale at as

[Interpretation]

M. Gilbert: Pour construire 10,000 unités?

M. Hignett: Oui, elles valent environ \$15,000 chacune.

M. Gilbert: Alors, cela représente environ 150 millions de dollars dépensés pour les habitations subventionnées.

M. Hignett: Oui.

M. Gilbert: Monsieur le ministre, pourriez-vous recommander une méthode par laquelle on pourrait retirer le pouvoir de prendre la décision des mains des entrepreneurs ou des entreprises financières, pour que le public même ait un mot à dire lorsqu'il s'agit du genre d'habitation qu'il désire?

M. Hellyer: Tant que la situation n'est pas à l'avantage de certains types de constructions domiciliaires, je pense que le particulier pourra exercer un choix dans le marché.

M. Gilbert: C'est votre espoir, n'est-ce pas?

M. Hellyer: Oui.

M. Gilbert: Et cela dépend de la persuasion et non des directives qu'on pourrait donner aux institutions financières?

M. Hellyer: Cela dépend du marché.

Le président: Avez-vous terminé, monsieur Gilbert?

M. Gilbert: Non, je n'ai pas encore terminé, monsieur le président. Qu'est-ce que vous pensez des maisons en commun, les condominiums, monsieur Hellyer?

M. Hellyer: Je pense que c'est une très bonne idée. L'un des premiers dividendes de l'Équipe spéciale a été un prêt d'une banque à charte pour la construction d'un condominium à Toronto; cette entreprise et la Société centrale d'hypothèques et de logement ont prouvé aux institutions financières et aux entrepreneurs en construction du Canada que c'est là un excellent apport à nos politiques. Nous espérons que l'on aura beaucoup plus recours à ce genre de financement à l'avenir. Cela offre des avantages réels en ce que les citoyens peuvent acheter une part des unités multiples et de cette façon, on peut faire diminuer le coût de la propriété. Les condominiums se vendront cette année environ \$14,000 ou \$15,000. Dans un projet à Calgary, le prix sera beaucoup plus bas si tout va

[Texte]

ow as \$13,000 or \$14,000. As matter of fact, here is one project planned for Calgary which, if it should prove to be successful, will get the price down substantially lower than that; and this is bringing it down to the point at which the working man with an industrial wage could afford to buy it.

Mr. Gilbert: Mr. Hellyer, I notice that you were quite critical of the churches last Sunday in the sermon you preached in Toronto. Just what do you think the churches can do? I notice we have a minister on our Committee. Perhaps you should tell us what the churches can do relative to building homes?

The Chairman: Are you on both ends? The one is a minister...

Mr. Hellyer: I suggested that they could invest a reasonable proportion of their assets in Government of Canada guaranteed mortgage loans.

Mr. Gilbert: I hope the minister on our Committee takes that to heart and persuades his...

Mr. Hellyer: I think they are; from the reaction it got I think the message was well received.

The Chairman: Have you finished, Mr. Gilbert?

Mr. Gilbert: Mr. Chairman, I would like to get to the problem of interest. I notice that in your remarks the other night...

Mr. Hellyer: You have our undivided interest, Mr. Gilbert.

Mr. Gilbert: Thank you, Mr. Hellyer. I appreciate that.

Mr. Chairman, I would be more than happy to yield to Mr. Robinson, if he would like to...

Mr. Robinson: No, no; I am enjoying this.

The Chairman: Order, please. You still have the floor, Mr. Gilbert, or are you through?

Mr. Gilbert: No, I am not, Mr. Chairman.

Mr. Hellyer, you expressed as a philosophy the other night that by lifting the interest rates you felt—you had a sort of intuition—that there would be a drop in interest rate; that it would probably be around 8½ per cent; and you also expressed the opinion of some of the lending institutions that the 2½ per cent above long-term Canadian bonds was

[Interprétation]

bien, et cela veut dire qu'un travailleur ordinaire pourra se procurer un de ces logements.

M. Gilbert: Monsieur le ministre, vous avez critiqué les églises lors d'un «sermon» que vous avez fait à Toronto. Pourriez-vous nous dire ce que l'église pourrait faire au sujet de la construction des maisons? Nous avons un ministre dans le comité.

Le président: Parlez-vous de la même chose? Celui-ci est un ministre...

M. Hellyer: J'ai proposé que les églises pourraient investir une partie de leur avoir dans des hypothèques garanties par le gouvernement.

M. Gilbert: J'espère que le ministre qui fait partie du comité tiendra compte de ces remarques.

M. Hellyer: Je crois que oui.

Le président: Avez-vous fini M. Gilbert?

M. Gilbert: Monsieur le président, j'aimerais parler de la question des intérêts. Je note que dans vos remarques de l'autre soir...

M. Hellyer: Vous captivez entièrement notre intérêt, monsieur Gilbert...

M. Gilbert: Merci, monsieur le ministre, je suis touché. Monsieur le président, je serais heureux de laisser la parole à mon voisin, s'il veut changer de sujet.

M. Robinson: Mais non, c'est très intéressant.

Le président: Vous avez toujours la parole M. Gilbert. Est-ce que vous avez fini?

M. Gilbert: Non, je n'ai pas fini. Monsieur le ministre, en ce qui concerne l'intérêt, vous avez exprimé l'opinion l'autre soir que vous aviez une sorte d'intuition qu'il y aurait une baisse dans le taux d'intérêt et que l'intérêt baisserait à environ 8½ p. 100. Vous avez aussi exprimé l'opinion de certaines institutions de prêts que les 2½ p. 100 des obligations canadiennes étaient trop onéreuses et que cela pourrait être de 1½ à 2½ p. 100, ce qui repré-

[Text]

much too much and that perhaps it ranged between $1\frac{3}{4}$ and $2\frac{1}{4}$.

• 2055

That is a half per cent, Mr. Hellyer. Do you think that would make that much difference to the cost of a home?

Mr. Hellyer: Every half per cent counts, Mr. Gilbert. This is the important thing. Perhaps we could give you an indication of what a difference of one half of 1 per cent would make on say a, \$15,000 mortgage?

Mr. Gilbert: How much deference would it make in a monthly payment?

Mr. Hellyer: If we could get the annual difference in income required we could work this out. I do not think we should pass up any opportunity to reduce costs, even if it were only a half percent of the interest rate.

Mr. Gilbert: Would I not be fair in saying that it would not be more than \$2 a month on the monthly payment, on a 25 year amortized mortgage?

Mr. Robinson: That is a lot of money for an old age pensioner.

Mr. Gilbert: Old age pensioners cannot buy homes, Mr. Robinson.

The Chairman: Order, please.

Mr. Hellyer: It would make about \$500 a year difference in the income requirement. In other words, a house that now requires a \$7,000 income to buy people earning \$6,500 would be able to buy.

Mr. Gilbert: Mr. Hellyer, I appreciate that, but the question was how much difference it would make in the monthly payment that the mortgagor had to pay each month?

Mr. Hignett: \$10 a month.

Mr. Gilbert: You say \$10 a month—by half a per cent?

Mr. Hignett: On a \$15,000 loan.

Mr. Gilbert: I think you had better calculate that again, Mr. Hignett. I am suggesting that it would not make a difference of any more than \$2 a month on a 25-year amortized plan.

Mr. Robinson: It works out to over \$6 a month.

Mr. Gilbert: Six dollars a month.

Mr. Hellyer: I am sorry, Mr. Gilbert. I did not do the mathematics myself.

[Interpretation]

sente une différence de $\frac{1}{2}$ p. 100. Pensez-vous que ce $\frac{1}{2}$ p. 100 pourrait faire tant de différence dans le prix d'une maison?

M. Hellyer: Tout cela compte, nous pourrions peut-être vous dire ce que représente la différence de $\frac{1}{2}$ p. 100 sur une hypothèque de \$15,000.

M. Gilbert: Quelle différence cela représenterait-il dans les versements mensuels?

M. Hellyer: Je ne pense pas que nous devrions négliger l'occasion de profiter de cette baisse d'intérêt, même de $\frac{1}{2}$ p. 100 du taux d'intérêt.

M. Gilbert: Est-ce que cela ferait une différence de \$2 par mois sur les versements mensuels sur une hypothèque de 25 ans?

M. Robinson: C'est beaucoup pour un retraité.

M. Gilbert: Les retraités ne peuvent pas acheter des demeures, monsieur Robinson.

Le président: A l'ordre.

M. Hellyer: Cela représente une différence d'environ \$500 de moins sur le revenu. Par conséquent, une personne qui gagne \$6,500 par an pourrait acheter la même maison que celle qui gagne \$7,000.

M. Gilbert: Oui, mais quelle serait la différence dans les versements hypothécaires mensuels?

M. Hignett: \$10 par mois.

M. Gilbert: Vous dites \$10 pour $\frac{1}{2}$ p. 100?

M. Hignett: Sur une hypothèque de \$15,000.

M. Gilbert: Je pense que vous feriez mieux de refaire votre calcul, monsieur Hignett. Je pense que cela ne ferait pas plus de \$2 de différence par mois sur une hypothèque de 25 ans.

M. Robinson: Plus de \$6 par mois.

M. Gilbert: \$6 par mois.

M. Hellyer: Je n'ai pas fait ces calculs.

[Texte]

Mr. Gilbert: That is \$72 a year, Mr. Hellyer. Do you think that is going to make a big difference?

Mr. Hellyer: Every bit helps.

Mr. Gilbert: What is your opinion on the terms of mortgages, Mr. Hellyer? At the moment there are closed mortgages for periods of 25 years, or 20 years.

Mr. Hellyer: Not for the borrower.

Mr. Gilbert: No you are quite right they are open after three years on the payment of three months' interest. I notice that some of the lending institutions want 5 year mortgages and they want them open-ended. What is your position on that?

Mr. Hellyer: Well, the advantage of having a five-year mortgage renewable and with the continuing insurance under the Act would be that you would encourage into the market considerable funds from trust companies and pension funds that otherwise would not be available. In other words, it would increase the flow of mortgage funds.

Mr. Gilbert: So the determination of putting moneys in the mortgages is the yield that they are going to give?

Mr. Hellyer: No it really is a hedge against inflation, in a sense, for trust companies in particular. They are not allowed to borrow money for longer than five years, and, consequently, they borrow short and loan long and they find themselves in a squeeze in inflationary periods.

When, for example, during the last three or four years interest rates have gone up two or three points, the money—that they are borrowing has gone up—the cost to them has gone up—but some of the loans they made at lower rates in years gone by are still outstanding. Therefore, they find themselves in a negative position in some cases, and this is not a good incentive to asking mortgage loans.

We discussed this with them and they have indicated that they would certainly feel more secure in making mortgage loans if the interest rates could be negotiated every five years.

Mr. Gilbert: Of course, if the interest rates go up it is to the prejudice of the borrower, Mr. Hellyer.

• 2100

Mr. Hellyer: Yes and if they go down it is to the advantage of the borrower.

[Interprétation]

M. Gilbert: Cela veut dire \$72 par an, monsieur le ministre. Trouvez-vous que cela va faire une grande différence.

M. Hellyer: Tout cela aide, si peu que ce soit.

M. Gilbert: Qu'est-ce que vous pensez des conditions des hypothèques? En ce moment, ce sont des hypothèques fermées pour 20 ou 25 ans.

M. Hellyer: Pas pour l'emprunteur.

M. Gilbert: Vous avez raison, après 3 ans, on peut les ouvrir en payant l'intérêt de 3 mois. Je note que certaines institutions de prêts veulent des hypothèques de 5 ans et sans condition. Quelle est votre attitude à ce sujet?

M. Hellyer: On mettrait sur le marché la part de fonds assez considérables qui ne seraient pas disponibles autrement en permettant les hypothèques renouvelables de 5 ans et aussi grâce à la protection qu'offre la loi. Les fonds hypothécaires augmenteraient.

M. Gilbert: Alors, si l'on place de l'argent dans les hypothèques cela dépend du rendement qu'on peut avoir.

M. Hellyer: Il s'agit en fait de lutter contre l'inflation; cela touche particulièrement les compagnies de fiducies. Elles n'ont pas le droit d'emprunter l'argent pour plus de 5 ans et par conséquent les emprunts sont à cours terme et les prêts à long terme, au cours de période d'inflation, elles doivent se réserver. Par exemple, depuis 3 ou 4 ans, le coût de la vie a augmenté de 3 ou 4 points; le coût de l'argent emprunté a augmenté, mais certains prêts accordés à des taux moins élevés, ne sont pas encore remboursés. Elles sont donc dans une position négative, ce qui ne les encourage pas à prêter. Nous en avons parlé avec elles et elles ont indiqué qu'il y aurait plus de sécurité dans les prêts si les taux d'intérêt pouvaient être négociés pour 5 ans.

M. Gilbert: Si le taux d'intérêt augmente, cela ne nuit-il pas à l'emprunteur?

M. Hellyer: Oui, mais si le taux baisse, c'est à son avantage.

[Text]

Mr. Gilbert: He has the advantage under the ordinary mortgage laws, anyhow, Mr. Hellyer, after the five-year term?

Mr. Hellyer: This would make it unnecessary for him to go through the process of getting a new mortgage; he could just renegotiate the rate and get the advantage from it.

Mr. Gilbert: And that is your position on it, Mr. Hellyer?

Mr. Hellyer: I think anything that would give us another option would be good, and then it would be up to the lender and the borrower as to which one of the mortgage forms they prefer.

Mr. Gilbert: I think it would be fair to say that the average borrower does not know just what option he should take.

Mr. Hellyer: This may be true; but it is one area in which an educational program must be useful. There are some borrowers who do, particularly second-time borrowers, because they learn from their experience the first time around.

Mr. Gilbert: I am just getting into the last phase of my questioning, and I would like Mr. Hignett to tell us what the salary requirement is for a mortgage of \$12,000. What is the income that a fellow has to make for a \$12,000 mortgage, a \$14,000 mortgage, a \$16,000 mortgage, and an \$18,000 mortgage? I understand that the income a person must have to get the top mortgage of \$18,000 is in the range of \$8,200 a year. Is that right?

Mr. Hignett: It is about that.

Mr. Gilbert: What would it be if it were a \$25,000 mortgage or a \$30,000 mortgage as recommended by the Task Force. Am I fair in saying that it would be at least \$13,000, \$14,000 or \$15,000, in that range?

Mr. Hellyer: It would be a proportional increase.

Mr. Gilbert: That is right. For \$18,000 it is \$8,200. For \$30,000, it would be about \$14,000 or \$15,000 a year. For the \$25,000 it would be about \$12,000. Is that right, Mr. Hignett?

Mr. Hignett: Yes, it would be about that.

Mr. Gilbert: Does that mean that mortgage moneys are going to be available to the high-income group?

[Interpretation]

M. Gilbert: L'emprunteur a déjà des avantages avec une période de 5 ans aux termes des lois existantes.

M. Hellyer: Au lieu de renouveler l'hypothèque, il pourrait renégocier l'ancienne.

M. Gilbert: C'est votre position, monsieur Hellyer?

M. Hellyer: S'il y avait des options, ce serait mieux; le prêteur et l'emprunteur pourraient alors s'entendre sur la meilleure voie à suivre.

M. Gilbert: L'emprunteur moyen ne sait peut-être pas quelle voie choisir.

M. Hellyer: Oui, mais des programmes d'éducation devraient exister; certains emprunteurs, surtout à leur deuxième emprunt, ont appris par l'expérience de la première fois.

M. Gilbert: J'en arrive à la dernière étape de mes questions, et j'aimerais que M. Hignett me dise quel salaire il faut gagner pour payer l'hypothèque d'une maison de \$12,000. Quel est le revenu qu'il faut pour une hypothèque de \$12,000 et pour \$14,000, \$16,000 et \$18,000 respectivement? M. le ministre, si je comprend bien le revenu nécessaire pour emprunter \$18,000 représente environ \$8,200 de revenu par année est-ce juste?

M. Hignett: C'est à peu près ça.

M. Gilbert: Pour une hypothèque de \$25,000 ou de \$30,000 comme l'Équipe spéciale le recommande, ai-je raison de dire qu'il faut gagner de \$13,000 à \$15,000 par année?

M. Hellyer: Ce serait une augmentation proportionnelle.

M. Gilbert: C'est exact. Pour \$18,000 c'est \$8,200. Alors pour \$30,000 ce serait environ \$14,000 à \$15,000 de revenu par année. Pour \$25,000 ce serait \$12,000. Est-ce juste M. Hignett?

M. Hignett: Oui, ce serait à peu près cela.

M. Gilbert: Est-ce que cela veut dire que les hypothèques ne seront accessibles qu'au groupe qui a un revenu élevé?

[Texte]

Mr. Hellyer: I think you have missed the point, Mr. Gilbert. Certainly government funds would not be, but what we are talking about here is insuring loans. It seems a bit inconsistent that someone who wanted a \$25,000 mortgage would only be able to take a conventional loan because the insurance under the Act was not available to him. I hope you realize that there is no element of subsidy involved. It is strictly a commercial transaction.

Mr. Gilbert: I am very aware of it.

Mr. Hellyer: It seems that it would be discriminatory to say to that person that someone else could qualify for insurance under the Act and he could not. It applies to a very small number of people because very few people have that kind of income, but there are some, and for those people it would seem that there is no reason why they should be treated as second-class citizens and should not be able to get insurance under the Act.

Mr. Gilbert: That would probably mean that by having to pay increased moneys to cover these loans, people in the lower income group will not have the opportunity. There will not be that number. You have only a certain amount of money that is going to go out.

Mr. Hellyer: In almost all cases they would build the house anyway under conventional mortgage financing, so it is merely giving them another option as well. It makes very little difference in the total allocation of capital.

Mr. Gilbert: I guess we will have to wait to see how experience develops that. Am I right in saying that an \$18,000 mortgage at 9 per cent amortized on a 25-year plan means that the borrower pays at least \$50,000 by the time it is repaid?

Mr. Hellyer: I do not have my tables with me. The interest charges are substantial.

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Mr. Hignett: That is about right. An \$18,000 mortgage at 9 per cent for 25 years. If you add up every dollar that is paid over a 25-year period it would come to about that.

Mr. Gilbert: About \$50,000?

Mr. Hignett: Yes. In 25 years.

Mr. Hellyer: And if you were to take the rent for comparable accommodation for the same period of time you would find that it was quite a lot of money too.

[Interprétation]

M. Hellyer: Vous n'avez pas tout fait compris, M. Gilbert. Les fonds du gouvernement ne le seront pas, mais ici nous parlons de l'assurance des prêts. Il semble peut logique de dire que si quelqu'un veut une hypothèque de \$25,000, elle doit s'en tenir au prêt conventionnel, car l'assurance prévue par la loi ne leur ait pas disponible. J'espère que vous vous rendez compte qu'il n'y a pas de subvention de prévue. Ce sont des transactions essentiellement commerciales.

M. Gilbert: Je m'en rends très bien compte.

M. Hellyer: Il me semble que ce serait de la discrimination que de dire à ces gens que certains peuvent assurer leurs prêts d'autres ne le peuvent pas. Cela s'applique à peu de gens, car il y a peu de gens qui ont des revenus semblables mais il y en a certains et pour ces gens là, il semble qu'il n'y a pas de raison de les traiter comme des citoyens de deuxième classe, incapable d'obtenir une assurance en vertu de la Loi.

M. Gilbert: Cela veut dire peut-être que s'il faut payer des sommes accrues pour couvrir ces prêts, les gens à revenus modiques n'en auront pas la possibilité. Il n'y en aura pas tant, il n'y a qu'une certaine somme qui soit prêtée.

M. Hellyer: Dans la plupart des cas ils construiraient leur maison de toute façon avec les prêts conventionnels, donc c'est plutôt leur fournir un choix. Cela influe peu sur le capital total alloué.

M. Gilbert: Je suppose qu'il faudra attendre pour voir ce qui va se passer. Ai-je raison lorsque je dis que l'hypothèque de \$18,000 à 9 p. 100 au cours d'une période de 25 ans, veut dire que l'emprunteur paie, au moins, \$50,000?

M. Hellyer: Je n'ai pas mes tables en main, mais l'intérêt est assez considérable.

M. Hignett: C'est presque exact, pour une hypothèque de \$18,000 sur 25 ans, si vous ajoutez tous les dollars payés pendant 25 ans, cela représente environ cette somme.

M. Gilbert: Environ \$50,000.

M. Hignett: En 25 ans c'est cela.

M. Hellyer: Et si vous louez un logement comparable pendant la même période de temps, vous payez une somme fort élevée aussi.

[Text]

Mr. Gilbert: So you are satisfied with that?

Mr. Hellyer: I am not. I am never satisfied.

Mr. Gilbert: What would you be satisfied with? I can recall a few years ago when I started the practice of law and obtained 5½ per cent interest. We had Ontario Housing Corporation loans at 3 per cent.

An hon. Member: You were not making much money then either.

Mr. Hellyer: In those days the lawyers would handle a mortgage for you for \$75, and today they want two or three times that much. In Newfoundland four to eight times that much.

Mr. Gilbert: Do you not think the government could set a precedent by having a strict tariff with regard to patronage mortgages that the government gives out on CMHC?

Mr. Hellyer: I think it should be recommended that the fees charged for handling mortgages under the National Housing Act be modest.

Mr. Howe: What does that mean? Lower than provincial tariffs?

Mr. Gilbert: And I assume that you are going to make that recommendation.

Mr. Hellyer: Lower than provincial tariffs, yes.

Mr. Robinson: The lawyers do not charge tariffs anyway.

Mr. Hellyer: Most of them do not.

An hon. Member: Are there any modest lawyers?

The Chairman: All lawyers are modest.

Mr. Gilbert: Mr. Minister, have you had any success in persuading real estate agents to reduce their fees?

Mr. Hellyer: I really could not say off-hand. We have not tried to measure all of the beneficial results, but I do know that things are happening that are worthwhile in many parts of the country. I talked to the mayor of Penticton, B.C. the other day. They are proposing to change their bylaws to reduce the lot widths to make it possible to build the workingman's housing in Penticton. I talked to municipal officials who are also considering their bylaws to see if they could not be

[Interpretation]

M. Gilbert: Donc cela vous paraît convenable?

M. Hellyer: Non. Je ne suis jamais satisfait.

M. Gilbert: De quoi vous satisferiez-vous? Je me souviens, il y a quelques années, lorsque j'ai commencé à pratiquer le droit, les intérêts étaient de 5½ p. 100. La Ontario Housing Corporation accordait des prêts à 3 p. 100.

Une voix: Vous ne faisiez pas beaucoup d'argent non plus.

M. Hellyer: Les avocats demandaient \$75 pour enregistrer une hypothèque et maintenant ils veulent deux ou trois fois plus. A Terre-Neuve quatre à huit fois plus.

M. Gilbert: Monsieur le ministre, ne pensez-vous pas que le gouvernement pourrait créer un précédent en ayant un tarif fixe pour favoriser les hypothèques que le gouvernement donne à la SCHL?

M. Hellyer: Je pense qu'on devrait recommander que les frais pour les transactions hypothécaires en vertu de la Loi nationale sur l'habitation soient modiques.

M. Howe: Qu'est-ce que cela veut dire? Plus faibles que les tarifs provinciaux?

M. Gilbert: J'imagine que vous allez le recommander?

M. Hellyer: Plus faibles que les tarifs des provinces, oui.

M. Robinson: Les avocats n'ont pas de tarifs de toute façon.

M. Hellyer: La plupart non.

Une voix: Y a-t-il des avocats modestes?

Le président: Tous les avocats sont modestes.

M. Gilbert: Monsieur le ministre, avez-vous réussi à persuader les agents immobiliers de baisser leurs tarifs?

M. Hellyer: Je ne pourrai pas le dire au pied levé. Nous n'avons pas essayé de mesurer tous les résultats heureux, mais je sais que dans bien des régions du pays les choses évoluent de façon satisfaisante. J'ai parlé, par exemple, au maire de Penticton, Colombie-Britannique. Ils sont prêts à changer leurs règlements sur la largeur des lots pour permettre de construire des logements pour les ouvriers. J'ai parlé à des autorités municipales qui songent aussi à corriger ou à modifier

[Texte]

amended to make it easier to build working-men's housing.

So a number of things are happening and I hope this will continue. The more information you can make available to people, the more you can encourage them, the more benefit will result from the Task Force report and from the public interest that it has generated.

Mr. Gilbert: I have one final question. With regard to amortization, Mr. Hignett has said that he agrees with me that it is about \$50,000 on an \$18,000 mortgage at 9 per cent for a term of 25 years. If we increase the amortization term to 40 years, or to 30 years as has been the recommendation, are you not increasing the interest portion of the loan? In other words, it is going to be up to \$70,000.

Mr. Hellyer: The maximum under the Act is already 35 years, but most loans are made for a shorter period than that. All we were talking about is permission to do it, no compulsion. It is hard to say how many, if any, loans would be available on those extended terms.

You are quite right in saying that the benefit from extending amortization five years is very marginal. I doubt that many people would take advantage of it. It does reduce the income required by a little bit, and therefore it would benefit some people. An alternative, of course, would be to increase the debt service ratio permitted by a point or two at the outset on the philosophy that people's incomes rise and that if they are paying more than 27 per cent for the first year or two, after two or three years the ratio will decline. This is an alternative. I do not think anyone has a closed mind on the subject. It is really a matter of trying to give people the widest range of choices possible, both in the kinds of housing that are available to them and the kinds of financing that are available to them in the total range of choice. This is the reason why we feel that many mechanical changes would benefit, in some cases, all Canadian home purchasers or

[Interprétation]

leurs règlements, pour faciliter la construction de logements pour les travailleurs.

Il se passe beaucoup de choses et j'espère que cela se poursuivra. Plus nous pourrions fournir de renseignements à la population, plus nous pourrions les encourager et plus il y aura de bénéfices à retirer du travail de cette équipe spéciale et de l'intérêt public qu'elle aura fait naître.

M. Gilbert: Une dernière question. M. Hignett a dit qu'il reconnaît, comme moi, qu'il en coûte environ \$50,000 pour une hypothèque de \$18,000 à un taux d'intérêt de 9 p. 100 pendant 25 ans. Si nous augmentons l'amortissement jusqu'à 40 ans, ou 30 ans, comme on l'a recommandé, n'augmentez-vous pas, par le fait même, la portion intérêt du prêt? En d'autres termes le total va monter à \$70,000.

M. Hellyer: En vertu de la Loi actuelle, on peut aller jusqu'à 35 ans pour l'amortissement mais ce n'est pas obligatoire, la plupart des prêts sont plus courts. On ne sait pas combien il y aura de prêts disponibles à si long terme.

Vous avez raison de dire que l'avantage d'une prolongation de cinq ans est marginal. Je ne sais pas si beaucoup de gens s'en prévaudrait. Cela réduit un peu le salaire nécessaire, et cela avantagerait donc certains. Une autre possibilité serait d'augmenter la proportion dette/revenu permise d'un point ou deux, en se fondant sur le fait que les revenus des gens augmentent et que s'ils paient plus de 27 pour cent pendant un an ou deux, ensuite la proportion baissera. C'est une autre possibilité. Je ne pense pas que les esprits soient bornés. Nous essayons tout simplement de permettre aux gens d'avoir le plus de possibilités de choix dans le type de logement et dans le type de financement. C'est pour cette raison que nous pensons que plusieurs changements seraient à l'avantage de tous les Canadiens acheteurs ou locataires et dans d'autres cas à l'avantage de certains groupes, mais toujours à l'avantage d'un grand nombre de Canadiens.

• 2110

renters, and in other cases just selected groups, but in total a very large number of Canadians.

Mr. Gilbert: If a person, 30 years of age buys a home and he has a 35 or 40 year mortgage, they are going to be 65 or 70 by the time it is paid. You and I will not be around to have them thank us for that 40-year mortgage.

M. Gilbert: Monsieur le ministre, si une personne de trente ans achète une maison avec une hypothèque de 35 ou de 40 ans, elle aura 65 ans ou 70 ans lorsqu'elle sera payée et nous ne serons pas ici pour recevoir leurs remerciements pour cette hypothèque.

[Text]

Mr. Hellyer: That is quite right, but I think you probably read in the paper that many people are going to live 100 years, and this might make them think about what would happen in the last 20 or 30 years of their life.

Some people prefer to do that, and I know quite a few people personally who did buy houses and who had them paid off by the time they retired, and in their senior years they found themselves quite comfortably off because their maximum annual charges were for maintenance, which they usually did themselves, and the real estate taxes; whereas some of their compatriots who had rented all their lives were not so fortunately off and did not have the same protection against inflation that those who had become purchasers had achieved.

Again I just reiterate, our business is not to dictate, to say to people that they should rent or they should buy, but merely to make it as easy for them to do either depending on their choice from time to time.

Mr. Gilbert: I am sure that in your campaign trails you had many senior citizens tell you that their home may be paid off but with the increase in taxes, repairs and so forth, that they were finding it very burdensome to carry, Mr. Hellyer.

Mr. Hellyer: Only a small proportion of what it would have been for comparable accommodation if they had been renting in the market.

Mr. Gilbert: Mr. Hellyer, what is the intention of your ministry with regard to the department called BEAM which was attached to the ministry of Industry. As you know, BEAM stands for building, equipment, accessories and materials. Is that Department going to be transferred to your jurisdiction?

Mr. Hellyer: I think they are doing a very satisfactory job where they are and really earning their money. Is that not your opinion?

Mr. Gilbert: They are going to still be attached to Industry.

Mr. Hellyer: I would expect that they would remain where they are.

Mr. Gilbert: Thank you, Mr. Hellyer, and thank you, Mr. Chairman.

The Chairman: You have put 45 questions, you said that you had 45—thank you very much. Mr. Skoberg.

Mr. Skoberg: Mr. Chairman, I am particularly pleased to hear the Minister remark that

[Interpretation]

M. Hellyer: C'est juste, mais vous avez peut-être lu, dans les journaux, que les gens vivront jusqu'à cent ans et alors ils songeront peut-être aux 25 ou 30 dernières années de leur vie.

Je sais que certains préfèrent faire cela et je connais des gens qui ont acheté des maisons et qui avaient fini de les payer avant l'âge de leur retraite et ensuite ils se trouvaient parfaitement à l'aise. Car les dépenses annuelles d'entretien, des petites réparations qu'ils font habituellement eux-mêmes, ils n'avaient plus que les taxes foncières à payer, tandis que ceux qui ont loué un logement toute leur vie ne sont pas en aussi bonne posture, ils n'ont pas de protection contre l'inflation, tandis que les propriétaires eux, détiennent une meilleure position.

Encore une fois, je tiens à répéter qu'il ne s'agit pas de dire aux gens comment agir, de leur dire s'ils doivent acheter ou vendre, mais il faut leur faciliter les choses. Cela dépend de leur choix individuel.

M. Gilbert: Je suis sûr que pendant votre campagne électorale, plusieurs personnes âgées vous ont dit que leurs taxes augmentent, que le prix des réparations augmentent, et que c'est un lourd fardeau pour eux.

M. Hellyer: Ce n'est qu'une petite partie de ce qu'ils auraient eu à payer s'ils étaient à loyer.

M. Gilbert: Quelle est l'intention de votre ministère en ce qui a trait au programme BEAM qui dépendait du ministère de l'Industrie, je crois? Et comme vous le savez, BEAM représente en anglais Building, Equipment and Material Research. Est-ce que ce service sera transféré à votre ministère?

M. Hellyer: Leur travail est satisfaisant là où ils sont. Ils gagnent vraiment leur salaire, ce n'est pas votre opinion?

M. Gilbert: Alors, ils dépendront encore du ministère de l'Industrie?

M. Hellyer: Je pense que oui.

M. Gilbert: Merci, monsieur le ministre. Merci, monsieur le président.

Le président: Vous avez vraiment posé quarante-cinq questions comme vous nous en aviez prévenu. Monsieur Skoberg.

M. Skoberg: Monsieur le président, j'étais très heureux d'entendre les observations du

[Texte]

he should hope that all people could have a choice in what they wanted in housing. Naturally this means that you will have to bring the basic wage up considerably for this to ever be possible—and I do hope that he is successful before that hundred years rolls around that he is referring to.

Mr. Hellyer: It will not take very long, Mr. Skoberg.

Mr. Skoberg: This is good news, Mr. Hellyer. Would the research and community planning portion of the program referred to under Central Mortgage and Housing Corporation—I am referring to the experimental production of housing parts—be the area under which you allowed the grant to Crane for the creation of a new bathroom?

Mr. Hellyer: I think that is correct.

Mr. Skoberg: What other projects have you in mind this year phasing out to such people?

Mr. Hellyer: There are a considerable number. We just let one the other day for a unique method of handling disposal of all kinds—all wastes. It is a system not too unlike what the astronauts used where, hopefully, the wastes can be disposed of within a limited space thereby eliminating the necessity for large trunk sewers and large water mains such as are necessary at the present time. This seems pretty farfetched but on the other hand the scientists involved in this program feel that it is feasible and worth pursuing, so we are investing a considerable amount of money in this project. I think this is indicative of the kinds of things which are being encouraged.

• 2115

So anything we can do to get costs down or to improve facilities for remote places and other circumstances will be accomplished.

Mr. Skoberg: In respect of some of these things that are being referred to, will research be conducted by our own National Research Council and other governmental departments, or will this all be allocated to private industry?

The Chairman: On a point of order, I think this was covered under Vote 68 on Tuesday night.

Mr. Skoberg: Was this question asked, Mr. Chairman?

The Chairman: The question has been asked.

[Interprétation]

ministre lorsqu'il a dit qu'il espérait que tous les gens pourront choisir le logement de leur choix. Cela veut dire qu'il faudra ajuster les taux d'intérêt pour que ce soit possible, et j'espère que le ministre réussira à le faire avant d'avoir cent ans.

M. Hellyer: Cela ne sera pas très long.

M. Skoberg: Ce sont de bonnes nouvelles, monsieur le ministre. Je me demande si les explications du programme concernant les recherches et le développement communautaire et qui relèvent de la Société centrale d'hypothèques et de logement veulent dire que ce domaine sera subventionné.

M. Hellyer: Je pense que c'est exact.

M. Skoberg: A quels autres projets songez-vous cette année, pour vous adresser à ce groupe de personnes?

M. Hellyer: Il y en a un bon nombre. L'autre jour, nous avons parlé d'un projet, d'une méthode unique pour disposer de toutes sortes de matériaux, au moyen d'un système semblable à celui des astronautes. Nous espérons que cela demandera un espace minimum, cela éliminera la nécessité d'égouts importants, etc. Cela semble tiré un peu par les cheveux, mais d'autre part, les hommes de sciences qui s'en occupent sont d'avis que c'est faisable, alors nous investissons beaucoup d'argent dans ce projet. Je pense que cela est une bonne indication du genre de projets que nous encourageons.

Cela permet de diminuer les coûts. Cela permet d'avoir de bonnes installations dans des endroits éloignés ou lorsque les conditions sont difficiles.

M. Skoberg: Monsieur le ministre, on a parlé de ce projet. Est-ce que les recherches seront faites par les services du gouvernement ou est-ce que ce sera remis à l'industrie privée?

Le président: J'invoque le Règlement. Il me semble qu'on a déjà parlé de ce sujet lors de l'étude du crédit 68 mardi soir.

M. Skoberg: La question avait-elle été posée?

Le président: La question a déjà été posée.

[Text]

Mr. Hellyer: A similar question was asked.

Mr. Skoberg: I will read the minutes then.

Mr. Hellyer, I heard on the radio that most banks have increased their prime lending rate to 7.5 per cent as of today. Do you think this will have any effect on the Central Mortgage and Housing Corporation rates?

Mr. Hellyer: On the Central Mortgage and Housing Corporation rates or on the maximum rate under the Act?

Mr. Skoberg: It would be the maximum rate under the Act.

Mr. Hellyer: I do not like to speculate but the yield on Government of Canada bonds has been very high this last little while and this will probably have an effect on the maximum rate at the end of the month.

Mr. Skoberg: You would not like to guess on that, would you?

Mr. Hellyer: No, I would not.

Mr. Gilbert: It will probably hit 10 per cent.

Mr. Skoberg: How many applications have you from communities throughout Canada now for sewage projects that are outstanding and have not been processed? I realize a number in the Prairies have made application.

Mr. Hignett: Did you say unfinished or unprocessed?

Mr. Skoberg: The ones that have not been processed.

Mr. Hignett: At the head office of the Corporation we have none. These are dealt with as they come in and as of last Thursday there were none. All that had been received had been processed.

Mr. Skoberg: Has there been any change in the regulations concerning the granting of money for sewage projects for municipalities at this time?

Mr. Hignett: No, apart from the fact that each year the loans made for this kind of project tend to increase.

Mr. Skoberg: I want to refer to a question that was asked a while ago in regard to the YMCA building proposal and the dormitories connected therein. Would it be necessary to

[Interpretation]

M. Hellyer: Une question semblable, de toute façon.

M. Skoberg: Alors, très bien, je lirai le compte rendu.

Monsieur le ministre, j'ai remarqué, aujourd'hui, et j'ai entendu à la radio que les banques ont augmenté leur taux de prêt à 7½ p. 100. Une ou deux banques du moins. Pensez-vous que cela aura une influence sur les taux de la Société centrale?

M. Hellyer: Sur les taux de la Société centrale ou sur le taux maximum permis par la Loi?

M. Skoberg: Les taux maximums prévus par la loi.

M. Hellyer: Je n'aime pas spéculer, mais les obligations du gouvernement du Canada se sont négociées à des taux d'intérêts très élevés ces derniers temps. Cela aura probablement un effet sur le taux maximum à la fin du mois.

M. Skoberg: Vous ne voulez pas deviner?

M. Hellyer: Non.

M. Gilbert: Ils vont certainement atteindre 10 p. 100.

M. Skoberg: Une autre question, s'il vous plaît, monsieur le président. Monsieur le ministre, combien de demandes recevez-vous de collectivités canadiennes pour de nouveaux projets d'égout? Je sais qu'il y en a beaucoup dans les Prairies, plusieurs ont fait des demandes.

M. Hignett: Parlez-vous des projets non terminés ou des projets non entrepris?

M. Skoberg: Des projets qui n'ont pas été exécutés.

M. Hignett: Au siège social de la société, nous n'en avons pas. On les étudie au fur et à mesure. Jeudi dernier, il n'y en avait pas. Tous avaient été étudiés.

M. Skoberg: Y a-t-il eu des changements dans les règlements pour accorder des subventions d'égout aux municipalités?

M. Hignett: Chaque année, les prêts accordés pour ce genre de projets augmentent. C'est la tendance.

M. Skoberg: Je veux revenir sur une question, monsieur le ministre, qui a été posée au sujet de l'immeuble du YMCA et des futurs dortoirs. Sera-t-il nécessaire d'avoir des dor-

[Texte]

have dormitories attached to the YMCA to qualify under the Central Mortgage and Housing Corporation regulations?

Mr. Hellyer: Yes it would.

Mr. Skoberg: I thought we had a loop-hole there.

How many applications have you now for urban renewal schemes that are outstanding?

An hon. Member: On a point of order, Mr. Chairman, that question was asked on Tuesday night.

Mr. Skoberg: I thought that the urban renewal scheme was under L175, Mr. Chairman.

The Chairman: Order, please.

Mr. Hellyer: I think there are about a dozen at head office at the present time.

Mr. Skoberg: Would you correct me, Mr. Chairman, if I am wrong. I thought we were dealing with Vote L175.

The Chairman: Yes, it could be asked under Vote L175, but that point was covered before in general discussion.

Mr. Skoberg: I do not think the point of order was too well taken, Mr. Chairman. Those are the only questions I have. I realize that someone else may be waiting.

Item L175 agreed to.

The Chairman: Shall I report the Estimates to the House?

Some hon. Members: Agreed.

The Chairman: I wish to thank the Hon. Paul Hellyer, Minister of Transport, also Mr. Hignett, the President of Central Mortgage and Housing Corporation, Mr. J.-P. Lupien, Vice-President, Mr. R. W. Desbarats, the Comptroller, Mr. Robert Adamson, the Executive Director and Chief Economist, Mr. Lloyd Axworthy, the Executive Assistant to the Minister, and all members of the Committee.

This meeting is adjourned until the call of the Chair.

[Interprétation]

toirs dans les YMCA pour qu'ils puissent recevoir des subventions de la Société centrale, pour que cela soit conforme aux règlements? Je pense que nous avons un nœud ici.

M. Hellyer: Oui, cela est nécessaire.

M. Skoberg: Monsieur le ministre combien de demandes avez-vous reçues pour des demandes de rénovation urbaine en suspens?

Une voix: J'en appelle au Règlement, monsieur le président. Cette question a été posée mardi.

M. Skoberg: Je pensais que cela relevait du crédit L175 où on voit «rénovation urbaine».

Le président: J'en appelle au Règlement.

M. Hellyer: Je crois qu'il y en a une douzaine au siège social.

M. Skoberg: Ai-je raison, monsieur le président, de dire que nous étudions L175?

Le président: On en a déjà parlé de façon générale.

M. Skoberg: Je ne crois pas que votre rappel au Règlement était bien fondé, monsieur le président. C'est tout ce que j'avais à dire. Merci.

Crédit L175, adopté.

Le président: Dois-je faire rapport de l'état des crédits à la Chambre?

Des voix: D'accord, d'accord.

Le président: Je tiens à remercier l'honorable Paul Hellyer, ministre des Transports, ainsi que M. Hignett, président de la Société centrale d'hypothèques et de logement, le vice-président, M. J.-P. Lupien, le contrôleur, M. R. W. Desbarats; M. Robert Adamson, le directeur exécutif et économiste en chef, et, M. Lloyd Axworthy, chef de cabinet, et je vous remercie tous.

La séance est levée, jusqu'à nouvel avis.

OFFICIAL BILINGUAL ISSUE

FASCICULE BILINGUE OFFICIEL

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Publications

HOUSE OF COMMONS

CHAMBRE DES COMMUNES

First Session

Première session de la

Twenty-eighth Parliament, 1968-69

vingt-huitième législature, 1968-1969

STANDING COMMITTEE
ON

COMITÉ PERMANENT
DE LA

HEALTH, WELFARE AND
SOCIAL AFFAIRS

SANTÉ, DU BIEN-ÊTRE SOCIAL
ET DES AFFAIRES SOCIALES

Chairman

M. Gaston Isabelle

Président

MINUTES OF PROCEEDINGS
AND EVIDENCE

PROCÈS-VERBAUX ET
TÉMOIGNAGES

No. 23

THURSDAY, APRIL 17, 1969

LE JEUDI 17 AVRIL 1969

Respecting

Concernant

Estimates 1969-70, Department of National
Health and Welfare.

Budget des dépenses 1969-1970, Ministère
de la Santé nationale et du Bien-être social.

INCLUDING SIXTH REPORT
(Estimates Committee)

Y COMPRIS LE SIXIÈME RAPPORT
(Budget des dépenses SCHL)

Appearing:

A comparu:

Minister of National Health
and Welfare.

Hon. John Munro

Ministre de la Santé nationale
et du Bien-être social.

WITNESSES—TÉMOINS

(See Minutes of Proceedings)

(Voir Procès-verbaux)

The Queen's Printer, Ottawa, 1969
L'Imprimeur de la Reine, Ottawa, 1969

STANDING COMMITTEE ON
HEALTH, WELFARE AND
SOCIAL AFFAIRS

COMITÉ PERMANENT DE
LA SANTÉ, DU BIEN-ÊTRE SOCIAL
ET DES AFFAIRES SOCIALES

Chairman
Vice-Chairman

M. Gaston Isabelle
Mr. Steve Otto

Président
Vice-président

et Messieurs

and Messrs.

Forget,
Fortin,
Foster,
Gendron,
Godin,
Haidasz,
Howe,

² Knowles (Winnipeg
North Centre),
⁶ Knowles (Norfolk-
Haldimand),
¹ Mrs. MacInnis (M^{me}),
McBride,
³ Osler,

Paproski,
Ritchie,
Robinson,
Rochon,
Rynard,
⁴ Yanakis—(20).

(Quorum 11)

Le secrétaire du Comité,

Gabrielle Savard

Clerk of the Committee.

Pursuant to S.O. 65(4) (b)

Conformément à l'article 65(4) (b) du
Règlement

¹ Replaced Mr. Skoberg on March 24.

¹ A remplacé M. Skoberg le 24 mars.

² Replaced Mr. Gilbert on April 15.

² A remplacé M. Gilbert le 15 avril.

³ Replaced Mr. Thomas (Maisonneuve)
on April 17.

³ A remplacé M. Thomas (Maisonneuve)
le 17 avril.

⁴ Replaced Mr. Guilbault on April 17.

⁴ A remplacé M. Guilbault le 17 avril.

⁵ Replaced Mr. Monteith on April 18.

⁵ A remplacé M. Monteith le 18 avril.

REPORT TO THE HOUSE

MONDAY, March 24, 1969

The Standing Committee on Health, Welfare and Social Affairs has the honour to present its

SIXTH REPORT

Pursuant to its Order of Reference of Thursday, February 20, 1969, your Committee has considered the items listed in the Estimates for 1969-70, relating to the Central Mortgage and Housing Corporation.

Your Committee commends them to the House.

A copy of the relevant Minutes of Proceedings and Evidence (Issue No. 22) is tabled.

Respectfully submitted,

Le président,
GASTON ISABELLE,
Chairman.

RAPPORT A LA CHAMBRE

Le MARDI 24 mars 1969

Le Comité permanent de la Santé, du bien-être social et des affaires sociales a l'honneur de présenter son

SIXIÈME RAPPORT

Conformément à l'ordre de renvoi du jeudi 20 février 1969, le Comité a examiné les postes du budget des dépenses de 1969-1970 concernant la Société centrale d'hypothèque et de logement.

Le Comité les recommande à l'approbation de la Chambre.

Un exemplaire des procès-verbaux et témoignages s'y rapportant (*fascicule n° 22*) est déposé.

Respectueusement soumis,

Text]

[Texte]

MINUTES OF PROCEEDINGS

THURSDAY, April 17, 1969.
(28)

The Standing Committee on Health, Velfare and Social Affairs met this day at 3:35 p.m. The Chairman, Mr. Gaston Isabelle, presided.

Members present: Mrs. MacInnis, Messrs. Forget, Gendron, Haidasz, Isabelle, Monteith, Osler, Otto, Ritchie, Robinson, Rochon (11).

Appearing: The Hon. John Munro, Minister of National Health and Welfare.

Witnesses: From the Department of National Health and Welfare: Dr. J. W. Willard, Deputy Minister (National Welfare); Dr. E. H. Lossing, Director General, Health Insurance and Resources; Dr. J. H. Wiebe, Deputy Director General Medical Services; and Dr. E. A. Watkinson, Director General, Health Services.

The Committee proceeded to the consideration of the Estimates of the Department of National Health and Welfare for 1969-70.

Vote No. 1—Departmental Administration \$4,793,000 was called.

The Minister read a statement and was questioned thereon; the Minister having to leave for a meeting, Drs. Willard, Lossing, Wiebe, and Watkinson supplied additional information to the Members.

Vote 1 was allowed to stand.

Vote No. 5, Health Services—Administration, Operation and Maintenance, etc. \$7,785,000 was called.

After discussion, Vote No. 5 was allowed to stand.

At 4:50 o'clock p.m. the Committee adjourned to 8 o'clock p.m. Monday, April 21.

PROCÈS-VERBAL

Le JEUDI 17 avril 1969.
(28)

Le Comité permanent de la Santé, du Bien-être social et des Affaires sociales se réunit aujourd'hui à 3 h. 35 de l'après-midi, sous la présidence de M. Gaston Isabelle.

Présents: M^{me} MacInnis, MM. Forget, Gendron, Haidasz, Isabelle, Monteith, Osler, Otto, Ritchie, Robinson, Rochon (11).

A comparu: L'hon. John Munro, ministre de la Santé nationale et du Bien-être social.

Témoins: Du ministère de la Santé nationale et du Bien-être social: D^r J. W. Willard, sous-ministre (Bien-être social); D^r E. H. Lossing, directeur général, Assurance-maladie et Aide à la Santé; D^r J. H. Wiebe, sous-directeur général, Services médicaux; et D^r E. A. Watkinson, directeur général, Services d'hygiène.

Le Comité entreprend l'étude des prévisions budgétaires du Ministère de la Santé nationale et du Bien-être social pour 1969-1970.

Le crédit n° 1—Administration centrale, etc. \$4,793,000 est mis en discussion.

Le Ministre lit un exposé et est interrogé.

Le Ministre devant se rendre à une autre réunion, les Docteurs Willard, Lossing, Wiebe et Watkinson fournissent de plus amples renseignements aux membres du comité.

Le crédit n° 1 est réservé.

Le crédit n° 5, Services d'hygiène—Administration, fonctionnement et entretien, etc. \$7,785,000 est appelé.

Après discussion, le crédit n° 5 est réservé.

A 4 h. 50 de l'après-midi, le Comité s'ajourne à 8 heures du soir le lundi 21 avril.

La secrétaire du Comité,
Gabrielle Savard,
Clerk of the Committee.

EVIDENCE

(Recorded by Electronic Apparatus)

TÉMOIGNAGES

(Enregistrement électronique)

Thursday, April 17, 1969

Le jeudi 17 avril 1969

1535

The Chairman: Before us today for consideration are the estimates of the Department of National Health and Welfare for the fiscal year 1969-70.

I will now call Item 1, Departmental Administration. The details of this item will be found on page 256 of the Blue Book.

Department of National Health and Welfare

Administration

- 1 Departmental Administration, including recoverable expenditures on behalf of the Canada Pension Plan, and \$500,000 for Health Grants and Welfare Grants, under terms and conditions approved by the Treasury Board, for research and demonstration activities in the field of Mental Retardation—\$4,793,000

I will now welcome the Minister of National Health and Welfare, the Deputy Minister of National Welfare, Dr. J. W. Willard, together with other officers of the Department. Dr. J. N. Crawford, the Deputy Minister of National Health, unfortunately could not attend today, but will be with us later on.

I would ask the Minister now to make his opening statement.

Hon. John C. Munro (Minister of National Health and Welfare): Thank you, Mr. Chairman and members of the Committee.

The Department of National Health and Welfare as you are all, I am sure, aware is charged with the responsibility for promoting, preserving and improving the health, social security and social welfare of all Canadians.

To assist in the achievement of these objectives, the Department has designated six programs each with its own set of objectives and activities. The programs are:

Firstly, Administration—A grouping of executive and central service activities, which are not directly involved in individual operat-

Le président: Nous allons étudier le budget du ministère de la Santé nationale et du Bien-être social pour 1969-1970. Le crédit l'Administration du ministère est mis en délibération. Vous en trouverez les détails à la page 256 du Livre bleu.

Ministère de la Santé nationale et du Bien-être social. Crédit 1^{er}—Administration centrale, y compris les dépenses recouvrables au titre du régime de pensions du Canada et une somme de \$500,000 pour subventions à l'hygiène et au bien-être, selon les modalités et conditions approuvées par le Conseil du Trésor, pour fins de recherche et d'expériences dans le domaine de l'oligophrénie—\$4,793,000

Je voudrais souhaiter la bienvenue au ministre de la Santé nationale et du Bien-être social, au sous-ministre du Bien-être social, le docteur J. W. Willard, accompagné de fonctionnaires du Ministère; le docteur J. N. Crawford, sous-ministre de la Santé nationale n'a pas pu venir malheureusement mais il sera avec nous un peu plus tard. Je demanderais au ministre de présenter sa déclaration.

L'hon. John C. Munro (ministre de la Santé nationale et du Bien-être social): Je vous remercie monsieur le président et messieurs les membres du Comité.

Le ministère de la Santé nationale et du Bien-être social comme vous le savez tous, est chargé de la promotion, de la conservation, de l'amélioration de la santé, de la sécurité sociale et du bien-être social de tous les Canadiens.

Afin d'atteindre ces objectifs, le ministère a conçu six programmes dont chacun consiste en une série d'objectifs et d'activités. Ces programmes sont les suivants:

Programme relatif à l'administration—Services administratifs et généraux qui ne se rapportent pas directement à l'un des pro-

[Text]

ing programs but which are responsible for or participate in the over-all administration and management of the Department.

Secondly, Health Services—This provides for the promotion, preservation and improvement of the health of the people of Canada.

Thirdly, Health Insurance and Resources—provides for the development and improvement of certain health services, for the development and improvement of supply and quality of health manpower and for the development and administration of programs to make high quality hospital and medical services available to all Canadians.

Fourthly, Medical Services—provides for the promotion, improvement and preservation of the health of the groups whose care, by legislation or custom, has been assigned to the Department.

Fifthly, Food and Drug Services—provides for the safeguarding of the public interest with respect to health hazards and fraud in the manufacturing, importation, sale and advertising of food and drugs, cosmetics and medical services, and

Lastly, Welfare Services—provides for the promotion and improvement of the social security and social welfare of the people of Canada.

The estimates in the new style are presented on the foregoing basis. With one exception, the estimates before you do not contain any additional money for new programs, but additional money for the improvement and extension of current programs. I have instituted a National Health Grants program, which is, in effect, a redefinition of the old General Health Grants program, which is largely being phased out.

At \$3.8 billion they are 28.3 per cent of the total federal expenditures forecast for 1969-70, an indication of the continuing emphasis which this government places on programs designed to improve the health and well-being of the Canadian people.

There are three major components of this \$3.8 billion:

- 1) \$1.9 billion, representing the cost of budgeted statutory items.
- 2) \$1.8 billion representing the cost of the non-budgeted outlay for the Old Age Security Fund.
- 3) \$129 million, to be voted by Parliament.

The increase from the comparable figures in the main estimates for 1968-69 is \$623 mil-

[Interpretation]

grammes mais qui sont responsables de l'administration générale du Ministère ou qui y participent

Programme des services d'hygiène—Promotion, conservation et amélioration de la santé des Canadiens.

Programme de l'assurance-maladie et de l'aide à la santé—Expansion et amélioration de certains services d'hygiène; recrutement et perfectionnement de la main-d'œuvre sanitaire au Canada; élaboration et application de programmes visant à mettre à la portée de tous les Canadiens des services hospitaliers et médicaux de qualité.

Programme des services médicaux—Promotion, amélioration et conservation de la santé des groupes dont le soin, en vertu de la loi ou de la coutume ressortit au Ministère.

Programme des aliments et drogues—Visé à protéger le public contre toute malfaction risquant de mettre la vie en danger ou contre toute fraude dans la fabrication, l'importation, la vente et la publicité des aliments et drogues, de cosmétiques et de dispositifs sanitaires.

Programme des services de bien-être social—Promotion et amélioration de la sécurité sociale et du bien-être social des Canadiens.

Le budget présenté sous sa nouvelle forme est présenté sous la forme suivante. A une exception près, le budget ne renferme pas de crédits supplémentaires pour de nouveaux programmes, mais des sommes supplémentaires pour l'amélioration et le développement des programmes en cours. J'ai créé un programme de subventions de santé nationale qui est, en fait, une nouvelle définition de l'ancien programme de subvention de la santé qui est éliminé progressivement.

Sur les 3.8 milliards de dollars, il y a 28.3 p. 100 de l'ensemble des dépenses de l'État pour 1969-1970. Cela montre bien que le gouvernement met l'accent sur des programmes destinés à améliorer la santé et le bien-être des Canadiens. Il y a trois éléments importants pour ces 3.8 milliards de dollars.

- 1) 1.9 milliards représentant des postes statutaires prévus au budget.
- 2) 1.8 milliards représentant les sommes non prévues au budget pour le fonds de la sécurité de la vieillesse.
- 3) 129 millions de dollars qui seront votés par le Parlement.

L'augmentation par rapport aux chiffres comparables du budget principal de 1968-

[Texte]

lion, or 19.3 per cent. By major components, this increase is broken down as follows:

1) A \$447.7 million increase, or 29.5 per cent, in budgeted statutory items.

2) A \$179.0 million increase, or 11.3 per cent, in payments from the Old Age Security Fund.

3) A \$3.6 million decrease, or 2.7 per cent, in voted items.

● 1540

Dealing then, firstly, with the \$447.7 million increase in budgeted statutory items would indicate that these include:

1) A \$335 million increase in Medical Care Insurance, reflecting full-year participation by all provinces.

2) A \$65 million increase in federal contributions to provinces under the Hospital Insurance and Diagnostic Services Act, reflecting increase in out-patient and in-patient rates and increases in population.

3) A \$48.4 million increase in payments to provinces under the Canada Assistance Plan, reflecting greater utilization of the Plan by provinces and increased costs generally for institutional care, improvements in child welfare programs and increases in foster home payments.

4) A \$4 million decrease in Old Age Assistance and payments of the Blind and Disabled Persons Allowances, reflecting the reduction in eligibility age for payments from the Old Age Security Fund and the transfer of payments under the allowance programs to the Canada Assistance Plan.

5) A \$2.6 million increase in Youth Allowances, reflecting a continuance of the effect of the high birth rate in the early 1950's and the increasingly large proportion of youths continuing their education beyond age 16.

[Interprétation]

1969, représente 623 millions de dollars, soit 19.3 p. 100. En se basant sur les éléments principaux, cette augmentation est répartie de la façon suivante.

1) Une augmentation de 447.7 millions de dollars soit 29.5 p. 100 en ce qui concerne les postes statutaires prévus au budget.

2) Une augmentation de 179 millions de dollars soit 11.3 p. 100 pour les paiements du Fonds de la sécurité de la vieillesse.

3) Une augmentation de 3.6 millions de dollars soit 2.7 p. 100 pour les postes soumis au vote.

Tout d'abord, en ce qui concerne les 447.7 millions de dollars d'augmentation des postes prévus au budget, ceux-ci comprennent:

1) Une augmentation de 335 millions de dollars en ce qui concerne l'assurance médicale représentant une année complète de participation par toutes les provinces.

2) Une augmentation de 65 millions de dollars de la contribution fédérale aux provinces aux termes de la Loi sur l'assurance-hospitalisation et des services diagnostiques indique une hausse des frais pour les malades hospitalisés ou non et un accroissement de la population.

3) Une hausse de 48.4 millions de dollars des paiements aux provinces aux termes du régime d'assistance publique du Canada, qui représente une utilisation plus grande de ce régime par les provinces et une augmentation de coût des soins dispensés par les institutions, de l'amélioration des programmes de bien-être à l'enfance et de la hausse des paiements des foyers.

4) Une diminution de 4 millions de dollars des paiements de l'assistance vieillesse et des paiements aux termes des allocations pour les aveugles et les personnes invalides, ce qui représente une réduction de l'âge d'admissibilité pour les paiements à partir du Fonds de sécurité de la vieillesse et le transfert des paiements aux termes des programmes d'allocations au Régime d'assistance publique du Canada.

5) Une augmentation de 2.6 millions de dollars des allocations pour la jeunesse qui représente la continuation de l'augmentation du taux des naissances au début de 1950 et la proportion de plus en plus grande de jeunes qui poursuivent leurs études après 16 ans.

[Text]

The \$179 million increase in payments from the Old Age Security Fund reflects the lowering of the eligible age for receipt of old age pensions to 66 on January 1, 1969 and to 65 on January 1, 1970.

The decrease of \$3.6 million in voted items includes:

1) A decrease of \$7.2 million to reflect the first step in the phasing out of the General Health Grants program. This decrease is partially offset by inclusion of the new program, National Health Grants, which is budgeted, for this first year, at \$1.1 million.

2) A \$2.8 million increase in the cost of providing food and drug services, reflecting a further strengthening of the inspection and enforcement activities basic to the program.

3) A \$912,000 decrease in the Medical Services program reflecting the fact that, for the first time, revenues received as a result of the operation of the program are credited to the program, rather than to the Consolidated Revenue Fund. The gross increase in the program, which is \$5.3 million, reflects the emphasis being placed on Indian and Northern Health Services. The revenues credited to the program amount to \$6.2 million.

4) A \$680,000 decrease in Family Assistance payments, reflecting a downward adjustment in the estimate of the number of immigrant children not eligible under the Family Allowances Program.

In the foregoing, I have attempted to highlight the significant changes in the Department's proposed expenditures for 1969-70. While I have mentioned certain of the Department's operations where improvement and/or extension of service is being actively pursued—such as the Old Age Security program, the Indian and Northern Health program and the Food and Drug program—there are many other areas where similar improvement is apparent.

To mention a few of these, I would refer you to the Canada Pension Plan. With the gradual maturity of the Plan, an increasing number of Canadians are becoming eligible for benefits. Payment of survivors benefits

[Interpretation]

L'augmentation de 179 millions de dollars des paiements du Fonds de sécurité de la vieillesse indique une diminution de l'âge pour percevoir les pensions de vieillesse de 66 le 1^{er} janvier 1969 et de 65 le 1^{er} janvier 1970.

La diminution de 3.6 millions de dollars pour les postes votés comprennent:

1) Une diminution de 7.2 millions de dollars représente la première mesure pour éliminer progressivement le programme de subventions pour la santé générale. Cette diminution est éliminée en partie par l'inclusion d'un nouveau programme de subventions à la santé nationale dont le budget prévu de cette année est de 1.1 million de dollars.

2) Une augmentation de 2.8 millions de dollars pour fournir les services d'aliments et drogues et ceci représente un raffermissement dans le domaine des services d'inspection et l'application des activités de base du programme.

3) Une diminution de 912,000 dollars au programme des services médicaux qui représente pour la première fois des revenus perçus par suite de la mise en œuvre du programme qui sont mis au crédit du programme plutôt que portés au Fonds du revenu consolidé. L'augmentation brute du programme qui est de 5.3 millions de dollars reflète l'importance que l'on place aux Services de santé aux Indiens et des questions du Nord. Le revenu prévu pour ce programme se chiffre à 6.2 millions de dollars.

4) Une diminution de 680,000 dollars des paiements des allocations familiales qui représente une diminution des prévisions budgétaires du nombre des enfants immigrants qui ne sont pas admissibles aux termes du régime des allocations familiales.

J'ai cherché à vous donner les principales modifications des prévisions budgétaires du Ministère en 1969-1970. Tout en mentionnant que certains services du Ministère ont été améliorés, et/ou que l'expansion du service est poursuivie de manière active, comme le programme de sécurité de la vieillesse, le programme de santé pour les Indiens et les Territoires du Nord-ouest ainsi que le programme des aliments et drogues; il y a un bon nombre d'autres secteurs où les améliorations sont évidentes.

J'en mentionnerai quelques-uns: Le Régime de pensions du Canada—Étant donné que ce régime arrive à échéance, il y a un nombre de Canadiens de plus en plus grand qui deviennent admissibles à ces avantages.

[Texte]

started in February, 1968, while payment of Disability benefits will begin in February 1970. In addition, the gradual lowering of the age limit for the payment of retirement pensions will mean that, as of January 1, 1970, persons aged 65 will be eligible for retirement benefits. Planning for the increase in administrative responsibilities brought about by the full implementation of the Plan is a continuing process, which is being actively pursued.

• 1545

Another area is the Health Costs and Hospital Insurance. In February, 1969, I announced the names of the members of the seven task forces set up as a result of the recommendation of the November Conference of Canadian Ministers of Health to examine factors in the costs of health services in Canada. These task forces include federal and provincial representatives as well as professional persons from related health fields. Satisfactory progress has been made to date by the task forces and their final reports are expected later this year.

Welfare Program is another area. Four federal-provincial study groups have been set up to examine and make recommendations on improving welfare programs generally. These study, or working, groups are concerning themselves with such factors as costs of welfare programs, the issues involved in a developmental approach to public assistance, research into the problem of alienation of welfare recipient and the criteria for institutional care and community services.

Air Pollution—steps are now underway to bring forward appropriate federal legislation in the field of air pollution. The Department, within its environmental health group is expanding its air pollution program in several areas, in co-operation with the other interested federal departments and with the provinces.

Food and Drug Services—I have already mentioned that additional resources, in the form of money and manpower, have been given to the Food and Drug Directorate to increase its capability to monitor imported drugs. In addition, and in anticipation of the enactment of the Hazardous Products Bill, the Directorate will provide advisory, analytical and research services to the Department of Consumer and Corporate Affairs.

Fitness and Amateur Sport—I have received from the Chairman, Dr. Harold Rea, the report of the Task Force on Sports for

[Interprétation]

Le paiement d'allocations aux survivants a commencé à être versé au mois de février 1968 et celui des allocations aux invalides commencera en février 1970. En outre, au 1^{er} janvier 1970 les personnes qui ont 65 ans auront droit aux prestations de retraite par suite de la diminution constante de l'âge limite pour ce régime. La planification en vue de l'augmentation des responsabilités administratives amenées par l'application du Régime se poursuit dans le cadre de ce régime.

Les frais d'hygiène et l'assurance-hospitalisation. En février 1969, j'ai annoncé les noms des membres de sept groupes d'étude créés, par suite de la recommandation de la Conférence de novembre des ministres canadiens de la santé pour étudier les facteurs relatifs aux coûts des services de santé au Canada. Ces groupes comprennent des représentants fédéraux et provinciaux, de même que des professionnels des secteurs connexes. On a réalisé des progrès satisfaisants dans ce domaine et nous attendons vers la fin de l'année le rapport de ces groupes.

Programme du bien-être social.—Quatre groupes d'étude fédéraux-provinciaux ont été créés pour examiner et faire des recommandations en vue d'améliorer les programmes de bien-être. Ces groupes s'intéressent aux facteurs tels que les programmes de bien-être; les conclusions de l'étude sur l'assistance publique, la recherche dans le domaine de l'aliénation des titulaires du bien-être social et les critères relatifs au service des collectivités et des institutions.

La pollution de l'air.—On a pris des mesures pour faire adopter une loi fédérale dans ce domaine. Le Ministère, dans le cadre de son groupe sur la santé du milieu, a donné plus d'expansion à son programme sur la pollution de l'air dans divers secteurs en collaboration avec divers autres ministères fédéraux intéressés et avec les provinces.

Les services des aliments et drogues.—J'ai déjà mentionné que des ressources supplémentaires, humaines et financières ont été fournies à la direction des aliments et drogues pour accroître la possibilité de contrôles des drogues importées. En outre et en attendant l'adoption du bill sur les substances dangereuses, la direction générale fournira des services cumulatifs, d'analyses et de recherches au ministère de la Consommation et des Corporations.

Programme relatif à la santé et au sport amateur.—J'ai déjà reçu du président, le docteur Harold Rea, le rapport du Comité d'é-

[Text]

Canadians and expect to be in a position to publish this report and table it, incidentally, before that in Parliament later this month. The report contains some positive recommendations which, after adequate study, will undoubtedly cause increased activity in the whole area of sports, fitness and recreation.

There are many other areas of the Department's operations where interesting developments are taking place, but rather than continue at length on the subject, I will leave it to the individual members of this Committee to pursue those programs of special interest to them.

In conclusion, members may be interested in the Medical Research Council, which now reports to Parliament through the Minister of National Health and Welfare.

The MRC is now a corporate body established by the Government Organization Act, 1969. It continues to be the main channel for the provision of direct federal support for research in the health sciences in Canadian universities and affiliated institutions.

This year for the first time the Medical Research Council will include provision for support of dental research in its activities, a function previously performed by the National Research Council.

The purpose of the program of the Medical Research Council is to contribute to the improvement of the quality of health care available to Canadians. To this end it supports high quality research conducted in Canadian schools of medicine, dentistry and pharmacy and in associated hospitals and institutes. The Council supports students of high academic standing who are continuing their research training. It also provides support for a limited number of investigators undertaking research of high scientific merit.

These activities are directed towards the production of adequate numbers of well trained practitioners and teacher-scientists for Canadian needs and towards the provision of the high quality research environment which is an essential part of higher education in the health sciences and a necessary adjunct to the provision of good health care.

Those are my remarks, Mr. Chairman. Thank you very much.

The Chairman: Thank you very much, Mr. Munro. The meeting is open for questions,

[Interpretation]

tude sur les sports au Canada et je crois être en mesure de publier ce rapport vers la fin du mois et le présenter au Parlement. Le rapport renferme des recommandations positives qui, après des études adéquates, augmenteront sans doute l'activité dans le secteur des sports, de la santé physique et des loisirs.

Il y a plusieurs autres secteurs auxquels s'intéresse le Ministère mais plutôt que de continuer à vous énumérer tout ceci, je demanderai aux membres du comité de me poser les questions qui les intéressent particulièrement.

En conclusion, les députés seront peut-être intéressés de savoir ce qui se passe au Conseil de recherches médicales qui fait maintenant rapport au Parlement par l'entremise du ministre de la Santé nationale et du Bien-être social.

Ce service est un organisme constitué par le gouvernement en 1969 par la Loi de l'organisation du gouvernement. Il continue d'être le principal canal d'acheminement de l'aide fédérale directe en vue de la recherche dans le domaine des sciences médicales aux universités canadiennes et aux institutions affiliées.

Cette année, pour la première fois, le Conseil des recherches médicales s'occupera du secteur de la recherche dentaire qui relevait auparavant du Conseil de la recherche nationale.

Le but du programme du Conseil de recherches médicales est d'aider à améliorer la qualité des soins médicaux dispensés aux Canadiens. A cette fin, il aide les recherches de haute qualité dans les diverses facultés de médecine du Canada, dans les facultés d'art dentaire et dans les facultés de pharmacie ainsi que dans les hôpitaux et instituts. Le Conseil continue d'aider les étudiants avancés dans leurs études de continuer leur stage de recherches. Il fournit aussi un appui considérable à un nombre limité de chercheurs qui ont entrepris des recherches de haute valeur scientifique.

Ces activités sont orientées vers la production d'un nombre suffisant de praticiens et d'enseignants scientifiques bien formés pour répondre aux besoins des Canadiens et à cette fin, en vue de fournir un milieu qui favorise une recherche de haute qualité qui est essentielle à un enseignement supérieure des sciences de l'hygiène et un complément aux bons soins médicaux.

Voilà les remarques que je désirais faire, monsieur le président. Je vous remercie.

Le président: Je vous remercie beaucoup monsieur le ministre. La période de question

[Texte]

but before we do so I would like to inform the Committee that the Minister has to attend a very important meeting within the next fifteen minutes. He is prepared to stay here for ten to fifteen minutes, but he mentioned also that he would come back if it were deemed necessary. If everyone is agreeable we will proceed with the questioning, but it will last only ten minutes.

• 1550

Some hon. Members: Agreed.

Mr. Robinson: I will only take a couple of minutes so that others will have an opportunity to ask the Minister some questions. I wonder what is the estimated increase for the Canada Pension Plan when it is fully implemented?

Mr. Munro: In benefits?

Mr. Robinson: Yes.

Mr. Munro: I would have perceived that the benefits were going to increase substantially year by year. Has this been calculated as to what we can anticipate next year and the following year and so on as the progression of payments becomes higher as more people are receiving benefits?

Mr. Monteith: In fact when the Pension Plan came into being there was a projection at that time. When we were discussing the original plan there was a projection of how much it would cost each succeeding year.

Mr. Munro: We tried to get some of these figures out, but it was calculated over the actuarial tables we had and so on over a ten-year period to get to mature benefits. You want to know what the maximum benefit will be after ten years or the cost of the over-all plan?

Mr. Robinson: The reason I asked the question, Mr. Chairman, is because there are a number of programs that I understand are being entered into by the government where the costs are going to escalate tremendously within the next few years. I think that we should have some figures indicating what the cost is going to be to the taxpayers to support this kind of program.

The Canada Pension Plan is only one; Medicare will be another and so on.

Mr. Munro: Of course, the Canada Pension Plan, as you are aware, is a wage-related plan and there are contributions made to it by the employer and the employee that

[Interprétation]

est commencée. J'aimerais pourtant informer le Comité que le ministre doit assister à une réunion importante d'ici quinze minutes. Il est disposé à rester ici dix ou quinze minutes mais il indique qu'il reviendra plus tard si c'est nécessaire. Si tout le monde est d'accord, nous allons procéder à la période de questions qui ne durera que dix minutes.

Des voix: Approuvé.

Mr. Robinson: Je ne vais prendre qu'une couple de minutes, de façon à permettre à d'autres d'interroger le ministre. Je me demande quelle est l'augmentation prévue pour le Régime de pensions du Canada quand il sera entièrement appliqué?

M. Munro: Des avantages?

M. Robinson: Oui.

M. Munro: Je pense que les avantages s'accroîtront considérablement d'année en année. Est-ce qu'on a calculé ce qu'on peut prévoir l'année prochaine, et l'autre et ainsi de suite à savoir si la progression des paiements augmentera au fur et à mesure qu'il y aura plus de bénéficiaires du Régime de pensions?

M. Monteith: Une extrapolation a été faite quand le premier régime est entré en exercice. Quand on a discuté le régime original, on a fait une projection destinée à connaître le coût pour chacune des années suivantes.

M. Munro: Nous avons essayé d'obtenir ces chiffres, mais ceci a été calculé d'après des tables d'actuariat sur une période de dix ans, de telle sorte qu'on les obtiendra quand les prestations seront arrivées à échéance. Vous voudriez savoir quelle sera le maximum des prestations après dix ans? ou le coût du plan.

M. Robinson: Monsieur le président, j'ai posé cette question parce qu'il y a un certain nombre de programmes, je crois, qui sont inaugurés par le gouvernement et dont le coût augmentera considérablement d'ici quelques années. Je pense qu'on devrait nous fournir quelques chiffres indiquant les frais que le contribuable devra payer pour ces programmes. Le Régime de pensions du Canada, n'en est qu'un, l'assurance-maladie en est un autre.

M. Munro: Naturellement, le Régime de pensions du Canada est relié au salaire. Les cotisations sont versées au Régime par l'employeur et par l'employé, de façon à financer

[Text]

finance the Plan and fund the Plan and provide for the benefits. In that sense it is not a direct charge against governmental revenues.

Mr. Robinson: Possibly for the next day we could have some figures on this.

Mr. Monteith: May I ask a supplementary on this?

Mr. Robinson: Certainly.

Mr. Monteith: Is it not true that the projections at the time the Plan was originally being discussed were that the Plan would be self-sustaining, in fact, would accumulate surplus up until—I have forgotten the period—the late 1980's or something like that.

Mr. Munro: I think Mr. Robinson that Mr. Monteith is relating the Canada Pension Plan to other programs. You mentioned Medicare and the Canada Assistance Plan. It is not that type of governmental program. It is a funded plan in which as has been indicated revenues pile up. We have all these tables that we can let you have which illustrate that the fund piles up to take care of claims for benefits in the future.

This fund is used to loan money to the provinces for whatever projects they may have. They borrow against the fund but it is not in a sense an outlay out of the Consolidated Revenue Fund like the other programs you were talking about.

Mr. Robinson: Is your Department contemplating the computerizing of all Canadians in utilizing their social insurance number?

Mr. Monteith: They are just going to make a number out of us all.

Mr. Munro: When you say, "Computerize Canadians" are you asking if we have computers that have programmed through the names of Canadians and assigned a number to identify them by within government circles?

Mr. Robinson: As I understand it, most Canadians now do have a social insurance number.

Mr. Munro: Right.

Mr. Robinson: It seems to me that most programs on the provincial level or federal level or whatever level it may be are using the social insurance number as a means of identifying the individual and as a means of obtaining information on every individual. It

[Interpretation]

le Régime et à assurer les prestations. En ce sens, ce n'est pas tiré directement du Trésor.

M. Robinson: Peut-on avoir des chiffres à ce sujet, demain?

M. Monteith: Est-ce que je peux poser une question complémentaire?

M. Robinson: Certainement.

M. Monteith: N'est-il pas exact que les projections faites quand au Régime de pensions du Canada a été mis en question, révèlent que le Régime devrait avoir un financement autonome et accumulerait des excédents d'argent, jusqu'à, j'ai oublié la date, mais je pense vers 1990.

M. Munro: Monsieur Robinson, je crois que M. Monteith rattache le Régime de pensions du Canada à d'autres programmes tels que l'assurance maladie et le Régime d'assistance du Canada. Ce n'est pas le même genre de programmes. C'est un régime consolidé par lequel, comme on l'a indiqué, les recettes s'accumulent. Nous avons toutes ces tables que nous pouvons vous fournir, qui illustrent les sommes d'argent accumulées pour répondre aux plaintes en vue d'une indemnisation future.

Cet argent est prêté aux provinces pour les projets qu'elles ont. Cet emprunt n'est pas nécessairement une mise de fonds du Revenu consolidé comme tous les programmes dont vous parlez.

M. Robinson: Est-ce que le Ministère songe à adopter le système d'ordination de tous les Canadiens, en prenant le numéro d'assurance sociale?

M. Monteith: Nous allons tous devenir des numéros?

M. Munro: Est-ce que vous voulez dire que nous avons des ordinateurs où l'on emmagasine tous les noms des Canadiens et auquel on a assigné un numéro pour les identifier au gouvernement?

M. Robinson: D'après ce que je crois savoir, la plupart des Canadiens ont un numéro d'assurance sociale.

M. Munro: C'est exact.

M. Robinson: Il me semble que la plupart des programmes au niveau provincial ou fédéral ou quel que soit le niveau, d'ailleurs, se servent du numéro d'assurance sociale pour identifier une personne et pour obtenir des renseignements sur chaque individu. Ceci

[Texte]

seems to me we could create a great deal more efficiency if we used this means to look after our programs. In other words, as a child is born, for instance, he receives a social insurance number...

• 1555

An hon. Member: No, no.

Mr. Robinson: ...and is computerized from then on until he dies. Then he would be struck off the list.

Mr. Munro: There may be greater efficiencies if we computerized each child with a number from the day he is born, but I do not know how politically acceptable it would be.

Mr. Monteith: Mr. Chairman, I had a grandson born two weeks ago and I would hate like hell to see him given a number at this stage.

An hon. Member: Number 007.

The Chairman: Especially if he is like his grandfather.

Mr. Robinson: With respect, Mr. Chairman, I am thinking a little further ahead than what my friend has suggested here. I will give you a perfect illustration from my files. A family are receiving welfare allowances because the wife and the husband are supposed to be separated; the man is receiving unemployment insurance benefits because he is supposed to be unemployed and he is also working part time; also they are collecting other bits of assistance from groups in the community as well. Now, if all this was correlated through a social insurance number and computerized we would know immediately what benefits they were receiving or whether they had this kind of entitlement.

I am thinking of the efficiency that could be derived from this and I am thinking also of a statement made by you some time previously to the effect that we were going to take a good look at all our social insurance programs and all our welfare schemes to try to work out something much more compatible and equitable with all levels of government.

Mr. Munro: There is no question that there could be a greater degree of co-ordination between all our programs both at the federal and provincial level. As I have indicated, and I think you made reference to some remark of mine, we now have under consideration I think a very thorough review of all our programs with the idea in mind of examining their deficiencies, not only in terms of examining elements as to the efficiency in their

[Interprétation]

entrerait dans le cadre des programmes. Il me semble que l'on pourrait créer beaucoup plus d'efficacité en nous servant de ce moyen-là pour étudier nos programmes. Dès qu'un enfant naîtrait, par exemple, il aurait un numéro d'assurance sociale...

Une voix: Non, non.

M. Robinson: ...et serait emmagasiné jusqu'à ce qu'il meurt, où il serait alors supprimé de la liste.

M. Munro: Peut-être que ce serait plus efficace si chaque nouveau-né était enregistré sur ordinateur mais. Je ne sais pas si cela pourrait être accepté sur le plan politique.

M. Monteith: Un petit fils est né il y a deux semaines et je répugnerais à l'idée qu'on lui donne un numéro à cet âge.

Une voix: Le numéro 007.

Le président: Le particulier s'il ressemble à son grand-père.

M. Robinson: Avec tout le respect qui m'adresse monsieur le président, je songe un peu plus loin que ce que croit le député. J'en tire une illustration de mes dossiers. Une famille reçoit des allocations du bien-être social parce que la femme et le mari sont sensés être séparés; le mari touche des prestations d'assurance-chômage parce qu'il est chômeur et il travaille à temps partiel, ils reçoivent en outre d'autres formes d'assistance de la part de certains groupes de la place. Si l'on utilisait le numéro d'assurance sociale, et si on l'enregistrait sur ordinateur, on pourrait donc savoir exactement ce qu'ils reçoivent et ce à quoi ils ont droit.

Je pense à l'efficacité qui en découlerait et à une déclaration que vous avez faite il y a peu de temps à l'effet que nous allons étudier très attentivement nos programmes d'assurance sociale et tous nos programmes de bien-être, de façon à ce qu'il y ait un meilleur avancement entre les divers niveaux de gouvernement.

M. Munro: Il n'y a pas de doute qu'il pourrait y avoir un plus haut degré de coordination entre nos divers programmes à l'échelle fédérale et provinciale. Comme je l'ai dit—je pense que c'est ce à quoi vous faites allusion, nous faisons actuellement une étude complète de tous nos programmes et nous songeons à en évaluer non seulement l'efficacité administrative et de fonctionnement, mais aussi le régime des prestations, s'il y a chevauche-

[Text]

administration and operation but in their benefit structures; the question of whether they are overlapping one with another and the question of whether they are really getting money to those who are in need.

We are examining all those programs with those criteria in mind and the government has the study under active consideration at the present time.

Mr. Robinson: I have only one further question, Mr. Chairman. In view of the fact that the Department is now called the Department of Health, Welfare and Social Affairs, is your Department, Mr. Munro, contemplating the setting up of a social research council?

Mr. Munro: I would like to know where you got the information that the Department was health, welfare and social affairs. It may not be a bad idea but I do not think it is to my knowledge. It is still the Department of Health and Welfare.

Leaving that observation of yours aside, the latter part of your question was: do we contemplate setting up a social research council? Under the government reorganization bill you may have noticed that we have a Welfare Advisory Council. We set it up in a new way and disbanded the old welfare council. We are now empowered to have 21 members on this body who can advise the Minister on matters that he refers to it. They can also initiate consideration of matters on their own and forward their views to the Minister, irrespective of whether he has asked for their advice in these particular areas or not.

We think this Council will be very much socially oriented and will take into account the social implications of all our programs. As I have indicated, many of these task forces that we have set up with the provinces in the welfare field as a result of the last federal-provincial meeting of welfare ministers are very much concerned with the social implications of our programs and the whole question of alienation with reference to welfare recipients trying to go further in the developmental approach to welfare and so on.

I do believe that we are setting up mechanisms and procedures to give a great deal more emphasis in this area whether we have the name or not, in the sense of the purely technical name of the department.

The Chairman: I see that your 10 minutes has elapsed. Has someone else a question?

Mr. Monteith: Mr. Robinson mentioned the Canada Pension Plan, at some future meeting, could we have an up to date picture of

[Interpretation]

ment et si on donne l'argent à ceux qui en ont vraiment besoin.

En somme, nous étudions tous ces programmes en tenant compte de ces divers critères, et le gouvernement examine attentivement ces questions-là.

M. Robinson: J'ai une seule autre question, monsieur le président. Étant donné que le ministère a maintenant pour non «ministère de Santé nationale, du Bien-être et des Affaires sociales», est-ce que vous envisagez la création d'un conseil de la recherche sociale?

M. Munro: Je ne sais pas d'où vous tirez le renseignement voulant que le ministère s'appelle ainsi. Ce ne serait peut-être pas une mauvaise idée, mais que je sache, c'est toujours le ministère de la Santé nationale et du Bien-être social.

La deuxième partie de votre question était la suivante: songez-vous à instituer un conseil de la recherche en matière sociale? En vertu du bill sur le remaniement du gouvernement, vous avez peut-être remarqué que nous avons un Conseil consultatif du bien-être social. Nous l'avons remanié et aboli l'ancien conseil. Nous pouvons maintenant avoir 21 membres dans cet organisme, qui peuvent donner des conseils au ministre, sur les sujets, qu'il leur confie. Ils peuvent aussi prendre l'initiative de certaines études et soumettre au ministre leurs idées, même si celui-ci n'a pas demandé leur avis à ce sujet.

Nous pensons que ce conseil sera très orienté sur les affaires sociales et qu'il tiendra compte des incidences sociales de tous nos programmes. Comme je l'ai indiqué, la plupart des comités d'étude que nous avons créés avec les provinces dans le domaine du bien-être social, à la suite de la conférence fédérale-provinciale des ministres sur les affaires sociales, ces groupes étudient la question de l'alinéation relative aux bénéficiaires en essayant d'approfondir la question de bien-être et ainsi de suite. Je crois que si nous créons des mécanismes, des rouages, nous pourrions insister d'avantage sur cette question et, que nous ayons le nom ou non, dans le sens du terme purement technique du ministère.

Le président: Je veux demander à quelqu'un d'autre s'il a des questions à poser.

M. Monteith: M. Robinson a parlé du régime de pension du Canada. Est-ce que nous pourrions avoir une idée de la situation

[Texte]

just what has happened, what moneys have come in, what moneys have gone to the provinces and so on; just an up to date statement of this.

Mr. Munro: The Department of Revenue under the Act, as you know, does a lot of this but we can get that information I think. We have all the figures.

Mr. Monteith: Fine.

Mrs. MacInnis (Vancouver-Kingsway): I would like to know approximately when you think your review of the existing programs will be ready.

Mr. Munro: Well, I might hazard a guess. Of course, as you are aware, Mrs. MacInnis, the "when" is not solely up to me.

Mrs. MacInnis (Vancouver-Kingsway): No, I understand.

Mr. Munro: I think hopefully sometime this fall or the latter part of the year.

Mrs. MacInnis (Vancouver-Kingsway): Well, may I inquire whether the Canadian Welfare Council is doing a number of studies which will be used in making this review? Is it tied in? Are some of its studies tied in with this review?

Mr. Munro: Their main study, that we gave a sizeable contribution to, was published. It came out here, you will recall, approximately six weeks ago. A tremendous amount of resources from the Welfare Council were allocated to this particular study. We are using this report and their conclusions in terms of input into our own report. We are considering its recommendations and the depth of its studies and so on in helping us to form some of our own conclusions.

Mrs. MacInnis (Vancouver-Kingsway): May I ask whether serious consideration is being given to their recommendation for a guaranteed income, that we work toward a guaranteed annual income?

Mr. Munro: Well, without detracting at all from the Welfare Council, I think you would agree that the concept of a guaranteed annual income is not a novel one and has been seriously entertained by many people in the social welfare area and the political area. In terms of any over-all review I have indicated as going on in terms of all our welfare programs, and the job they are doing, you would, of necessity, have to consider the merits and demerits of the guaranteed annual income, if for no other reason than that it would be a base against which you could test

[Interprétation]

actuelle. Quels sont les fonds dans la caisse, et quelles sommes sont allées à l'Ontario?

Mr. Munro: Le ministère du Revenu, en vertu de sa loi, s'occupe beaucoup de cela. Nous pouvons avoir ces renseignements pour vous. Nous avons tous ces chiffres.

Mr. Monteith: D'accord.

Mme MacInnis (Vancouver-Kingsway): Quand pourrez-vous faire la revue des programmes actuels.

Mr. Munro: Je peux peut-être vous dire quand, mais vous savez que cela ne tient pas qu'à moi.

Mme MacInnis (Vancouver-Kingsway): Oui, je comprends.

Mr. Munro: J'espère que ce sera cet automne ou vers la fin de l'année.

Mme MacInnis (Vancouver-Kingsway): Est-ce que le Conseil canadien du bien-être a effectué des études qui seront liées à vos travaux?

Mr. Munro: La principale étude à laquelle nous pouvons contribuer est celle dont on a parlé ici il y a six semaines, n'est-ce pas. Il y a eu beaucoup de ressources qui ont été accordées à cette étude du Conseil canadien du bien-être et nous lisons ce rapport, nous étudions ces constatations, nous tenons compte des propositions dans notre propre étude et nous en tirons nos propres conclusions.

Mme MacInnis (Vancouver-Kingsway): Est-ce qu'on songe sérieusement à tenir compte des recommandations qui ont été formulées à l'égard du revenu annuel garanti?

Mr. Munro: Dans le domaine du bien-être, il faut dire que la conception du revenu annuel garanti n'est pas tout à fait nouvelle. On y a déjà songé dans certains secteurs de bien-être social et il y a eu une étude globale qui se poursuit à ce moment de tout le programme de bien-être et, bien sûr, il faut considérer les avantages et les désavantages de ce revenu pour la raison, du moins, qu'il faut étudier l'efficacité de nos propres programmes et les propositions qui sont faites en ce moment et qui entrent dans le contexte de l'étude.

[Text]

[Interpretation]

the efficiency of your own program. You would look into its merits to find whether it could cure any defects in your current proposal. So that, yes, it is very much part of the over-all study.

Mrs. MacInnis (Vancouver-Kingsway): What I had in mind was, perhaps, not an over-all application, but there was some thought, I believe, in their report that it might be tried with certain groups in the population on a trial basis.

Mr. Munro: Yes.

Mrs. MacInnis (Vancouver-Kingsway): Groups now covered by other programs perhaps?

Mr. Munro: Yes. Of course, the principle of a guaranteed income has really been embodied in a partial way. Let me put it this way, the philosophy behind the guaranteed income supplement to the old age pension gives us some experience administratively in how these things would work. That concept is part of that increase inasmuch as the guaranteed income supplement is not tied to a means or needs test, but rather an income test. We are picking up some experience in that area. In any over-all review, as I said, that is going on

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in the guaranteed annual income area, we can look to other nations. We know in the United States, for instance, that they have the New Jersey study which is an actual project taking a whole segment of people and putting them on this type of program. There are many research programs that are being conducted that we are aware of and we are studying their implications.

The Chairman: Thank you, Mr. Munro. We know that you have to leave; you may do so now if you wish.

Mr. Munro: I hope you will forgive me. I will be pleased to come back again.

The Chairman: He is leaving alone; he is not leaving with the officials of the Department. They will stay with us under the direction of the Deputy Minister, Dr. Willard. Shall Item 1 stand?

Item 1 stood.

Mr. Osler: Could I ask a question apropos what the Minister has just been asked?

The Chairman: To Dr. Willard? Yes.

Mme MacInnis (Vancouver-Kingsway): Je ne parlais pas de l'application globale comme on a songé dans le rapport de garantir ce revenu à certains groupes de la population à titre d'essai.

M. Munro: Oui.

Mme MacInnis (Vancouver-Kingsway): Des gens qui ne sont pas couverts par les autres programmes, peut-être?

M. Munro: Oui. Le principe d'un revenu annuel garanti se trouve, de façon partielle, mettons la philosophie qui sous-entend le revenu annuel garanti, se trouve dans la pension de vieillesse, par exemple. On se demande comment les choses iront sur le plan administratif. Ce concept fait partie de la hausse, dans la mesure où le revenu annuel garanti n'est pas lié aux moyens de ressource, mais constitue plutôt une évaluation du revenu. Nous avons une certaine expérience maintenant dans ce secteur et pour toute étude globale qui se poursuit actuellement dans le secteur des revenus, nous voyons ce qui se fait dans les autres pays; aux États-Unis, par exemple, il y a une étude au New-Jersey, où ce programme a été appliqué à un certain nombre de gens. On étudie bon nombre de secteurs de recherches pour la mise en œuvre d'un tel programme.

Le président: Merci monsieur le ministre. Je sais que vous devez partir. Je vous le permets.

M. Munro: J'espère que vous m'excuserez mais j'ai d'autres engagements.

Le président: Il est le seul à partir. Les autres fonctionnaires du ministre resteront ici et vous pourrez adresser vos questions au sous-ministre, monsieur Willard. Le crédit numéro 1 est-il réservé?

Le crédit 1 est réservé.

M. Osler: Pourrais-je poser une question au sujet de ce que le ministre vient de demander?

Le président: A M. Willard? Oui.

[Texte]

Mr. Osler: Yes, to Dr. Willard. Perhaps this matter is too academic and I just do not understand it, in which case give me a reference and I will read up on it and not waste time. However, we do get letters from people complaining that the Old Age Assistance Plan requires a means test that is unfair. As I understand what they are talking about, if you own a piece of property or bonds, or things that are readily identifiable then you immediately have to whittle them down to the point where your income comes within \$1,200 or something like that; whereas, if you own bits and pieces of stocks and other holdings that are less identifiable and presumably with the income paid in small enough dribbles so that no T1's are filed or whatever you would get away with it. Is this true; is there, in fact, an inequity due to some kind of loophole?

Dr. J. W. Willard (Deputy Minister, Department of National Health and Welfare): Mr. Chairman, I think we have to distinguish between the guaranteed income supplement which is on an income test and old age assistance which is on a means test.

Mr. Osler: This is old age assistance.

Dr. Willard: In the case of old age assistance, part of the means test does involve this question of assets and how you deal with them. Some of the criticisms you have mentioned have been criticisms of old age assistance. However, with the lowering of the age in the Old Age Security Program from 70 to 65, the Old Age Assistance Program in being eliminated a year at a time. By January, 1970, the last step will have been taken and there will no longer be an Old Age Assistance program which takes into account assets on the basis that you mentioned.

Mr. Osler: In fact, the means test will be eliminated?

Dr. Willard: That is correct, for Old Age Assistance.

Mr. Osler: Thank you.

Mrs. MacInnis (Vancouver-Kingsway): I have a few more questions about old age pensions unless some other people want to ask questions.

The Chairman: Go head.

[Interprétation]

M. Osler: Oui, à M. Willard. Peut-être que cette question est trop abstraite et que je ne la comprends pas assez bien. Dans ce cas, vous pourriez me renvoyer à un document quelconque et je ne vous ferais pas perdre votre temps. De toute façon, vous recevez des lettres, où des gens se plaignent que le nouveau régime de pension requiert une preuve quelconque de moyen de revenu qui est injuste. Si vous avez une propriété ou des obligations quelconques, il faut, par exemple, si votre revenu est de 1,200 dollars par année et si vous détenez des actions ou des obligations quelconques qui sont reconnaissables, vous devez immédiatement en diminuer la somme à \$1,200 ou à un montant semblable, tandis que si vous possédez quelques actions et valeurs éparpillées et qui sont moins reconnaissables et que le revenu soit versé en montants si minimes que vous n'avez pas à remplir de formules T1, n'est-ce pas une injustice due à une sorte d'échappatoire?

Dr J. W. Willard (Sous-ministre, ministère de la Santé nationale et du Bien-être social): Monsieur le président, je crois qu'il faut distinguer entre le supplément du revenu garanti, pour lequel il faut une preuve de revenu et le paiement de la sécurité pour la vieillesse, pour lequel il faut une preuve de subsistance.

M. Osler: Ceci est l'assistance aux vieillards.

Dr Willard: Dans ce dernier cas, avant que les preuves soient faites, il y a la question des biens à considérer. Et certaines critiques, dont vous venez de faire mention, s'appliquaient au paiement de sécurité pour la vieillesse. Mais maintenant qu'on a diminué l'âge de 70 à 65 ans, on élimine progressivement, d'année en année, le programme de sécurité de la vieillesse, et en janvier 1970, nous en serons à la dernière étape. Il n'y aura plus de programme de sécurité de la vieillesse qui tient compte des biens sur la base que vous venez de mentionner.

M. Osler: Par conséquent on éliminera le test.

M. Willard: C'est exact, pour la sécurité de la vieillesse.

M. Osler: Merci.

Mme MacInnis (Vancouver-Kingsway): J'ai d'autres questions sur les pensions de sécurité de la vieillesse, à moins que d'autres gens veuillent poser des questions.

Le président: Non ça va.

[Text]

Mrs. MacInnis (Vancouver-Kingsway): Is any thought being given to, or any attempt being made, by the Department to try to get the old age pensions fixed at a level that is at today's living level with the cost of living and the standard of living. I think Dr. Willard would admit that there never was in the first instance any attempt to match the amount of the old age pensions with actual costs of living or levels of living? Is there any thought that it should be revised in accord with those two principles and tied to an escalating clause according to the cost of living?

Dr. Willard: Mr. Chairman, any study or review of this question has to take this matter into account. It was a proposal such as this that was put forward by the Senate Committee on Aging. There are very considerable difficulties and problems involved to strike a level that is adequate for all parts of the country, for high-cost areas, low-cost areas and so forth. I think it would be fair to say that any assessment of programs that involves the guaranteed annual income approach,

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which is involved in the guaranteed income supplement, has to face up to this particular question. There are many ramifications and difficulties.

It is quite true that in the past old age security was a contribution towards maintenance and it has never been really geared to an average level of maintenance.

Mrs. MacInnis (Vancouver-Kingsway): In respect of that extra \$500 exemption that people can claim when they get over seventy, is there anything going to be done to allow that to come down with the lowering of the pension before it finally gets to age 65? Is there any hope of that?

Dr. Willard: Mr. Chairman, I cannot announce the hopes and policies of the government.

Mrs. MacInnis: I am sorry. I will have to withdraw that question.

The Chairman: Are there any further questions on Vote 1?

Mr. Ritchie: In this matter of Health Service grants for medical complexes considerable difficulties seem to have arisen, the idea being that certain commitments were made and there now seems to be some doubt.

Dr. Willard: Mr. Chairman, perhaps Dr. Lossing could comment at that.

[Interpretation]

Mme MacInnis (Vancouver-Kingsway): A-t-on songé ou a-t-on tenté, au sein du ministère, de fixer les pensions à un niveau qui tient compte du coût de la vie et du niveau de la vie moderne, parce qu'il semble qu'on a jamais tenté de faire correspondre le montant de la pension au coût de la vie. A-t-on songé à réviser le paiement selon ces deux principes et à prévoir des dispositions ascendantes, d'après le coût de la vie?

Dr Willard: Toute étude ou toute révision du genre doit tenir compte de cette question. D'ailleurs, le comité du Sénat sur le vieillissement a formulé cette proposition. Il y a beaucoup de difficultés en cause. Qu'est-ce au juste qu'un niveau suffisant pour toute la région du pays quand le niveau de la vie varie d'un coin à l'autre du pays. Il est juste de dire, je pense, que toute évaluation d'un programme qui comprend un revenu annuel garanti ou qui comporte un supplément de revenu doit tenir compte de ces deux questions. Mais il y a beaucoup de ramifications et difficultés qui se posent.

Il est vrai que dans le passé, les paiements de sécurité de vieillesse consistaient en une contribution pour l'entretien des gens. Elle n'était jamais reliée au niveau moyen de vie.

Mme MacInnis (Vancouver-Kingsway): Est-il probable que le supplément de \$500 que les gens peuvent réclamer lorsqu'ils sont âgés de plus de 70 ans, est-ce qu'il est possible que cela soit aboli, avec la baisse de l'âge d'admissibilité à la pension, avant qu'il n'atteigne 65 ans? Est-ce qu'on a quelque espoir à ce sujet?

Dr Willard: Je ne peux vraiment répondre à cette question, car il s'agit de la politique du gouvernement.

Mme MacInnis (Vancouver-Kingsway): Je suis désolée, je retire ma question.

Le président: Y a-t-il d'autres questions au sujet du Crédit 1?

M. Ritchie: Pour ce qui est des subventions au service d'hygiène, on semble éprouver beaucoup de difficultés, étant donné que certains engagements ont été pris et qu'il semble maintenant qu'ils soient douteux.

Dr Willard: Monsieur le président, peut-être que le Dr Lossing pourrait faire un commentaire à ce sujet.

[Texte]

Dr. E. H. Lossing (Director General, Health Insurance-Resources Branch): What was the question, Doctor?

Mr. Ritchie: It is a very general one. Under the Health Services grant for medical complexes, as enunciated two, three or four years ago, certain commitments were made to the provinces I believe on a guaranteed five year level but recently there has been some doubt whether the commitment by the federal government will proceed beyond two years. Is this right or wrong? What is the explanation of this misunderstanding or whatever it is?

The Chairman: Dr. Lossing.

Dr. Lossing: Mr. Chairman, the reference is to the Health Resources Fund. There has been a limitation put on annual expenditures commencing in 1968-69. \$37,540 million was available in that year for expenditure and a limitation of \$37,500 million has been announced for the fiscal year 1969-70, so that during these two years at least there will be this limitation placed on the amount of funds that can be spent on in those two years.

Mr. Ritchie: Therefore, there is no guarantee that there may be any funds available after 1970, if the government so decides? They are not committed to supplying the universities with funds beyond that. Or might it be more or less, depending upon what the occasion will be when it arises?

Dr. Lossing: Mr. Chairman, the Health Resources Fund made an amount of \$500 million available over 15 years. What has happened now is that because of the over-all financial stringency there has been limitation placed on expenditures in these two years. It has not been announced just at what level there might or might not be a restriction or limitation placed on the expenditure of funds in subsequent years but I think it would be almost certain that money will be available in whatever amount subsequently.

Mr. Ritchie: I believe this pool is divided up amongst the provinces. However, a province like Ontario or Quebec, with many medical complexes, can use up all their allotment in one year whereas a smaller province with, say, only one university might be left out because of its inability to make the necessary

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expenditures in any given year to take care of its share, with the result that this money reverts to the federal government. Is it not a fact that these smaller provinces may lose out?

[Interprétation]

Dr E. H. Lossing (directeur général de la Direction des ressources en assurance-santé): Pouvez-vous répéter votre question, docteur?

M. Ritchie: La question est d'ordre très général. En vertu du programme des subventions au service d'hygiène, il y a trois ou quatre ans, on a pris certains engagements comme une garantie de 5 ans. Ces engagements s'adressaient aux provinces et maintenant on les a retirés et le gouvernement fédéral pourrait fort bien ne pas les prolonger au-delà de 2 ans. Est-ce vrai ou faux? Pourriez-vous me donner une explication?

Le président: Docteur Lossing.

Dr Lossing: Il s'agit n'est-ce pas de la Caisse pour les ressources d'hygiène. En 1968-1969, on a mis des restrictions sur les dépenses annuelles. Cette année-là, on a alloué une somme de \$37,540 millions pour les dépenses et on a fixé un maximum de \$37.5 millions pour l'année financière 1969-1970, de façon que pendant ces deux années, au moins, il y aura une certaine restriction sur les dépenses.

M. Ritchie: Il n'y a donc aucune garantie qu'il y aura des fonds disponibles après 1970 si le parlement le désire. Il n'est pas tenu de donner des fonds aux universités après cette période ou peut-être plus ou moins le cas échéant, n'est-ce pas?

Dr Lossing: Monsieur le président, le fonds qui est un certain montant disponible pour 15 ans, ce qu'il arrive maintenant à cause des restrictions globales financières du moment, il y a eu moins de dépenses en ces deux dernières années. On n'a pas annoncé à quel niveau on établira des restrictions sur les dépenses prévues à même la caisse, mais il est presque certain que des fonds seront disponibles plus tard.

M. Ritchie: Il semble aussi que cette caisse est disponible à toutes les provinces, par exemple, le Québec ou l'Ontario, qui possèdent plusieurs complexes médicaux peuvent utiliser tous les fonds dont ils ont besoin en une année, tandis qu'une province plus petite qui possède, disons, une université, peut être mise à l'écart, car elle ne peut faire toutes les dépenses voulues en un an pour faire sa part. Et par conséquent, cet argent reviendra au gouvernement fédéral et certaines de ces petites provinces par conséquent pourraient y perdre.

[Text]

Dr. Lossing: Mr. Chairman, to try to work out as equitable a way of distributing the money in 1968-69 as possible we made a sub-allocation of the \$37,540 to each province. It is a fact that not all provinces were able to claim the total of their sub-allocation in the year 1968-69. We are looking at that. There was a discussion on this very point in the Health Resources Advisory Committee which met last week and this matter is being examined to see whether it might be possible to use money not expended in 1968-69 in a subsequent year, but there is no decision as yet on that point.

Mr. Ritchie: All I can say is that it does seem to cause considerable consternation in these medical centres. I hope that it can be worked out. Perhaps more explanation by the federal government might be of some value.

I have a question on Indian health services. Under the medicare setup coming into effect across the country is the federal government using this as its paying agency?

Dr. S. H. Wiebe (Deputy Director General Medical Services): Are you asking whether the Indian is going to be the recipient of the same benefits as other citizens and that the whole machinery of the provincial insurance scheme will be put into effect? Is that the question?

Mr. Ritchie: Roughly, yes.

Dr. Wiebe: In other words, we intend to create a situation which would provide to Indians exactly the same services as to other citizens under these plans.

Mr. Ritchie: Who will pay their premiums in those provinces that have premiums, assuming the Indian is unable to pay them himself?

Dr. Wiebe: If the Indian meets the criteria against which we measure whether or not the Department will pay then we will pay; if he does not meet these criteria then other sources, probably his own first, will be tapped.

Mr. Ritchie: So the distribution of any benefits to the Indians will be on the same basis as any other citizen of that province?

Dr. Wiebe: That is right. We hope in our negotiations with the provinces in this regard to cleave to the statement in the legislation

[Interpretation]

Dr. Lossing: Monsieur le président, pour essayer de répartir équitablement les fonds en 1968-69, nous avons fait des sous-allocations de ce \$37,540 millions à chaque province. Il est vrai que ce n'est pas toutes les provinces qui ont pu se prévaloir de tous les fonds. J'entend pour 1968-69. Nous étudions la question, il y a eu des entretiens à ce sujet lors de la réunion du comité consultatif. Cette question est toujours à l'étude pour voir s'il ne sera pas possible de faire prévaloir des fonds qui ne sont pas dépensés en 1968-69, de pouvoir les dépenser au cours des années subséquentes. Mais on n'a pas encore pris de décision à ce sujet.

M. Ritchie: Tout ce que je puis dire, c'est que cela cause beaucoup de consternation dans ces centres médicaux et j'espère qu'on pourra régler le problème bientôt. Peut-être que le gouvernement pourrait donner plus d'explications, cela pourrait être utile.

Il y a un autre secteur qui m'intéresse celui des services d'hygiène pour les Indiens au titre de l'assurance frais médicaux qui sera en vigueur dans tout le pays. Est-ce que le gouvernement fédéral entend se servir de fonds à cette fin?

Dr. S. H. Wiebe (sous-directeur général des services médicaux): Que demandez-vous au juste? Si les Indiens pourront bénéficier des mêmes avantages que les autres Canadiens? Est-ce que les rouages des régimes d'assurance provinciaux seront disponibles? Est-ce là votre question?

M. Ritchie: Oui, à peu près.

Dr. Wiebe: En d'autres mots, nous voulons faire en sorte que les Indiens bénéficient des mêmes services que les autres citoyens au titre de ces régimes.

M. Ritchie: Qui versera les primes dans les provinces où il y a des primes, en supposant que les Indiens ne peuvent les payer eux-mêmes?

Dr. Wiebe: Si l'Indien répond au critère en vertu duquel nous déterminons si le ministère peut faire les versements, alors il bénéficiera de tous les avantages, sinon il y aura d'autres sources, peut-être ses propres ressources, qui entreront en cause.

M. Ritchie: Par conséquent, la distribution des avantages pour les Indiens se fera sur la même base que pour les autres citoyens de sa province, n'est-ce pas?

Dr. Wiebe: C'est exact. Nous espérons que lors des négociations avec les provinces à ce sujet, de nous en tenir aux déclarations

[Texte]

which speaks of uniform terms and conditions and we hope to apply these to the Indian population.

Mr. Ritchie: How is the figure arrived at in granting to the provinces their share of medicare. Presumably, in Manitoba it is approximately \$27 per head. What is the financial formula by which each province's share of medicare is calculated?

Dr. Lossing: The basis for the amount is cost incurred by a province and this is what a province will spend or is estimated to spend for insurance services—that is, services provided by physicians to insured people in the

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course of the year. We obtain information from all provinces—and this is assessed by our own people—and a determination is made of this estimate. Then that amount is divided by the insured population in the province. In the case of a province which does not have a premium it is the net population, which is the total population as of October 1 excluding members of the armed services, the RCMP and inmates at federal penitentiaries. I am excluding Manitoba from this situation because there is a difference there, but if it is a premium province and if entitlement is conditional on payment of premiums, this is an estimate made by the province of the number of insured people throughout the year.

In Manitoba, although it is a premium province, they have divorced entitlement from payment of premium, so that in Manitoba the insured population is the whole net population.

Mr. Ritchie: Under your formula, wealthy province people tend to get less than the poorer, do they not? Is there not some even-
ing-up of grants?

Dr. Lossing: I think, sir, you are referring to the fact that federal contributions will be made at 50 per cent of the national average.

Mr. Ritchie: That is right.

Dr. Lossing: I think what you say is true. A high cost province and a low cost province each will receive 50 per cent of the national average, so the effect will be that the high cost province receives less than half its total cost, while conversely a low cost province will receive more than half of its total costs.

Mr. Ritchie: Do you contribute to services utilized, such as laboratory and X-ray per-

[Interprétation]

faites par l'assemblée législative qu'il y ait des conditions uniformes qui s'appliqueront pour tous les Indiens.

M. Ritchie: Je m'intéresse aux paiements faits aux provinces au titre d'assurance frais médicaux, par exemple, le Manitoba, combien établit-on le chiffre. Au Manitoba, c'est \$27 par tête d'habitant. Quelle est la base ou la formule financière selon laquelle on établit pour les provinces, la proportion pour chaque habitant.

Dr. Lossing: Cela dépend des coûts encourus par la province, c'est-à-dire ce que la province dépensera ou ce que l'on croit qu'elle dépensera pour les services d'hygiène au cours d'une année. Nous obtenons ces renseignements de toutes les provinces, nous en faisons nous-mêmes l'évaluation et selon ces estimations, nous établissons, nous prenons ce montant, nous le divisons par la population de la province. Dans le cas d'une province qui ne verse pas de prime, il s'agit de la population nette ou globale à compter du 1^{er} octobre, à l'exclusion des forces armées, des membres de la Gendarmerie royale et des forçats dans les pénitenciers. Je ne tiens pas compte du Manitoba parce que la situation diffère dans cette province, mais dans les autres provinces, selon les primes qu'elles versent, elles ont droit à un certain pourcentage. La province évalue le nombre de personnes assurées au cours de l'année.

Au Manitoba, par exemple, même si les primes diffèrent, ce à quoi elles donnent droit diffère de ce qu'elles versent et la population assurée au Manitoba constitue l'ensemble de la population.

M. Ritchie: Selon cette formule, les provinces les plus riches auront plus que les provinces les plus pauvres, n'est-ce pas? Est-ce qu'il n'y aurait pas une péréquation quelconque?

Dr. Lossing: Je suppose que vous voulez dire que la contribution fédérale sera la moitié de la moyenne nationale?

M. Ritchie: Oui. C'est vrai.

Dr. Lossing: C'est vrai, les provinces auront toutes 50 p. 100 de la moyenne nationale, ce qui aura pour effet que les provinces où cela coûte plus cher auront moins et le contraire aussi sera vrai, n'est-ce pas, pour les provinces qui dépensent le moins.

M. Ritchie: Contribuez-vous aux services, comme le laboratoire et la radiographie en

[Text]

formed outside of a hospital in any province?

Dr. Lossing: Mr. Chairman, is the reference there to the Hospital Insurance Program?

Mr. Ritchie: An example is an X-ray in a doctor's office. Is that covered under your plan?

Dr. Lossing: Any service provided by a doctor is covered under medical care. The services of a radiologist would be included under the medical care program.

Mr. Ritchie: That is all.

The Chairman: Are there any other questions under Vote 1?

Mrs. MacInnis (Vancouver-Kingsway): I have some more I would like to ask if I may.

The Chairman: On Vote 1?

Mrs. MacInnis (Vancouver-Kingsway): On Medicare; is that Vote 1?

The Chairman: We will come back to it but you may ask questions now if you wish.

Mrs. MacInnis (Vancouver-Kingsway): I can leave it. We are not finished with medicare, then?

The Chairman: No.

Mrs. MacInnis (Vancouver-Kingsway): We can leave it then.

The Chairman: Are there any other questions under Vote 1? If not, shall Vote 1 stand?

Mr. Monteith: Mr. Chairman, might it not be reasonable just to have a sort of general discussion today and the next time we meet start off with your votes?

The Chairman: It is up to the Committee.

Mr. Monteith: It seems to me that it is a sort of warm up. If we just had a general discussion on the various angles it might be beneficial to all of us.

The Chairman: Mr. Otto?

Mr. Otto: Mr. Chairman, I have looked at these estimates, not only for the Department of National Health and Welfare but for other departments, and it seems to me that we are never very much further ahead when looking at these estimates as if we had never seen

[Interpretation]

dehors des hôpitaux, dans toutes les provinces.

Dr. Lossing: Monsieur le président, veut-on parler du programme d'assurance-hospitalisation?

M. Ritchie: Par exemple, une radiographie chez le médecin, est-ce que cela est couvert par votre régime?

Dr. Lossing: Tout service donné par un médecin est couvert par le régime. Cela tombera sous le coût du régime.

M. Ritchie: C'est tout.

Le président: Y a-t-il d'autres questions au sujet du crédit 1?

Mme MacInnis (Vancouver-Kingsway): J'en aurais d'autres à poser, avec votre permission.

Le président: A propos du crédit 1?

Mme MacInnis (Vancouver-Kingsway): A propos de l'assurance soins médicaux, est-ce que cela fait partie du crédit n° 1?

Le président: Nous y reviendrons, mais vous pouvez poser des questions maintenant, si vous le désirez.

Mme MacInnis (Vancouver-Kingsway): Je peux attendre à plus tard. Nous n'avons pas fini avec l'assurance soins médicaux?

Le président: Non.

Mme MacInnis (Vancouver-Kingsway): Nous pouvons donc attendre.

Le président: Y aurait-il d'autres questions au sujet du crédit 1? Sinon, l'accepterons-nous?

M. Monteith: Ne serait-il pas mieux d'avoir une discussion générale aujourd'hui, et la prochaine fois que nous nous réunirons nous pourrions adopter le crédit?

Le président: Cela dépend du Comité.

M. Monteith: Il me semble que c'est une sorte de période de mise en train. Je crois qu'il serait utile d'avoir une discussion générale en ce moment sur les divers aspects de la question.

Le président: Monsieur Otto?

M. Otto: Monsieur le président, j'ai étudié ces crédits, non seulement ceux de la Santé mais aussi ceux des autres ministères et il me semble que nous parlons de ces crédits comme si nous n'en avions jamais eu connaissance. Ce que nous obtenons c'est un sujet de

[Texte]

them. What we really get is a subject, a topic, from the estimates upon which we can base an opinion or a question. My question, Dr. Willard, is in all of these votes, in all of these expenditures, do you have a detailed breakdown? For instance, note the Utilities Materials and Supplies \$365,000; do you have a breakdown of just exactly what those expenditures are?

Dr. Willard: Mr. Chairman, may I ask whether what Mr. Otto has in mind is the kind of breakdown that is proposed in this new approach to estimates?

Mr. Otto: No, no.

Dr. Willard: Is it more detailed than that?

Mr. Otto: A detailed breakdown; there is not much sense in trying to presume that we are examining or scrutinizing if we do not know what the expenditures are. Do you have a detailed breakdown?

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Dr. Willard: I am sure, Mr. Chairman, if you wanted us to make available more details of a particular Vote so we could discuss it in this way that could be done. As a trial if you want to select one of the votes to see whether another approach would be more meaningful perhaps we could work something out with you.

Mr. Otto: Mr. Chairman, the suggestion that I might make—and I have looked at many statements in business—is that the detailed breakdown be supplied to all the members of the Committee ahead of time so that they can scrutinize it for such subject as, perhaps, an expenditure of \$28,000 to paint a yacht or a *Bonaventure*, or something of that nature. If any member finds the type of thing he might question he can bring that up at the appropriate time in the vote.

As it is I think, Mr. Chairman, you can see that this Committee or any committee cannot really scrutinize because we do not know. Therefore, we automatically approve the estimates. Something might remind us of utilities and so we ask a question on utilities, but that is not really the purpose of this Committee. My suggestion, Mr. Chairman, is that you—we cannot make a motion, of course—investigate with Dr. Willard and the Department.

I know the information I am suggesting may be voluminous, but on the other hand it can be supplied to all members of the Committee ahead of time. We can then scrutinize it, and when we come to question the Depart-

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discussion à partir des crédits sur lesquels nous pouvons fonder nos opinions et nos questions. Mais, ma question docteur Willard, quant à tous ces postes budgétaires, est-ce que vous en savez le détail? Par exemple, vous nous dites que globalement les services, le matériel et les approvisionnements, représentent une somme de \$365,100. Quelles sont précisément ces dépenses?

Dr Willard: Monsieur le président, M. Otto songe-t-il à la sorte de ventilation qui a été proposée dans cette nouvelle façon d'envisager les prévisions budgétaires.

M. Otto: Non, non.

Dr Willard: Est-ce plus détaillé que cela?

M. Otto: Une ventilation. Comment pouvons-nous étudier si nous ne décomposons pas ces dépenses-là. Est-ce que vous avez une ventilation?

Dr Willard: Je suis sûr, monsieur le président, que si l'on veut décomposer un crédit en particulier, nous pouvons discuter d'une façon plus détaillée, ceci pourrait se faire. Mais si vous voulez, par exemple, essayer un crédit donné, nous pouvons peut-être adopter une autre méthode plus utile.

M. Otto: Monsieur le président, je suggère, et j'ai vu plusieurs déclarations, qu'on devrait fournir une ventilation à tous les membres du comité à l'avance de sorte que nous puissions approfondir la question. Tout sujet, toute question, par exemple, une dépense de \$28,000, par exemple, pour peindre un yacht ou le *Bonaventure* ou quelque chose du genre. Ainsi, le membre du comité pourra soulever cette question lorsqu'il s'agira de voter. Mais tel que je le vois maintenant ce comité ou n'importe quel autre comité ne peut vraiment pas étudier parce qu'il n'est pas renseigné, et il adopte automatiquement les prévisions budgétaires. Nous avons, par exemple, les services et nous posons une question sur les services. Ce n'est cependant pas le but de notre comité. Je prétends, monsieur le président, que vous pouvez présenter une motion, pas nous évidemment, mais vous pourriez peut-être demander au Dr Willard et au ministère ce genre de renseignement.

Cette documentation pourrait être fort volumineuse, mais on pourrait la fournir à tous les membres du comité à l'avance de telle sorte que nous puissions approfondir les sujets et que lorsque viendrait la période des

[Text]

ment will know exactly the topics that we want to question.

Dr. Willard: I think, Mr. Chairman, I should comment to say that the general approach which is set out in the estimates book is developed by Treasury Board and we have tried to conform to the way in which they want the information sent forward. I think the question being raised affects not only our estimates but the whole presentation, and as this is a matter that relates not only to our Minister and our Department we should discuss it with the Treasury Board officials and perhaps with Mr. Otto to see what kinds of things he has in mind.

Mr. Otto: Mr. Chairman, of course I realize that Dr. Willard is quite correct. You will acknowledge, Dr. Willard, that prior to these new rules we had a committee on estimates—just one committee on estimates—and more or less they said “This is the Blue Book; is everything all right?” and everything was all right. But I believe that the purpose of the new rules is to give these committees a certain job to do, and I really cannot see how we can rationally question or scrutinize unless we have these particulars.

I really do not think there will be that much more work. There will be some more work of course, but I do believe that the members will be more acquainted with the estimates, those who want to be, and I think their question will be more pointed. I think also your Department and you would feel better by knowing that the Committee is perfectly knowledgeable, that you have nothing to hide and that there is a perfect expenditure which should be allowed. If the suggestion of Dr. Willard is taken by the Chairman I would be glad to get together with the President of the Treasury Board, and I am sure there would be no objection to that.

Dr. Willard: It may also be, Mr. Chairman, that the Committee on Public Accounts—your own committee—which really gets into the question of presentation is also the committee that you would consider.

Mr. Otto: I believe that they deal with specific items that are not dealt with by other committees, if I am not mistaken.

Mr. Monteith: Public Accounts is concerned with after the spending. This is proposed spending we are studying.

Mr. Otto: I see; yes, of course.

Mr. Osler: May I make a point along your line of questioning? To take a ridiculously

[Interpretation]

questions, nous saurions exactement de quoi nous parlons.

Dr Willard: Je pourrais vous dire, monsieur le président, que l'optique générale de la préparation de ces crédits a été mise au point par le Conseil du Trésor et que nous avons cherché à nous conformer à leur méthode de divulguer les renseignements. Mais la question qui a été soulevée ne nous affecte pas en particulier, mais toute la présentation des crédits. Et comme cette question ne touche pas seulement notre ministre et notre ministère, nous devrions en discuter avec des fonctionnaires du Conseil du Trésor, et peut-être avec M. Otto, pour sonder sa pensée.

M. Otto: Monsieur le président, je me rends bien compte que le docteur Willard a parfaitement raison. Mais il reconnaît qu'avant le nouveau régime, nous avions un comité des crédits et on disait que si le Livre bleu était adopté tout irait bien. Et tout allait bien. Mais avec le nouveau régime des comités, il faut que les comités aient du travail à faire, un travail sérieux, et je ne vois pas très bien comment nous pouvons, d'une façon rationnelle, étudier et mettre en cause les divers crédits si nous n'en avons pas le détail.

Je ne pense pas que ce serait beaucoup plus de travail. Mais les députés veulent s'informer. Je pense que votre ministère et vous-mêmes préféreraient que les députés soient bien renseignés parce que vous n'avez rien à cacher en quelque sorte, et qu'une dépense parfaite devrait être allouée. Et voilà la suggestion du docteur Willard. Et monsieur le président, je voudrais rencontrer, le président du Conseil du Trésor, je pense qu'il n'y aura pas d'objections de leur part.

Dr Willard: Monsieur le président, le Comité des comptes publics qui s'intéresse à la question de la présentation des crédits est également un comité qui devrait étudier cette question.

M. Otto: Je pense qu'il s'occupe de questions en particulier que les autres comités ne traitent pas, si je ne m'abuse.

M. Monteith: Les comptes publics s'intéressent aux dépenses. Mais il s'agit ici de prévisions budgétaires.

M. Otto: Je vois.

M. Osler: Puis-je ajouter un commentaire à ce que vous venez de dire. Prenons un petit

[Texte]

small example, I think often the place to find money is in pennies, but we are dealing in philosophy and the broad principles. To take a small example, I find on page 344 Educational and Informational Publications, an increase from \$58,000 to \$84,000; then Educational and Informational Material Other than Publications, \$62,000 to \$65,000.

An hon. Member: That is the old book—they gave you the old book.

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Mr. Osler: It does not matter; the example is there. The point I am trying to make is that you are talking about \$35,000 to \$40,000 which is peanuts in \$33.8 billion. We, as a committee, have no idea whether the philosophy behind buying \$80,000 worth of publications is a good philosophy or whether it is not. Is there any way we can get at that without bogging the Committee down in needless detail?

Dr. Willard: Mr. Chairman, we have material dealing with detail and officials that can present to you that kind of detail. We have in years past, before other committees. In the case of information, we set up a display and showed all our various pamphlets, and discussed where our money went. It just depends on the kind of detail you would like to have. If you identify the areas where you feel you can give that amount of time, then we will try and react, and provide the information you want.

Mr. Monteith: Does Mr. Otto not mean, for argument sake, Item No. 1? How does the department arrive at \$4,793,000? What is the make-up of that amount? This is really what you are wondering about, is it not?

Mr. Otto: Let us take page 261, and that is Vote 6—Construction or Acquisition of Machinery, Equipment and Furnishings, \$410,000. What does that mean? Does that mean a car for somebody, or a yacht for some investigation? Does that mean chairs for the green room? What are these things? We do not want Mr. Henderson after the fact coming out and saying you spent eight hundred million or eighty million or five thousand uselessly. I think that if this information was available—and I do not say that everyone has to look out—but those members who are interested will go through these items and pick out those they question, maybe one or two, and they will ask what it is. Then you can give them a full explanation, and if there

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exemple. Nous parlons ici d'un grand principe, mais prenons tout simplement un petit exemple. Par exemple, à la page 344, qui porte sur les publications éducatives et informatives, il y a une augmentation de \$58,000 à \$84,000, et la documentation éducative et informative autre que des publications, de \$63,000 à \$65,000. Peu importe, c'est un exemple que je donne ici.

Une voix: C'est l'ancienne édition qu'il vous ont donnée.

M. Osler: Cela ne fait rien. L'exemple reste. Vous parlez de \$30,000 ou \$35,000, et vous dites que c'est peu de chose sur un budget de \$33.8 milliards; mais à titre de membre du comité, nous ignorons si le principe sous-jacent à l'achat de \$80,000 de publications est un bon principe ou non. Nous ne voulons pas entrer dans des détails inutiles, mais tout de même.

Dr Willard: Monsieur le président, nous avons des documents qui traitent d'une façon détaillée de ces diverses questions et les fonctionnaires peuvent vous les présenter. Nous l'avons fait au cours des autres années devant d'autres comités. Sur le plan de l'information, nous avons établi un kiosque où nous avons exposé toutes nos brochures et nous avons discuté où allait notre argent. Cela dépend du genre de détails que vous désirez obtenir. Si vous identifiez les secteurs où vous pouvez donner assez de temps, nous chercherons alors à vous fournir tous les renseignements requis.

M. Monteith: Est-ce que monsieur Otto ne parle pas du crédit n° 1? Comment le ministère en arrive-t-il à \$793,000? Comment est réparti cet argent? C'est vraiment ce qui vous inquiète, n'est-ce pas?

M. Otto: Prenons à la page 261, le crédit n° 6—Construction ou acquisition de bâtiments, ouvrages, terrains et matériel \$410,000. Qu'est-ce que ça veut dire? Est-ce une automobile pour quelqu'un, un canot automobile pour une enquête quelconque ou des chaises pour la salle de conférence? Qu'est-ce que cela sous-entend? Nous ne voulons pas que monsieur Anderson vienne ici, par exemple, nous dire après coup, que vous avez dépensé huit cents millions de dollars, ou huit ou cinq mille dollars inutilement. Je pense que si ces renseignements étaient disponibles et je ne dis pas que tous doivent s'y intéresser mais que ceux qui s'y intéressent puissent examiner ces crédits et s'arrêter sur ceux qu'ils désirent. Peut-être un ou deux par exemple,

[Text]

are any questions in the minds of the members of the Committee, we can then deal with them.

In many cases, Dr. Willard, I think you will admit that many of these items skip your attention too. And if I had asked the Minister what any of these items were for, he would not know, any more than I. But we have to go through these things because otherwise this Committee in our duty to examine and to scrutinize estimates, has no meaning at all. And it has not, in all the meetings we have had on estimates so far.

The Chairman: Mr. Otto, would you agree to leave this with the Chair, and the Chair will do its best to try to solve this with the Steering Committee, to solve this problem which you brought up. And I believe it is an important problem. So we will try to meet with and discuss this matter with the officials of the department. Are there any other questions on Vote 1? If not, shall Vote 1 stand?

Vote 1 stood.

National Health and Welfare
Health Services

5 Administration, Operation and Maintenance, including recoverable expenditures on behalf of the Canada Pension Plan and authority, notwithstanding the Financial Administration Act, to spend revenue received during the year for prosthetic services, \$7,785,000

The Chairman: Shall Vote 5 carry?

Mr. Osler: Could I ask what the relationship of the Canada Pension Plan is to this? This is again probably a naive question, but including recoverable portions, what do you recover from the Canada Pension Plan?

Dr. Willard: Mr. Chairman, as I understand it, there is just a very small item in there in relation to the Canada Pension Plan, which has to do with services from the health side that are rendered to the Canada Pension Plan, and that has to do with the medical services the health branch provides to Canada Pension Plan in connection with disability benefits.

[Interpretation]

et ils demanderont de quoi il s'agit. Vous donnerez ensuite une explication et s'il y a des questions qui se posent aux membres du Comité, nous pourrions alors les étudier.

Dans bien des cas, je pense que vous admettez, docteur Willard, que par nombre de ces détails vous échappent à vous aussi et si je le demandais au ministre, je présume qu'un certain nombre d'entre eux lui échapperaient. Mais nous nous devons d'étudier ces questions parce qu'autrement, le Comité n'aurait pas de raison d'être, vu que son but est justement d'examiner et d'étudier à fond les prévisions budgétaires. Dans toutes les réunions que nous avons eues jusqu'ici, la même question s'est posée.

Le président: Monsieur Otto, êtes-vous d'accord pour confier cette question au président? Le président cherchera à résoudre le problème que vous avez soulevé avec le comité directeur. Car je crois que c'est un problème important. Nous allons essayer d'y remédier et de débattre la question avec les fonctionnaires du ministère. Y a-t-il d'autres questions au sujet du crédit n° 1? Est-ce que le crédit n° 1 est réservé?

Le crédit n° 1 est réservé.

Crédit 5—Administration, fonctionnement et entretien, y compris les dépenses recouvrables au titre du régime de pensions du Canada, et autorisation, nonobstant la Loi sur l'administration financière, de dépenser le revenu tiré des services de prothèse au cours de l'année—\$7,785,000.

Le président: Est-ce que le crédit n° 5 est adopté?

M. Osler: Quel est le rapport qui existe avec le Régime de pensions du Canada? C'est probablement une question simpliste, mais y compris la partie recouvrable, qu'est-ce que l'on récupère du Régime de pensions du Canada?

Dr Willard: Monsieur le président, d'après ce que je peux comprendre, il s'agit d'un article peu important relativement au Régime de pensions du Canada en ce qui concerne les services d'hygiène qui sont rendus du Régime de pensions du Canada, et en ce qui a trait aux services médicaux que les directions de la Santé nationale fournissent au Régime de pensions du Canada en rapport avec les allocations aux infirmes.

[Texte]

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The Chairman: Any other questions gentlemen?

Mr. Osler: We are trying to pinch pennies, and you have got transportation way up this year. Why is it way up? Why is Information way up? They are only pennies, but by golly, you know...

The Chairman: Maybe you could ask the question, and if you are not satisfied with the answer, maybe they can...

Mr. Osler: But I cannot, because it is meaningless. It is only a small example on a long list of items. But I agree with Mr. Otto. Why do information services go up? It costs you another \$30,000 or \$40,000 a year. I do not know why, and you find enough of those increases without—have you any idea why on page 260 your information services have gone up from \$37,100 to \$72,200?

Mr. Willard: I would ask Dr. Watkinson, who is the Director General of Health Services, if he would be able to answer that.

Mr. Watkinson: Mr. Chairman, I do not have the breakdown in terms of specific items, but in the Health Services Branch, the program in the past two years have not increased in terms of actual services, but the costs related to such—we have touched on communications, for example, the cost of telephone. The costs of communications generally have increased. Wherever there is a personnel factor involved, the cost of salaries has gone up.

It is the total cost rather than related to any specific program, because programs have been held at about the 1967-1968 level. But certainly, on the basis of that type of question, we will be glad to dig it out, and give you at the next session very specific answers.

Mr. Osler: We could possibly get you bogged down for five months if we followed this up. But I am convinced that in selective ways that may be a way of getting at what is going on.

Dr. Willard: Mr. Chairman, maybe I could identify the kind of informational material that is provided under the Health Services Branch, to give you some indication. This is

[Interprétation]

Le président: D'autres questions messieurs?

M. Osler: Voilà, nous cherchons à faire de petites épargnes et nous nous apercevons que les sommes d'argent réservées au transport sont augmentées? Pourquoi y a-t-il cette augmentation? Pourquoi le chapitre de l'information accuse une augmentation? Ce ne sont que des poussières, mais, vous savez...

Le président: C'est-à-dire que vous pourriez poser la question et si vous n'étiez pas satisfait, ils peuvent peut-être...

M. Osler: Mais je ne peux pas parce que cela est dénué de sens. Ce n'est qu'un petit exemple tiré d'une longue liste de crédits. Mais je partage l'avis de monsieur Otto. Pourquoi le chapitre de l'information accuse-t-il une hausse? Cela coûte un autre \$30,000 ou \$40,000 par année. Je ne sais pas pourquoi, et il y a assez d'augmentations sans... Auriez-vous une idée pourquoi à la page 260, au chapitre des services d'information, le crédit est passé de \$37,100 à \$72,200?

Dr. Willard: Je demanderais au docteur Watkinson, directeur général des Services de la Santé, d'y répondre, s'il le peut?

Dr. Watkinson: Monsieur le président, je n'ai pas le détail des crédits mais dans la Direction des services d'hygiène, au cours des deux dernières années, les programmes n'ont pas augmenté en ce qui concerne les services mais les frais de communications, par exemple, le téléphone, ont en général subi une augmentation partout où le facteur du personnel entre en cause, les salaires ont augmenté.

C'est le coût total qui a augmenté plutôt que des facteurs spécifiques pour tel ou tel programme, parce que les programmes ont été maintenus à peu près au même niveau qu'en 1967-1968. Mais il n'y a pas de doute que pour ce genre de question, nous serons heureux d'y prêter attention et de vous fournir des réponses très détaillées à la prochaine séance.

M. Osler: Nous pourrions peut-être nous embourber pendant 5 mois si nous nous en tenons à cela, mais je suis convaincu qu'en procédant par élimination, on peut probablement arriver à savoir ce qu'il en est.

Dr. Willard: Monsieur le président, je pourrais peut-être vous indiquer le genre de renseignements que nous fournissons à la Direction des services d'hygiène. Nous avons les

[Text]

where you have the smoking and health campaign expenditures, and also informational material on accidents, on influenza, on occupational health, the public health engineering field, radiation protection, and emergency health. So this is the kind of informational material that is covered within Vote 5, dealing with health services.

The Chairman: Mr. Monteith?

Mr. Monteith: Mr. Chairman, Transportation and Communications, here listed for proposed estimates 1969-70 for \$498,000, and the 1968-69 forecast expenditures of \$418,000. Could this not be something that can be broken down as per Mr. Otto's request? The actual expenditures? How was the \$418,000 forecast expenditure for 1968-69 arrived at? And how is the increase of \$80,000 arrived at for this year? And similarly in the information services.

It just occurs to me that there should be, as Mr. Osler said—I do not want to say, or would not suggest, that we do this for every single item, but I think if we were to pick one or two things and just actually see the breakdown and how it is arrived at...

• 1640

Dr. Willard: Well, Mr. Chairman, we will try to do that, and you have already identified two or three areas, transportation and communications, information, and in this Vote 6, the question of laboratory equipment, and so forth.

Mrs. MacInnis (Vancouver-Kingsway): Mr. Chairman, I am trying to get at this too. Have you any over-all compilation of the number of employees comparing this year and last year? He has lumped together wages and salaries, and one can see that there is a difference. Have you any compilation of the member of personnel last year as against this year?

Dr. Willard: Yes, Mr. Chairman; the strengths in man-years are listed in each vote opposite the various items, and this gives you some detail. Then in the new format on page 18 you will find some additional, and perhaps a better, breakdown because it brings it together there. The little table on page 18 shows you for the years 1967-68 to 1969-70 the number of man-years by description of personnel, such as executives, and so forth.

Apparently on page 474 of the Blue Book there is also a summary which gives this kind of information by the main program groups.

[Interpretation]

dépenses de la campagne contre la cigarette et la documentation relative aux accidents, à la grippe, à l'hygiène du travail, à l'hygiène publique, à la protection contre les radiations et à la santé d'urgence. Voilà le genre de documentation que nous distribuons et qui relève du crédit n° 5 des Services d'hygiène.

Le président: Monsieur Montieth?

M. Monteith: Monsieur le président, les transports et communications qui figurent dans les prévisions budgétaires de 1969-1970 pour \$498,000 et qui représentaient en 1968-1969, \$418,000, ne pourraient-ils pas être réparti en détail, conformément diminué, comme le demande monsieur Otto. Les dépenses actuelles? Comment est-on arrivé au chiffre de \$418,000 pour 1968-1969? Comment expliquer l'augmentation de \$80,000 cette année?

Et la même chose pour les Service d'information.

Il me semble comme monsieur Osler l'a dit, que je ne dis pas qu'il faudrait procéder ainsi pour tous les crédits, mais il me semble que si on en prenait un ou deux, on pourrait en voir le détail et savoir pourquoi il en est ainsi maintenant.

Dr. Willard: Monsieur le président, je serais heureux de le faire. Vous avez déjà nommé deux ou trois secteurs, les transports et communications, l'information, et au chapitre du crédit n° 6, le matériel de laboratoire et ainsi de suite.

Mme MacInnis (Vancouver-Kingsway): Monsieur le président, j'aimerais aussi savoir si vous avez la compilation globale du nombre d'employés de cette année par rapport à l'année dernière. Il a réuni les salaires et on peut voir qu'il y a une différence. Avez-vous la compilation du nombre d'employés de l'an dernier à comparer à cette année?

Dr. Willard: Oui, les années-hommes sont énumérées dans chaque crédit en opposition aux divers chapitres, et cela nous donne quelques détails. Dans le nouveau rapport, à la page 18, vous trouverez des renseignements supplémentaires et vous auriez peut-être une meilleure répartition. Le petit tableau à la page 18 montre pour les années 1967-1968 à 1969-1970, le nombre d'années-hommes par description d'employés tels que les administrateurs et ainsi de suite.

Apparemment, il y a à la page 474 du Livre jaune un résumé qui donne le genre de renseignements selon les principaux groupes de

[Texte]

It brings the whole thing together in a summary fashion. You will note on page 474 that for 1969-70 the number of man-years shown is 7,771 and that of this total 810 will be in the Health Services Branch, which is the vote you are considering, and the new format gives you the description of how the 810 are employed. Is that helpful Mr. Chairman?

Mr. Haidasz: In the last line on page 258 of the Blue Book, Mr. Chairman, "Profession and Special Services" are shown as having gone up from \$74,300 last year to \$116,100. Could you break that down? Does this include additions to the environmental health and laboratory services studying air-pollution problems?

Mr. Watkinson: Mr. Chairman, this would only be in part. Certainly this has been provided for in the 1969-70 estimates which we are now looking at, but without going back and really breaking this down I cannot tell you at the moment where the major increase has occurred. But this is only one of several possibilities. There are other programs in the current year that would also involve "Professional and Special Services".

This is the use, as you know, of the outside consultant, the bringing together of groups of experts on this committee sitting in examination of the smoking and health program. We have mentioned at various times the bringing together of expert groups.

I have just had the additional information from the financial adviser that this provides for the anticipated provision, under the Canada Pension Plan, of consultants—regional physicians—who would assist in the examinations. This, again, would account in large part for this amount, I should think.

• 1645

Mr. Haidasz: I am particularly interested in what more is being done in the Environmental Health Directorate relative to air-pollution. Where could I find in the estimates how much money is being spent this year on the study of air-pollution?

Dr. Watkinson: It is shown on page 260, under "Laboratory and Advisory Services." But, again, to break this down we would have to come back later and give you the specific amounts. These are available. We can quickly put them together for you in that form.

Mr. Haidasz: And while you are doing that, sir, I would like to find out whether the Department's Environmental Health Directorate

[Interprétation]

programmes. Vous le verrez sous forme de résumé. A la page 474 de 1969-1970, le nombre d'années-hommes est de 7,771 dont 810 pour la Direction des services d'hygiène, le crédit qui vous intéresse. Dans le nouveau texte, vous voyez la ventilation de ces 810 années-hommes. Est-ce que cela vous est utile, monsieur le président?

M. Haidasz: A la dernière ligne de la page 258 du Livre bleu, il y a eu une augmentation de \$74,300 à \$116,100 au chapitre des "Services professionnels et spéciaux." Est-ce que cela est ventilé? Est-ce que cela comprend les services d'hygiène du milieu et de laboratoires qui étudient la pollution de l'air?

Dr. Watkinson: Monsieur le président, ce ne serait qu'en partie, car ce détail est prévu dans le budget de 1969-1970 que nous étudions actuellement. Mais sans vraiment revenir en arrière et le ventiler, je ne peux dire au juste où s'est produite la plus grosse augmentation. Ce n'est qu'une seule possibilité car il y a d'autres programmes au cours de cette année qui comprendraient aussi les «Services professionnels et spéciaux».

Comme vous le savez, c'est l'emploi des conseillers de l'extérieur, d'une réunion de groupes d'experts à ce Comité, qui s'occupent des risques causés par la cigarette. Nous avons souvent mentionné la réunion de groupes d'experts. Je viens tout juste de recevoir d'autres renseignements du conseiller financier qui me dit que cela a trait à la disposition prévue en vertu du Régime de pensions du Canada à l'égard des conseillers, médecins régionaux qui aideront aux examens. Cela contribuera en partie à l'augmentation je crois.

M. Haidasz: Ce qui m'intéresse particulièrement, c'est la Direction générale de l'hygiène du milieu par rapport à la pollution de l'air. Où pourrais-je trouver cela dans le budget? Combien d'argent dépensera-t-on cette année à cet égard?

Dr. Watkinson: Vous trouverez cela à la page 260, «Services consultatifs de laboratoires». Pour ventiler de chiffre, il nous faudra revenir plus tard et vous en donner les chiffres précis. Nous pourrions les réunir pour vous assez rapidement.

M. Haidasz: J'apprécierais aussi que vous m'indiquiez si la Direction générale de l'hygiène du milieu étudie actuellement un dispo-

[Text]

is studying any anti-pollution devices for automobiles?

Dr. Watkinson: Yes, sir; this matter has been under continuous study. To my knowledge, our senior consultant in air-pollution has involved himself very actively in this, particularly the aspect of assuring that they will meet Canadian environmental conditions.

As you perhaps know, there has been a review of the use of the devices in United States cars imported into Canada.

We have not at the moment set up the special kind of group that we propose will ultimately deal with the exhaust devices that perhaps should be recommended for use in Canada. Here we would be involved together with the Department of Transport because of their interest in accident safety, which, of course, cuts across the concern about air-pollution and the abatement of air-pollution. We anticipate that we will work rather closely with them and in fact with any other federal government department, or any industrial group in the country, which can assist in proposing the appropriate device for Canadian use.

Mr. Haidasz: Thank you.

Mr. Monteith: Mr. Chairman, Dr. Watkinson mentioned that this sum included an amount for regional consultants under the Canada Pension Plan. Just how do these consultants operate? What is their purpose?

Dr. Watkinson: Sir, at the moment the arrangement is not fully established, and conversations are proceeding with such groups as the Canadian Medical Association. We already have a number of regional consultants who have assisted for years with the Disabled Persons Allowance program. We would intend to use them to the maximum.

Mr. Monteith: This is under the disability clause?

Dr. Watkinson: That is as it has been in the past, yes.

Mr. Monteith: Yes, I realize that; but it would be under the disability clause of the CPP?

Dr. Watkinson: Oh, yes.

Dr. Willard: Mr. Chairman, it would be relative to the disability benefit which becomes payable January next and which we are starting to get ready for now.

[Interpretation]

stif antipollution pour automobiles.

Dr Watkinson: Oui, cette question fait l'objet d'une étude constante. A ma connaissance nos conseillers supérieurs, en matière de la pollution de l'air, participent activement à cette étude. On veut s'assurer que cela répondra aux conditions du milieu canadien. Comme vous le savez peut-être on a fait la révision de l'emploi des dispositifs sur les voitures américaines importées au Canada. Nous espérons former bientôt le groupe qui traitera des dispositifs contre les gaz d'échappement, qui devraient être utilisés au Canada. De concert avec le ministère des Transports, nous collaborerons à cette étude dans le domaine de la sécurité routière; qui va à l'entour de la pollution de l'air. Nous espérons collaborer étroitement avec eux et avec tout autre ministère ou autre groupe industriel du pays qui a des propositions à faire au sujet de dispositifs à employer au Canada.

M. Haidasz: Merci.

M. Monteith: Monsieur le président, le docteur Watkinson a mentionné que ce montant comprend les services de conseillers régionaux en vertu du Régime de pensions du Canada. Comment ces conseillers travaillent-ils? Quel est leur objectif?

Dr Watkinson: Pour l'assistant, cela n'est pas tout à fait établi. Nous avons encore des entretiens à ce sujet avec certains groupes comme la «Canadian Medical Association». Nous avons déjà un certain nombre de conseillers régionaux qui depuis des années travaillent pour le programme d'allocation des personnes handicapées. Nous espérons pouvoir nous prévaloir de leurs services au maximum.

M. Monteith: Au titre de l'invalidité?

Dr. Watkinson: Comme auparavant.

M. Monteith: Je me rends compte que c'est à ce titre, en vertu du Régime de pensions du Canada.

Dr Watkinson: Oh! oui.

Dr Willard: Cela aurait trait au allocations aux handicapés qui entrera en vigueur en janvier prochain et que nous commençons à préparer pour l'instant.

[Texte]

The Chairman: Are there any further questions on Vote 5? Shall Vote 5 stand?

Some hon. Members: Agreed.

Vote 5 stood.

The Chairman: At this point, if it is the wish of the Committee, we might adjourn and have a special meeting of the Steering Committee to consider how we are going to tackle the problem that has just been raised by three members. Or is it the wish of the Committee to continue discussing this?

I do not have to point out that we do not have any quorum and that we cannot vote. I am in the hands of the Committee.

Mr. Monteith: I think we should follow your suggestion, Mr. Chairman.

The Chairman: The meeting is adjourned, to the call of the Chair, on the estimates of the Department of National Health and Welfare. We will reconvene on the evening of Monday of April 21, for the presentation of the brief of the Canadian Tuberculosis and Respiratory Disease Association.

At 11 o'clock on Tuesday morning, we will consider Bill S-15 which was referred to the Committee by the House before Easter. Therefore, I would ask members to take a good look at, or at least read, Bill S-15. Thank you.

[Interprétation]

Le président: Y a-t-il d'autres questions au sujet du crédit n° 5? Le crédit 5 est-il réservé?

Des voix: Approuvé

Le crédit n° 5 est réservé.

Le président: Si le Comité le désire, nous pourrions fort bien ajourner et tenir une réunion spéciale du comité de direction pour établir au juste comment nous résoudrons le problème qui vient d'être soulevé par trois députés. Le comité désire-t-il poursuivre le débat? Je dois signaler que nous n'avons pas quorum et que nous ne pouvons voter.

Je m'en remets au Comité.

M. Monteith: Je pense que nous devrions suivre votre proposition, monsieur le président.

Le président: Par conséquent, la séance du Comité sur les prévisions budgétaires du ministère de la Santé nationale et du Bien-être social est levée jusqu'à prochaine convocation du président. Lundi le 21 avril, nous entendrons la présentation du mémoire de la «Canadian Tuberculosis and Respiratory Disease Association».

Mardi, à 11 heures, le Comité étudiera le Bill S-15 qui lui a été référé par la Chambre avant Pâques. Je demanderais aux députés d'étudier ou tout au moins de lire le Bill S-15. Merci.

OFFICIAL BILINGUAL ISSUE

FASCICULE BILINGUE OFFICIEL

HOUSE OF COMMONS

CHAMBRE DES COMMUNES

First Session

Première session de la

Twenty-eighth Parliament, 1968-69

vingt-huitième législature, 1968-1969

STANDING COMMITTEE

COMITÉ PERMANENT

ON

DE LA

HEALTH, WELFARE AND
SOCIAL AFFAIRS

SANTÉ, DU BIEN-ÊTRE SOCIAL
ET DES AFFAIRES SOCIALES

LIBRARY *Chairman*

M. Gaston Isabelle

Président

★ MAY 30 1969 ★
MINUTES OF PROCEEDINGS
AND EVIDENCE
UNIVERSITY OF TORONTO

PROCÈS-VERBAUX ET
TÉMOIGNAGES

No. 24

MONDAY, APRIL 21, 1969

LE LUNDI 21 AVRIL 1969

Respecting the subject-matter of

Bill C-39, An Act to amend the Broadcasting Act (cigarette advertising).

Bill C-45, An Act to restrain the use of Tobacco.

Bill C-53, An Act to amend the Food and Drugs Act.

Bill C-134, An Act to amend the Tobacco Restraint Act.

Bill C-137, An Act to amend the Broadcasting Act (Prohibition of cigarette advertising).

Bill C-147, An Act to control the tar content and nicotine level of cigarettes.

Concernant la question de fond des

Bill C-39, Loi modifiant la Loi sur la radio-diffusion (Annonces de cigarettes).

Bill C-45, Loi visant à restreindre l'usage du tabac.

Bill C-53, Loi modifiant la Loi des aliments et drogues.

Bill C-134, Loi modifiant la Loi sur la répression de l'usage du tabac chez les adolescents.

Bill C-137, Loi modifiant la Loi sur la radio-diffusion (Interdiction de réclames de cigarettes).

Bill C-147, Loi ayant pour objet de contrôler la teneur en goudron et en nicotine des cigarettes.

WITNESSES—TÉMOINS

(See Minutes of Proceedings)

(Voir Procès-verbaux)

THE QUEEN'S PRINTER, OTTAWA, 1969
L'IMPRIMEUR DE LA REINE, OTTAWA, 1969

STANDING COMMITTEE ON
HEALTH, WELFARE AND
SOCIAL AFFAIRS

Chairman
Vice-Chairman

and Messrs.

Forget,
Fortin,
Foster,
Gendron,
Godin,
Haidasz,
Howe,

M. Gaston Isabelle
Mr. Steve Otto

¹ Knowles (*Norfolk-Hal-
dimand*),
Mrs. MacInnis (M^{me}),
² Mather,
McBride,
Osler,
Paproski,

(Quorum 11)

La secrétaire du Comité

Gabrielle Savard

Clerk of the Committee

COMITÉ PERMANENT DE
LA SANTÉ, DU BIEN-ÊTRE SOCIAL
ET DES AFFAIRES SOCIALES

Président
Vice-président

et Messieurs

Ritchie,
Robinson,
Rochon,
Rynard,
Yanakis—(20).

Pursuant to S.O. 65(4)(b)

¹ Mr. Knowles (*Norfolk-Hal-
dimand*) re-
placed Mr. Monteith on April 18.

² Mr. Mather replaced Mr. Knowles
(*Winnipeg-North-Centre*) on April 21.

Conformément à l'article 65(4)(b) du
Règlement

¹ M. Knowles (*Norfolk-Hal-
dimand*)
remplace M. Monteith le 18 avril.

² M. Mather remplace M. Knowles (*Win-
nipeg-Nord-Centre*) le 21 avril.

Text]

MINUTES OF PROCEEDINGS

MONDAY, April 21, 1969.
(29)

The Standing Committee on Health, Welfare and Social Affairs met this day at 8.15 o'clock p.m. The Chairman, Mr. Gaston Isabelle, presided.

Members present: Mrs. MacInnis and Messrs. Forget, Foster, Gendron, Haidasz, Howe, Isabelle, Knowles (*Norfolk-Haldimand*), Mather, Osler, Ritchie, Rynard, Yanakis—(13).

Other Members present: Messrs. Guilbault and Thomas (*Maisonneuve*).

Witnesses: Representing the Canadian Tuberculosis and Respiratory Disease Association: Dr. C. W. L. Jeanes, of Ottawa, Executive Secretary; Mr. F. M. Bradley, of Cornwall, Treasurer; and Miss Anne Grant, of Ottawa, Health Education Consultant.

The Committee resumed consideration of the subject-matter of Bills C-39, C-45, C-53, C-134, C-137 and C-147.

The Chairman introduced the witnesses. Dr. Jeanes read a preliminary statement.

On motion of Mr. Mather,

Agreed,—That the brief presented by the Canadian Tuberculosis and Respiratory Disease Association be printed as an appendix to the Committee's Minutes of Proceedings and Evidence. (See Appendix I)

Dr. Jeanes, Miss Grant and Mr. Bradley answered the questions of the Members.

At 9.35 o'clock p.m., the Committee adjourned to 11.00 o'clock a.m. Tuesday, April 22, for the consideration of Bill S-15.

[Texte]

PROCÈS-VERBAL

Le LUNDI 21 avril 1969
(29)

Le Comité permanent de la Santé, du Bien-être social et des Affaires sociales se réunit aujourd'hui à 8 h. 15 du soir, sous la présidence de M. Gaston Isabelle.

Présents: M^{me} MacInnis, MM. Forget, Foster, Gendron, Haidasz, Howe, Isabelle, Knowles (*Norfolk-Haldimand*), Mather, Osler, Ritchie, Rynard, Yanakis—(13).

Autres députés présents: MM. Guilbault et Thomas (*Maisonneuve*).

Témoins: Pour représenter l'Association canadienne contre la tuberculose et les maladies respiratoires: D^r C. W. L. Jeanes, d'Ottawa, secrétaire exécutif; M. F. M. Bradley, de Cornwall, trésorier; M^{lle} Anne Grant, d'Ottawa, conseillère en éducation sanitaire.

Le Comité reprend l'étude de la teneur des bills C-39, C-45, C-53, C-134, C-137, et C-147.

Le Président présente les témoins.

Le docteur Jeanes lit un exposé préliminaire.

Sur la proposition de M. Mather,

Il est décidé, Que le mémoire de l'Association canadienne contre la tuberculose et les maladies respiratoires soit imprimé en appendice au compte rendu d'aujourd'hui (voir appendice I).

D^r Jeanes, M^{lle} Grant et M. Bradley répondent aux questions des membres du comité.

A 9 h. 35 du soir le Comité s'ajourne à 11 h. du matin, mardi le 22 avril pour étudier le bill S-15.

La secrétaire du Comité,

Gabrielle Savard.

Clerk of the Committee.

Texte]

EVIDENCE

(Recorded by Electronic Apparatus)

Monday, April 21, 1969

• 2015

The Chairman: Lady and gentlemen, we are now resuming consideration of the subject matter of the bills on smoking.

It is my pleasure to introduce members of the Canadian Tuberculosis and Respiratory Disease Association, whose brief is already in your hands. To my right is Dr. C.W.L. Jeanes, Mr. Bradley and Miss Anne Grant, Health Education Consultant. I shall now ask Dr. Jeanes to proceed with his opening statement.

Dr. C. W. L. Jeanes (Executive Secretary, Canadian Tuberculosis and Respiratory Disease Association, Ottawa): Mr. Chairman and members of the Committee, it is a privilege for the Canadian Tuberculosis and Respiratory Disease Association to make this presentation to you this evening. Our president is very sorry he cannot be here, but he lives in British Columbia. We are a small delegation, but we do represent our organization as a whole. Our brief has been prepared after very careful consultation with our provincial and local associations all across Canada.

I would like very briefly to tell you that our organization was founded in 1900 to combat tuberculosis. When we started our work in 1900, there were no organized tuberculosis services. The aim and object of the Association was to interest governments in providing tuberculosis services and we did this in a spirit of co-operation.

In the course of the succeeding 68 years, Canada has achieved perhaps the greatest record of control of tuberculosis of any country in the world.

We are sure this has been achieved because of this great partnership that developed between governments on the one hand and the voluntary associations on the other. We both had as our great concern the greatest scourge of mankind, tuberculosis. In the last 10 years we have looked with great relief on the fact that tuberculosis has been slowly brought under control in Canada. The goal of the Association, the complete control of

[Interprétation]

TÉMOIGNAGES

(Enregistrement électronique)

Le lundi 21 avril 1969

Le président: Mesdames et messieurs, nous reprenons l'étude du projet de loi sur la cigarette. J'ai le plaisir de vous présenter des membres de l'Association canadienne contre la tuberculose et les maladies respiratoires. On vous a déjà distribué copie du mémoire qu'ils nous présentent aujourd'hui.

J'ai à ma droite, le Dr Jeanes, M. Bradley, et M^{lle} Ann Grant, conseillère en éducation sanitaire.

Le Dr Jeanes fera maintenant la déclaration d'ouverture.

Dr C. W. L. Jeanes (secrétaire administratif, Association canadienne contre la tuberculose et les maladies respiratoires, Ottawa): Monsieur le président, messieurs les députés, c'est un privilège pour l'Association canadienne contre la tuberculose et les maladies respiratoires de vous présenter cet exposé. Notre président regrette de n'être pas ici, il habite la Colombie-Britannique. Nous sommes une petite délégation mais nous représentons l'ensemble de l'Association. Notre mémoire a été préparé après de sérieuses consultations avec nos associations locales et provinciales à travers tout le Canada.

Je voudrais rapidement vous dire que notre association a été fondée en 1900 afin de combattre la tuberculose. Lorsque nous avons commencé nos travaux en 1900, aucun service organisé de lutte contre la tuberculose n'existait. L'objectif de l'Association était d'amener les gouvernements à fournir des services contre la tuberculose et nous l'avons fait dans un esprit de collaboration.

Au cours des 68 années qui ont suivi, le Canada a réussi à battre presque tous les records de lutte contre la tuberculose et nous sommes certains qu'une telle réussite est le résultat de l'esprit de collaboration qui s'est créé entre les gouvernements et les organisations bénévoles. Notre souci mutuel était de libérer l'humanité de la tuberculose. C'est avec beaucoup de soulagement que nous voyons, depuis 10 ans, s'exercer un contrôle de plus en plus serré de la tuberculose au Canada. L'objectif de notre Association, c'est-à-dire, le contrôle complet de la tubercu-

[Text]

tuberculosis, has not yet been brought completely to fruition, and we feel we still have a lot of work to do in the tuberculosis field.

While we have been making progress in this way, we have been faced with perhaps a greater tragedy. As tuberculosis has been diminishing, another series of very serious maladies of the lungs have been occurring with rapidly increasing frequency. I refer now to bronchitis, emphysema and lung cancer. These are the diseases that particularly concern our organization.

Because of this rapid increase in these diseases, the Association has turned its attention to the study of them.

For the past five years we have been looking very carefully into the evidence of the relationship between cigarette smoking and these lung diseases. I feel I should, without going into any details, just refer to the main points of evidence, the report of the Royal College of Physicians of Great Britain; the report of the U.S. Surgeon-General and the report of the Canadian Veterans Administration, which studied 92,000 veterans.

There have been, of course, many other reports on the relationship between cigarette smoking and lung disease, but these three are the principal reports. At our own national meetings of the Tuberculosis Association and our medical section, the Canadian Thoracic Society, we have had many scientific papers presented on the relationship of cigarette smoking and lung disease. Therefore, we now feel that the relationship between cigarette smoking and lung disease is irrefutable. Smoking is hazardous to health and is a vital factor in the great increase in bronchitis, emphysema and lung cancer.

The Association has nailed its colours to the mast, both the parent organization, the Tuberculosis Association and our medical section, the Canadian Thoracic Society in two resolutions which have been passed at annual meetings, and these resolutions are clearly set out on page 1 of the brief in front of you, so I will not read them again.

Our Ontario Association as part of our organization, a constituent member, also prepared a similar brief which they presented direct to the Minister of National Health and Welfare about six months ago. Because smoking is a causative factor in a number of serious medical conditions apart from lung disease, we know that our sister organizations

[Interpretation]

lose n'a pas encore été atteint, et nous croyons avoir encore beaucoup de travail à faire dans ce domaine.

Tout au long des progrès accomplis dans la lutte anti-tuberculeuse, nous avons constaté l'ampleur que prenaient d'autres maladies très graves des poumons. Je parle ici de la bronchite, de l'emphysème et du cancer du poulmon. Et ce sont là les maladies qui intéressent avant tout notre Association. L'augmentation rapide de ces maladies nous a incité à mettre l'étude de ces maladies à notre programme.

Au cours des cinq dernières années, nous avons examiné avec le plus grand soin les preuves de la relation entre l'usage du tabac et les maladies du poulmon. Sans entrer dans les détails, je pourrais simplement expliquer quelles sont les principales preuves que nous avons à l'appui. Nous avons le rapport du Royal College of Physicians of Great Britain, celui du chirurgien général des États-Unis et celui du ministère des affaires des anciens combattants, résultat d'une étude portant sur 92,000 anciens combattants au Canada. Bien sûr, il y a d'autres rapports parlant des preuves de relation entre l'usage du tabac et les maladies du poulmon mais j'ai nommé les trois principaux.

Au cours des rencontres nationales de notre Association et de notre section médicale, la Canadian Thoracic Society, on a présenté différents documents scientifiques traitant de la relation entre l'usage de la cigarette et les maladies du poulmon. C'est pourquoi nous croyons aujourd'hui que la relation entre l'usage de la cigarette et les maladies du poulmon est irréfutable. La cigarette est dangereuse pour la santé et c'est le principal facteur de l'augmentation très grande des bronchites chroniques, des emphysèmes et des cancers du poulmon.

L'Association antituberculeuse et la Canadian Thoracic Society ont pris position d'une manière très nette par l'adoption de deux résolutions présentées à leur réunion annuelle. Vous trouverez le texte de ces deux résolutions à la page 1 du document dont vous êtes saisis. Je m'abstiendrai donc d'en faire lecture.

L'Association de l'Ontario, membre de notre association, a également présenté un mémoire semblable directement au ministre de la Santé nationale et du Bien-être social il y a environ six mois.

Comme l'usage du tabac est un facteur causal dans plusieurs autres maladies à part les maladies du poulmon, nous savons que d'au-

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concerned with lung cancer, heart disease and diabetes will probably be presenting briefs to you on these topics. We therefore propose to deal only with the particular diseases that are of concern to us, chronic bronchitis and emphysema, these long-term, chronic, crippling diseases.

The statistical facts are that in 1967 there were 1,700 deaths from bronchitis and emphysema in Canada. That is a 50 per cent increase in three years. If you add up the deaths from all chronic lung diseases, these numbered 700 in 1950 and 3,700 in 1967.

Perhaps there is an argument that this increase has been produced by better diagnostic methods, or by a greater awareness, but we are quite convinced that although these may be small factors in this increase these figures do represent a very true and real increase in deaths from these lung conditions.

The rising death rate has not come on suddenly; it has been occurring over the course of many years. If one studies charts of deaths, one can see very plainly how these have gone up in this sort of fashion over the course of 15 or 20 years. This is the typical mortality chart of chronic respiratory disease.

The tragedy, of course, occurs long before the individual dies, because an individual with emphysema may become a respiratory cripple for many years before he unfortunately dies from the condition; and for many years he is a misery to himself and his family.

My Association views the present situation of the rapidly increasing incidence of chronic chest disease with deep concern, and we do indict the cigarette as the principal factor in this man-made epidemic. We feel that our organization has a great responsibility to make the public aware of the hazards of smoking. Unfortunately, this seems to be a very difficult thing to do and it is sometimes impossible to help the heavy smokers to stop. We have tried many devices and methods to help heavy smokers to stop, but I have to admit to you that so far we have not discovered the magic way of doing this.

We therefore feel that our greatest hope is in preventing people, particularly young people, from starting to smoke. If only we knew why they started. We do have ideas on this. Certainly the power of suggestion is a very

[Interprétation]

tres associations qui s'occupent du cancer du poulmon, des maladies cardiaques et du diabète présenteront probablement des mémoires sur ce sujet. Par conséquent, nous avons l'intention de traiter seulement des maladies qui nous intéressent directement, c'est-à-dire la bronchite chronique et l'emphysème, ces maladies chroniques qui rendent leurs victimes invalides.

Les données statistiques sont les suivantes: en 1967, il y a eu, au Canada, 1,700 morts causées par la bronchite et l'emphysème. C'est une augmentation de 50 p. 100 en trois ans. Si vous ajoutez toutes les morts dues à des maladies chroniques vous en aviez 700 en 1950 et 3,700 cette année.

Cette augmentation est peut-être attribuable à des méthodes de diagnostic plus perfectionnées ou à une plus grande conscience du fait. Mais de toute façon, nous trouvons que ces chiffres accusent certainement une augmentation réelle du taux de mortalité dû à des maladies pulmonaires, et cette augmentation de mortalité ne s'est pas produite de façon subite mais s'étend sur plusieurs années. Par exemple, vous avez des tableaux de mortalité; si vous les consultez, vous voyez qu'il y a une courbe ascendante comme celle-ci qui s'étend sur une vingtaine d'années ou une quinzaine d'années. Ici ce sont les maladies respiratoires chroniques.

L'élément tragique, bien entendu, se présente bien avant la mort de l'individu, parce qu'un individu qui souffre d'emphysème peut devenir invalide sur le plan respiratoire pendant bien des années avant d'en mourir éventuellement, ce qui fait que sa vie est épouvantable ainsi que celle de sa famille.

Notre association considère que la situation actuelle, soit la hausse rapide du taux d'incidence des maladies respiratoires chroniques, est très grave, et nous estimons que c'est la cigarette qui est le principal facteur de cette épidémie créée par l'homme.

Notre objectif est de rendre le public conscient des dangers de la cigarette.

Malheureusement, il semble que ce soit un objectif très difficile à réaliser, et parfois même impossible. Il est parfois impossible d'empêcher les gros fumeurs d'abandonner la cigarette. Nous avons essayé toutes sortes de méthodes, mais je dois vous avouer que jusqu'ici nous n'avons rien découvert, nous n'avons pas découvert la façon magique de les y amener.

Par conséquent, évidemment, notre plus grand espoir est d'empêcher tous les jeunes de commencer à fumer dès le début. Si nous savions au moins pourquoi ils commencent. Maintenant, évidemment, nous avons certai-

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strong factor in why young people in particular start to smoke.

By copying others they appear to be grown up and sophisticated, and the image is certainly built up in a great deal of our every day life that to smoke is "big", and that if you smoke you are with the "in" crowd.

This attitude is undoubtedly brought about by the power of advertising, and particularly by television which is viewed so much by children. We can almost call this not cigarette advertising but education to smoke.

There is plenty of evidence that when children are indoctrinated before they arrive at school age it is extremely difficult in anything, to alter the impressions gained in these formative years.

At present in any home with television or radio a child learns from babyhood to associate cigarette-smoking with glamorous youth, beautiful scenery, luxurious furniture, expensive cars, thrilling sports—in short, anything that is pleasant in the world of adults. Thus, long before the child can understand that cigarette-smoking is harmful he has been conditioned to associate it with these conditions of pleasure, contentment and prosperity.

We therefore feel, Mr. Chairman, that the advertising of cigarettes, particularly in the context that I have tried to outline, is one of the very difficult factors that we have to fight against.

We are particularly pleased to notice that some of the great personalities on television, Mr. Earl Cameron, Mr. Stanley Burke and Mr. Percy Saltzman, do not smoke on camera. If only we could persuade other public-spirited individuals to adopt this attitude.

We are very strongly against the promotional devices such as free gifts and cash prizes that are used so extensively by tobacco companies, and we feel that these should be made illegal.

We also feel that consideration should be given to making it a requirement that tobacco companies print a warning on cigarette packages to the effect that to smoke the contents may be injurious to health. This is done in the United States, and we feel that perhaps some of the people do not read what is on the package. Therefore, we have an idea that it might perhaps bring the message home more if it were possible for a suitable red line to be painted on a cigarette to show when the individual has smoked enough of it to absorb 10 milligrams of tar. Therefore, Mr. Chair-

[Interpretation]

nes idées là-dessus; le pouvoir de suggestion, par exemple, est un des principaux facteurs qui portent les jeunes à commencer à fumer.

En fumant, le jeune croit avoir atteint un certain degré de maturité et d'élégance. Il a l'impression d'être dans le vent en suivant l'exemple des adultes. Naturellement, ce qui aide beaucoup aussi, c'est la publicité, surtout la publicité à la télévision, et les enfants regardent beaucoup la télévision. On pourrait presque dire non pas que c'est de la publicité pour la cigarette, mais bien plutôt une formation à la cigarette. On a d'amples preuves à l'appui du fait que lorsque nos enfants sont endoctrinés avant d'arriver à l'école, c'est très difficile de modifier les impressions qu'ils ont reçues à l'âge préscolaire.

Par exemple, avec la télévision, la radio ou les deux à la maison, un enfant en apprend long sur la façon dont il peut associer la cigarette avec toutes sortes de scènes agréables, le luxe, les choses qui coûtent cher, les sports enivrants, et tout ce qui est intéressant dans le monde des adultes, de sorte que l'enfant, avant de pouvoir se rendre compte des dangers de la cigarette, est déjà conditionné à l'associer avec l'idée de plaisir, de contentement et de prospérité.

Donc, monsieur le président, nous estimons que la publicité sur la cigarette, surtout dans le contexte que j'ai essayé d'énoncer, est l'un des facteurs difficiles contre lesquels il nous faut lutter.

Nous sommes particulièrement heureux de voir que certaines des grandes personnalités de la télévision, M. Herb Cameron, M. Stanley Burk et M. Percy Saltzman ne fument pas devant la caméra, et nous voudrions tout simplement essayer de convaincre les autres personnes qui sont très connues de faire de même.

Nous pourrions, par exemple, interdire les cadeaux et les prix en argent qui sont offerts par les compagnies de tabac. Nous estimons que ceci devrait être illégal.

Nous trouvons aussi qu'il faudrait songer à exiger que les compagnies de tabac impriment une rubrique sur les paquets de cigarettes portant que si on fume le contenu de ce paquet, on peut nuire à sa santé. Ceci se fait aux États-Unis. Peut-être que certains ne lisent pas ce qu'il y a sur le paquet de cigarettes; alors nous pensons que l'idée suivante aurait une force de persuasion beaucoup plus grande: il s'agirait tout simplement de marquer chaque cigarette d'un trait rouge pour indiquer que le fumeur de la cigarette en question, rendu à ce point, a absorbé plus de

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ian, in summary and conclusion of the brief we have presented to you, we would like to recommend the following:

That all advertising of cigarettes on radio and television be banned.

That CBC and CTV urge their staff not to make on camera.

That promotional devices such as free gifts and cash prizes used by tobacco companies be made illegal.

That consideration be given to making it a requirement that tobacco companies print a warning on cigarette packages to the effect that to smoke the contents may be injurious to health.

My organization, sir, as I indicated at the beginning has worked on one aspect of a health programme that we have not controlled completely, but we are well on the way to doing so.

We are now deeply concerned about this increasing, man-made epidemic of chronic respiratory disease, and we are most anxious to work with our sister voluntary health organizations and with the government, the Department of National Health and Welfare, in what we feel is an extremely serious situation.

The Chairman: Thank you, Dr. Jeanes.

Before we proceed with the discussion, is it the wish of the Committee that the brief be printed as an appendix to the Committee's minutes of proceedings and evidence?

Some hon. Members: Agreed.

The Chairman: Mr. Mather?

Mr. Mather: Mr. Chairman, to start with I would like to compliment the delegation not only for further buttressing in detail the case against cigarette disease but also for spelling out what seem to me, as a member of the Committee, some interesting and practical means of correcting the situation.

I have two or three questions. I noticed that Dr. Jeanes put press on the need to do what can be done to prevent young people, or children, from starting to smoke. I think that is also a very sensible idea.

As he probably knows, the Home and School organization and the PTA have this year started what seems likely to be a major effort in the same direction. Would your Association be happy, or willing, to co-operate—perhaps you are already doing so—in

[Interprétation]

10 milligrammes de nicotine. En résumé, voici certaines recommandations que je vous lis maintenant:

Que toute publicité pour la cigarette à la radio et à la télévision soit bannie.

Que Radio-Canada et CTV interdisent à leur personnel de fumer devant les caméras.

Que les trucs promotionnels, tels les cadeaux gratuits et les prix en argent, utilisés par les compagnies de tabac, soient illégaux.

Que l'on songe à exiger que les compagnies de tabac impriment un avertissement sur les paquets de cigarettes portant que fumer le contenu du paquet peut faire du tort à la santé.

Monsieur le président, comme je vous l'ai mentionné au début, notre association a longtemps travaillé à un aspect du programme de santé que nous n'avons pas pu mener à bonne fin jusqu'ici, mais nous avons bon espoir de le faire.

Nous voulons diminuer les épidémies créées par l'homme, les maladies respiratoires chroniques et nous travaillons de pair avec d'autres organismes bénévoles et avec le ministère de la Santé nationale et du Bien-être social du gouvernement fédéral pour résoudre une situation que nous considérons extrêmement dangereuse.

Le président: Merci. Maintenant, avant de passer plus loin, est-ce que les membres du Comité veulent que l'on imprime en annexe au compte rendu des procès-verbaux le mémoire présenté par cette association. Nous passons maintenant aux questions. Monsieur Mather.

Des voix: D'accord.

Le président: Monsieur Mather.

M. Mather: Monsieur le président, pour commencer, j'aimerais féliciter la délégation non seulement de nous avoir présenté son point de vue sur les maladies dues au tabac mais aussi de nous avoir suggéré certaines méthodes pratiques et sensées pour remédier à la situation. Simplement une ou deux questions.

J'ai remarqué que le docteur Jeanes insiste sur la nécessité de faire son possible pour empêcher les enfants de commencer à fumer. Je trouve que c'est une idée très sensée et comme vous l'avez probablement remarqué, les associations parents-enseignants ont commencé à faire des efforts dans le même sens. Est-ce que votre association serait heureuse ou serait disposée à coopérer, si elle ne le fait pas déjà, à ces efforts des associations parents-enseignants dans les écoles pour

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their effort to help young people not to start cigarette smoking?

Dr. Jeanes: Thank you, sir. My organization has made a certain amount of our literature available to the Home and School organization, and they have asked me to serve on their national advisory board on this topic. We were very pleased to co-operate with the organization in this way.

Mr. Mather: One of the recommendations of your Association is that all advertising of cigarettes on radio and television be banned. Have you considered whether this might be more practically, or wisely, brought about by an immediate ban, or by phasing out such advertising over a period of two or three years?

Dr. Jeanes: I think this is a very difficult question, sir. Perhaps you would allow me a minute, and then we could ask my Director of Health Education for her opinion.

I think it would be very difficult, and perhaps a traumatic shock, immediately to introduce a complete ban.

I have been very interested in what they have done in Britain, which is to disallow tobacco advertising before 9 o'clock in the evening. This means you are hopefully removing it from the eyes of the younger children. I think it would be, as I say, very difficult to stop it immediately, much as we would like to.

Would you allow Miss Grant to comment on this?

Miss Anne Grant (Educational Consultant, Canadian TB-RD Association): Thank you, Mr. Chairman. Of course, I feel strongly as a former school teacher and I would like to ban it immediately. However, I know this is impractical. However, if they would phase it out gradually I would be very happy. Let us say you do not have it until after the ten o'clock news; then I would hope that pre-school children would not see it. I think it is most important that if possible you keep this from children. People do not understand too well what happens in the way of education before a child goes to school. The attitudes the child gets then are very hard to eradicate. People are always saying what schools should do. Schools have a very poor chance of getting rid of something unless they get the children themselves interested. They have a poor chance of digging out things from a child's subconscious. Even if they stopped before nine or ten o'clock, preferably ten o'clock at night, I would be most happy.

[Interpretation]

empêcher les jeunes ou les dissuader de commencer à fumer la cigarette?

M. Jeanes: Nous avons publié pas mal de documentation pour les familles et les écoles. Je suis aussi membre d'un conseil consultatif, nous sommes très heureux de collaborer avec ces organismes.

M. Mather: Une autre question. Vous recommandez, entre autres, que toute la publicité sur la cigarette à la télévision et à la radio soit bannie. Avez-vous songé, vous êtes-vous demandé plutôt, si cela devrait se faire d'un seul coup ou encore si on devrait diminuer la publicité sur une période de deux ou trois ans.

M. Jeanes: Je pense que c'est une question très difficile. Peut-être m'accorderez-vous un instant de consultation avec ma Directrice de l'enseignement de la santé pour lui demander son opinion à ce sujet? Je crois qu'il serait très difficile, et peut-être même traumatique, que de bannir toute publicité d'un seul coup.

En Grande-Bretagne, c'est très intéressant ce qu'on a fait. Par exemple, il n'y a pas de publicité sur la cigarette avant 9 heures du soir donc les jeunes enfants ne la voient pas. Donc, les jeunes enfants heureusement ne la voient pas. Comme je l'ai dit il serait très difficile d'arrêter d'un seul coup même si c'est ce que nous aimerions. Pourriez-vous permettre à M^{lle} Grant de donner son opinion à ce sujet?

Mlle Anne Grant (consultante en éducation (Canadian TB-RD Association)): Merci, monsieur le président. Naturellement comme je suis une ancienne enseignante, j'ai des opinions très arrêtées à ce sujet et je voudrais bannir cela tout de suite. Mais je sais que cela n'est pas possible. Cependant, si on le défendait graduellement, je serais fort heureuse. Par exemple, s'il n'y en avait pas avant les nouvelles de 10 heures; alors, j'espérerais que les enfants de l'âge de la maternelle ne verraient pas cette publicité. Je crois qu'il est très important que, si possible, les enfants n'en entendent pas parler. Les gens ne comprennent pas très bien ce qui se passe au point de vue éducatif, avant que l'enfant aille à l'école. Les attitudes qu'un enfant acquiert alors sont très difficiles à éliminer. Les gens disent toujours que l'école a bien peu de chance de changer des attitudes à moins qu'elle n'arrive à y intéresser les enfants eux-mêmes. L'école a de la difficulté à retirer des choses du subconscient de l'enfant. Même s'il n'y avait pas de publicité avant neuf ou dix heures, de

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Mr. Mather: That would be in your view a start in the right direction?

Miss Grant: Yes, that would be a start.

Mr. Mather: I notice your recommendation on that says that advertising of cigarettes on radio and television should be banned. There are some people who argue that to ban advertising in one medium might be unfair to that medium if it is permitted, say, in the printed form. Have you given thought to that situation?

Miss Grant: I was not thinking so much of that. The thing is that small children pay very little attention to magazines and radio. If it is not in the comics they do not see it so far as the printed word is concerned. I am just thinking of the children. Radio, and particularly television, is their medium.

Mr. Mather: Your recommendation also in that consideration should be given to requiring tobacco companies to print a warning on cigarette packages to the effect that to smoke the contents may be injurious to health. In that connection I have a news report here of April 17 from Washington, with which you are probably familiar, which says that the United States Surgeon General urged Congress on April 16 to strengthen the warnings printed on cigarette packages to cite the dangers of death by cancer. He also asked that the warnings be extended to all cigarette advertising.

Dr. W. H. Stewart stated that the warning now required—as you say, they have a warning—is weak but he stopped short of asking for an outright ban on all cigarettes advertising on TV as proposed by the Federal Communications Commission. Dr. Stewart testified before the Congress Commerce Committee which is looking into the Federal Communications Commission contention of prohibiting cigarette commercials on television. “Caution: Cigarette smoking may be hazardous to your health,” is the warning currently required on all cigarette packages but Dr. Stewart said that this was inadequate. He suggested that it be strengthened to say: “Cigarette smoking is dangerous to health and may cause death from cancer and other diseases.”

Dr. Stewart also told the Committee that cigarette advertising should be required to state the tar and nicotine content. My question is: do you agree with the general propos-

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préférence avant 10 heures du soir, j'en serais très heureuse.

M. Mather: A votre avis, ce serait donc un pas dans la bonne voie?

Mlle Grant: Oui, ce serait un début.

M. Mather: Je remarque votre recommandation qui dit que la publicité sur les cigarettes à la radio et à la télévision devrait être bannie. Il y a des gens qui prétendent que si on bannit la publicité dans un médium, ce ne serait pas juste si on peut faire de la publicité disons sous la forme imprimée. Avez-vous songé à cela?

Mlle Grant: Je ne pensais pas tellement à cela. Le fait est que les jeunes enfants s'occupent très peu des revues et de la radio. Si ce n'est pas dans les bandes dessinées ils s'occupent peu du mot imprimé. Je ne pense qu'aux enfants. La radio et surtout la télévision est ce qui les intéressent.

M. Mather: Vous recommandez aussi qu'on exige que les compagnies de tabac impriment un avertissement sur les paquets de cigarettes disant que la cigarette nuit à la santé. A ce sujet, j'ai ici un article de journal du 17 avril qui vient de Washington, dont vous avez peut-être entendu parler, qui dit que le chirurgien général des États-Unis a demandé expressément au Congrès le 16 avril, de renforcer les avertissements imprimés sur les paquets de cigarettes pour en indiquer le danger de mort par le cancer. Il a aussi demandé que ces avertissements s'étendent à toute la publicité sur les cigarettes.

Le docteur W. H. Stewart a déclaré que l'avertissement qui existe, comme vous dites, est faible. Mais il n'a pas demandé le bannissement complet de la publicité sur la cigarette à la télévision comme l'avait proposé la Commission fédérale sur les communications. Docteur Stewart a témoigné devant le Comité sur le commerce du Congrès qui étudie l'opinion de la Commission fédérale sur les communications qui veut interdire les commerciaux sur cigarettes à la télévision. L'avertissement qui dit que la cigarette peut nuire à la santé, est l'avertissement requis aujourd'hui sur tous les paquets de cigarettes, mais le Docteur Stewart dit que c'est insuffisant. Il a suggéré que cet avertissement devrait être plus précis et dire: la cigarette est dangereuse pour la santé et peut entraîner la mort à la suite d'un cancer et autres maladies.

Le docteur Stewart a aussi dit au Comité que dans la publicité sur la cigarette, on devrait en donner le contenu en goudron et en nicotine. Voici la question que je pose:

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al or ideas put forward by the Surgeon General of the United States?

Dr. Jeanes: Yes; I think the Surgeon General is a most authoritative individual who has a great deal of scientific evidence that has been produced by his department. I know that when he makes a statement like this these are very carefully considered opinions and I would agree most wholeheartedly with what he recommends.

Mr. Mather: Thank you. Those are my questions, Mr. Chairman.

Mr. Howe: Mr. Chairman, I have a few questions for the witness in connection with this brief. Yours is a long and very honourable association, I understand, from your introduction. Are you a voluntary organization?

Dr. Jeanes: Yes, sir.

Mr. Howe: And you are supported by?

Dr. Jeanes: By the Christmas seal campaign.

Mr. Howe: I would say you have done a remarkable job in the control of tuberculosis and we do congratulate your organization on that.

In one of your statements you mentioned that cigarettes are a man-made hazard. I was reading an article the other day by Dr. Jel-nick in connection with this and he mentioned polycyclic hydrocarbons, and that they were found in cigarette smoke, diesel fumes, barbecue smoke and air pollution in general. Has your organization made a study of the effects of air pollution in, say, the City of Ottawa or the City of Montreal? The other day there was a news broadcast concerning, I forgot how many, thousands of tons of pollutants that are spewed out into the air by cars in Montreal every day. Has your organization made any check of this and its effect on the causes of respiratory diseases?

Dr. Jeanes: No, sir. In a voluntary health organization such as ours, we are not engaged specifically in research. Although we support research into a number of things in this particular field, we rather sift and study the evidence of work done by authorities in other places. We are certainly extremely interested in and concerned about this question of air pollution and we have studied the air pollution figures for cities in Canada and the United States and in Europe where, of course, the air pollution figures are very much higher.

[Interpretation]

Êtes-vous d'accord avec cette proposition générale ou les idées présentées par le Chirurgien-général des États-Unis?

Dr. Jeanes: Oui, je crois que le Chirurgien-général est un individu qui est en mesure de présenter des preuves scientifiques qui ont été faites par son ministère. Je sais que lorsqu'il fait une déclaration de ce genre, ce sont des opinions qu'il a mûrement réfléchies, et je suis tout à fait d'accord avec ce qu'il recommande.

M. Mather: Je vous remercie. Ce sont mes questions, Monsieur le Président.

M. Howe: Monsieur le président, j'ai quelques questions à poser au témoin, au sujet du mémoire présenté. Votre association existe depuis longtemps et est fort honorable d'après votre introduction, si je comprends bien. C'est une organisation volontaire, n'est-ce pas?

Dr. Jeanes: Oui, monsieur.

M. Howe: Et vous avez l'appui de qui?

Dr. Jeanes: De la campagne des timbres de Noël.

M. Howe: Je dois dire que vous avez fait un travail remarquable pour le contrôle de la tuberculose et je félicite votre organisme à cet égard. Dans une de vos déclarations vous avez mentionné que la cigarette est un risque fabriqué par la main de l'homme. Je lisais l'autre jour un article du Dr. Jelnick à ce sujet et il a mentionné que certains hydrocarbures polycycliques se retrouvent dans la fumée de cigarette, dans la fumée des moteurs diesel, dans celle des barbecues et dans l'air pollué en général. Est-ce que votre organisme a fait des études sur les effets de la pollution de l'air disons, à Ottawa ou à Montréal? L'autre jour, j'ai entendu aux nouvelles, que je ne sais plus combien de milliers de tonnes d'agents de pollution sont vomis dans l'air par les automobiles tous les jours à Montréal. Est-ce que votre organisme a vérifié cela et a étudié ses effets sur les causes des maladies respiratoires?

Dr. Jeanes: Non, monsieur. Les organisations volontaires comme la nôtre ne font pas beaucoup de recherches. Bien que nous appuyions certains projets de recherche, dans ce domaine en particulier nous étudions surtout les travaux faits par des autorités en d'autres endroits. Bien sûr, nous nous intéressons vivement et nous nous préoccupons beaucoup des chiffres sur la pollution de l'air des villes au Canada, aux États-Unis et en Europe, où bien sûr, les chiffres de la pollution sont beaucoup plus élevés.

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The pretty firm opinion is that although the fumes that you have mentioned are a factor in the production of chronic lung disease, they are a small factor because the concentration of the pollutants is relatively small compared with the concentration from what we call the personal air pollution of cigarette smoke. I think one can see, just when somebody exhales cigarette smoke, exactly what concentration of smoke has been exposed to his bronchial tubes, and in ordinary air pollution one is never exposed to that concentration of fumes.

Mr. Howe: In your discussion of advertising over TV you mentioned something about what is going on in England. It is my understanding that in Italy it is banned altogether. Have you any figures on what effect this has had on the smoking habits of the people in those two counties?

Dr. Jeanes: No, unfortunately not in Italy.

Miss Grant: The Italians are not so statistically-minded as the Americans. I am sure if the Americans had banned it they would have the figures. The Italians are not so statistically-minded.

Mr. Howe: They do not have the figures from the tobacco company as to whether their sales have gone up or down as the effect of this.

Miss Grant: No.

Mr. Howe: I noticed from a news broadcast the other day that some private sectors of TV in the United States are willingly complying with this suggestion that you are making. Is that true?

Miss Grant: That is true.

Mr. Howe: Without any government regulation at all?

Miss Grant: That is right.

Mr. Howe: As regards the advertising they put on the cigarette package in the United States, I do not think it is big enough to have any effect on the smoker at all. It is so small that it looks just like some kind of vertical line, and I heard one Minister say that it is going to stop people from reading.

I have one other question in connection with this. You spoke about the heavy smokers and the difficulty with them. Would you agree

[Interprétation]

L'opinion générale la mieux établie est que même si les fumées dont vous avez parlé sont un facteur et entraînent des maladies respiratoires chroniques c'est un facteur assez faible car la concentration des agents de pollution est relativement peu élevée, si on la compare à la concentration de ce que nous appelons la pollution de l'air causée par la fumée de la cigarette. Je pense qu'on se rend compte lorsque quelqu'un expire la fumée de la cigarette, à quelle concentration de cette fumée exactement ses voies respiratoires sont exposées et dans la pollution ordinaire de l'air personne n'est jamais exposé à cette concentration de fumée.

M. Howe: Dans votre discussion de la publicité à la télévision, nous avez parlé de l'Angleterre, je crois que c'est en Italie que cette publicité est totalement bannie. Avez-vous des chiffres sur les conséquences que cela a eues sur les habitudes de fumer des gens de ces deux pays?

Dr. Jeanes: Non, malheureusement, pas en Italie.

Mlle Grant: Les Italiens ne sont pas aussi intéressés aux statistiques que les Américains. Je suis certaine que si les Américains avaient banni cette publicité, ils auraient des chiffres. Les Italiens ne se préoccupent pas autant de statistiques.

M. Howe: Ils n'ont pas les chiffres des compagnies de tabac, à l'effet que leurs ventes ont augmenté ou diminué à cause de ce bannissement.

Mlle Grant: Non.

M. Howe: J'ai remarqué aux nouvelles l'autre jour, que dans certains secteurs privés de la télévision aux États-Unis, on a adopté d'emblée la suggestion que vous proposez. Est-ce vrai?

Mlle Grant: Oui, c'est vrai.

M. Howe: Sans que le gouvernement établisse aucun règlement.

Mlle Grant: Cela est vrai.

M. Howe: En ce qui concerne la publicité que l'on met sur un paquet de cigarettes aux États-Unis, je ne pense pas que cela suffise vraiment à avoir des conséquences sur les fumeurs. C'est si petit que cela semble être seulement comme un genre de ligne verticale et j'ai entendu un ministre dire que cela empêchera les gens de lire.

J'ai une autre question à poser à ce sujet. Vous avez parlé des gros fumeurs et des difficultés que vous rencontrez avec eux.

[Text]

with the idea of the Minister of Health and Welfare that this probably should be brought under the Food and Drug Directorate so that the tar and nicotine content in the cigarette can be controlled?

Dr. Jeanes: I believe this is a very important thought; if one could reduce the tar and nicotine content in the cigarette and reduce it considerably perhaps that would be a long step towards helping the heavy smokers particularly. We would not be achieving what we would hope, to prevent people from starting, but this might be a way to help the heavy smokers who are unable to stop.

Mr. Howe: Do you not think this is possible after the study that was made at Waterloo which indicated there was a tremendous variation in the amount of tar and nicotine in cigarettes?

Dr. Jeanes: We would really hope so, sir. Of course, the amount that you inhale actually relates to the length of butt that you leave and it is a very interesting factor. I am of the very strong opinion that the more expensive the cigarette the more causagenetic it is for the simple reason that if cigarettes are expensive, people smoke the butts shorter and therefore they are getting a greater concentration of tar. As you will notice by my accent, I am a new Canadian—12 years new. I have lived in Canada for 12 years but I still remember what happens in Britain, that people do smoke the butts very short because cigarettes are 75 cents or 80 cents a pack in Britain. And I think that they do have a much higher concentration of tar inhalation because they smoke the butts very much shorter.

Mr. Howe: You think that this would be a good move, to bring it under the Food and Drugs Act, so that every cigarette would comply with the regulation, the minimum amount.

Dr. Jeanes: Yes, most certainly, sir.

Mr. Howe: Thank you.

Mr. F. M. Bradley (Treasurer, Canadian Tuberculosis and Respiratory Disease Association, Cornwall): Mr. Chairman, may I make a remark? With reference to your comment earlier about the size of the printing on the American cigarettes, I think if this Committee and the House of Commons in their wisdom decide that it is advisable to have a warning printed on cigarette packages, it might be a good point if they were to specify the size of the type.

[Interpretation]

Diriez-vous comme le ministre de la Santé et du Bien-être social que cela devrait être régi par la Direction des aliments et drogues pour que le contenu de nicotine et de goudron dans la cigarette soit contrôlé?

Dr. Jeanes: Je pense que c'est un point fort important; Si on pouvait réduire le contenu de nicotine et de goudron dans les cigarettes, et le réduire considérablement, cela serait un bon pas pour aider particulièrement les gros fumeurs. On ne pourrait réussir à empêcher les gens de commencer à fumer, mais de telles mesures aideraient sûrement les gros fumeurs qui ne peuvent plus s'arrêter de fumer.

M. Howe: Est-ce possible après l'étude faite à Waterloo où on indique qu'il y a beaucoup de variation dans le contenu de nicotine et de goudron des cigarettes?

Dr. Jeanes: Nous l'espérons vraiment monsieur. Naturellement la quantité que vous respirez est proportionnelle à la longueur du mégot que vous laissez et c'est un facteur très intéressant. Je crois fermement que plus la cigarette est chère, plus elle a de mauvais effets, la cigarette jusqu'au bout, plus elle peut entraîner le cancer, alors il y a plus de nicotine.

Je suis un néo-Canadien, comme vous l'indique mon accent. Je vis au Canada depuis douze ans, mais je me souviens qu'en Angleterre les gens fument le mégot presque jusqu'au bout, car les cigarettes coûtent très cher: 75 ou 80 cents le paquet. Donc, il y a beaucoup plus de goudron.

M. Howe: Donc, vous pensez que ce serait une bonne chose que ça dépende de la Direction des aliments et drogues. Toutes les cigarettes devraient être conformes au règlement?

Dr. Jeanes: Oui, bien sûr.

M. Howe: Merci.

M. F. M. Bradley (trésorier, Association canadienne contre la tuberculose et les maladies respiratoires, Cornwall): Au sujet de ce que vous avez dit plus tôt, au sujet des cigarettes américaines, je pense que le Comité de la Chambre des communes a décidé dans sa sagesse qu'il était souhaitable d'imprimer un avertissement sur les paquets de cigarettes. Ce serait une bonne chose si on précisait.

[Texte]

Mr. Howe: Or something like a skull and crossbones.

Mr. Mather: Mr. Chairman, I have one supplementary to the question asked earlier by my colleague in connection with the relationship of air pollution and cigarette smoking. I wondered if the delegation was knowledgeable of the fact that in Los Angeles, which is a city allegedly with a great deal of air pollution, a group called the Seventh-Day Adventist Church are very active in this regard, and have been for many years in respect to cigarette disease and combating it. They have had surveys taken and among their members who live in Los Angeles—and none of them smoke—it has been found that their group and the people who do not smoke are much less subject to, or affected by, the evils of air pollution than are smokers in Los Angeles.

Miss Grant: The figure that they have is a rate of one to 10 per cent. In a group of, say, 1,000 controls, there would be only 10 per cent as much among the Seventh-Day Adventists as among cigarette smokers. Evidently cigarette smoking predisposes one to the harm done by air pollution.

Mr. Mather: Thank you.

Mr. Foster: Dr. Jeanes, is that correct?

Dr. Jeanes: Yes.

Mr. Foster: I take it from your description of the effect of TV advertising on the preschool child that we almost have a situation where the child is brainwashed by the television to the point where he is predisposed to think in terms of cigarette smoking as being the natural and the good thing, regardless of what the effect is or what the position of his parents is. Is this correct?

Dr. Jeanes: I think, sir, that this is the image that we feel television builds up. You raise the question of parents, and I think that what the parents do is also quite important. If the parents are both smokers, then it is much more likely that the children will smoke. If the parents are non-smokers, then the chances are quite considerable that the children will be able to resist this television image that is being built up, because they will copy their parents. But if you have television and smoking parents, then the chances are very considerable that the children will smoke.

Mr. Foster: But this inclination will be there even when the child reaches his late teens and would naturally start to smoke,

[Interprétation]

M. Howe: Ou bien une tête de mort avec tibias.

M. Mather: Une question supplémentaire s'il vous plaît, monsieur le président, au sujet des questions qui ont été posées un peu plus tôt, au sujet des rapports qui existent entre la pollution de l'air et la cigarette. Je ne sais pas si vous savez qu'à Los Angeles, la ville qui a peut-être le plus de pollution de l'air, il existe un groupe qui s'appelle *The Church of the Seven Days* et qui est très actif dans la lutte contre la cigarette. Une enquête a révélé que les membres de ce groupement et les non-fumeurs qui vivent à Los Angeles sont beaucoup moins affectés par les maux de la pollution de l'air de Los Angeles.

Mlle Grant: Le taux est d'un à dix, je pense. La proportion plutôt est d'un à dix. Par exemple, disons que mille personnes sont contrôlées. Il y aura une proportion de 10 p. 100 seulement des membres de ce groupement qui seront touchés par la pollution de l'air comparativement au groupe des fumeurs. Il va sans dire que le fait de fumer prédispose aux maux entraînés par la pollution de l'air.

M. Mather: Merci.

M. Foster: Dr Jeanes, est-ce bien ça?

Dr Jeanes: Oui.

M. Foster: Dans votre description des conséquences de la publicité à la télévision, sur les enfants d'âge scolaire, il semble que l'on fait subir un lavage de cerveau aux enfants à la télévision. L'enfant est alors enclin à penser que le fait de fumer est excellent et naturel, quelle que soit l'attitude de ses parents? Est-ce juste? Ai-je raison?

Dr Jeanes: Oui, je pense que c'est l'image que l'on donne à la télévision. Vous mentionnez les parents. Ce que les parents font, eh bien, cela compte beaucoup aussi. Si les parents fument, il est fort probable que les enfants fumeront. Si les parents ne fument pas, il est fort possible que les enfants pourront résister à toute cette imagerie qui leur est présentée à la télévision, car ils imiteront leurs parents. Mais s'il y a à la fois la publicité à la télévision et des parents qui fument, il est fort possible que les enfants fument.

M. Foster: Lorsque les enfants approchent de la vingtaine, ils commenceront peut-être à fumer même si leurs parents ne fument pas et

[Text]

even though the parents did not smoke and did all they could to encourage the children not to. There would be some inclination left over from their early childhood.

Dr. Jeanes: We hope that when a child reaches late teens, he might have more sense and be more critical. One of the tragedies—and you can see this every day—you stand outside a public school and you see 10, 11 and 12-year-old children coming out and going around the corner and lighting up their cigarettes. They are completely uncritical. Something has got them to do this, and once they start at that age, heaven knows how we can stop them.

Mr. Foster: Is the term “brainwashing” too strong?

Dr. Jeanes: No, I think it is suitable.

Mr. Foster: Do you have psychological evidence to back this up, or reliable psychological opinion?

Dr. Jeanes: Yes, sir. I am extremely impressed with Dr. Wake in this city. I have listened to him on many occasions, and I think that he has the knowledge and the evidence to back this up.

Mr. Foster: This chart that you showed of the increase—this was in lung cancer and respiratory disease, was it not?

Dr. Jeanes: We added up all chronic respiratory disease from death certificates.

Mr. Foster: Does this parallel the increased use of television or the increased sales of cigarettes? Have you plotted this out?

Dr. Jeanes: No, we have not, sir. That is an excellent idea, but we have not done that. You did not, miss Grant?

Miss Grant: No.

Mr. Foster: I saw the figures for the increase in sales of cigarettes, and it seemed to me that last year we reached a plateau of something like 44 or 45 billion cigarettes in Canada, and it has been increasing at about one or two billion per year. It reached a plateau last year, and I understand it levelled off. But it did not seem to show quite as dramatic a rise as that, and I wondered about the influence of television along with the increased sales.

Mr. Osler: Could I ask a supplementary, Mr. Chairman? I would like to know whether Mr. Foster's figures indicate anything on a per capita basis, because billions or millions

[Interpretation]

même s'ils les encouragent à ne pas fumer. Alors, ce besoin de fumer remonterait donc l'enfance?

Dr. Jeanes: Lorsqu'un enfant arrive à 10, 11, 12 ans, il aura peut-être plus de bon sens et il aura un sens critique plus poussé. Tous les jours on voit à la porte des écoles, des enfants de dix, douze ans qui sortent de l'école et qui allument une cigarette. Ils n'ont pas de sens critique du tout. Ils ont sûrement été poussés à agir ainsi. Je ne sais pas comment on peut les arrêter.

M. Foster: Est-ce que l'expression «lavage de cerveau» est trop forte?

Dr. Jeanes: Non.

M. Foster: Y a-t-il des preuves psychologiques pour prouver cela? Ou encore, y a-t-il des psychologues qui l'ont prouvé?

Dr. Jeanes: Oui, je suis fort impressionné par le docteur Wake. Je l'ai entendu à maintes reprises. Il a les connaissances nécessaires et les preuves à l'appui.

M. Foster: Dans le tableau que vous avez montré, il s'agissait de l'augmentation de l'incidence du cancer du poumon et des maladies respiratoires?

Dr. Jeanes: Oui, nous avons ajouté toutes les maladies respiratoires chroniques.

M. Foster: Est-ce que cela est proportionnel au nombre de récepteurs de télévision ou à la vente des cigarettes?

Dr. Jeanes: Nous n'avons pas fait ce calcul.

Mlle Grant: Non.

M. Foster: Car j'ai vu que la vente des cigarettes a augmenté. L'an dernier, nous avons atteint le chiffre de 44 ou 45 milliards de cigarettes au Canada. Cela représente une augmentation d'un ou de deux milliards par année. Mais je ne pensais pas que la hausse était aussi considérable que cela, et je me demandais si l'influence de la télévision était ajoutée à cela aussi.

M. Osler: Puis-je poser une question supplémentaire, monsieur le président?

Je voudrais savoir si les chiffres de M. Foster sont calculés sur une base individuelle?

[Texte]

of cigarettes, as such, do not mean anything. How many million cigarettes per capita are smoked, and has that increased?

Mr. Foster: We would be talking about the percentage of people who smoke, the number of people.

Mr. Osler: The percentage of people who smoke has increased. Has the percentage of cigarette consumption increased only at the rate of the individuals, or what?

Mr. Bradley: Mr. Chairman, may I make a comment. I believe that in the United States, last year for the first time the total cigarette consumption, the billions of cigarettes smoked, declined, and in addition the number of cigarettes per capita, the consumption of cigarettes per capita, also declined slightly. Is that the question you were asking?

Mr. Osler: Yes. If your cigarette production has been going like that, and our population has been going like that too, it does not really mean too much...

Mr. Bradley: Agreed...If you measure it then as the number of cigarettes consumed per capita, if this is constantly increasing, then there is truly an increase in the consumption. But last year for the first time it showed a slight drop in the United States.

Mr. Foster: My other question, you mention cigarettes as being the chief problem. I wonder why we do not get as much lung cancer and chronic respiratory diseases with cigars. Someone suggested to us, at one of our committee meetings, that the temperature of the burning of the cigarette is 100 degrees higher or something than in a cigar, and there is less inhaling of the cigar. Some of the figures I have seen indicate that there is practically no increase in these diseases with cigars. Could you explain that?

Dr. Jeanes: Yes, sir. I think what you say is true, to a certain extent. I would not go along with it 100 per cent but certainly pipe and cigar smokers do not have anything like the high incidence of chronic respiratory disease. Perhaps, as you say, it is the temperature. Certainly, in a cigar there is much more filtration material in the stub itself, which is probably a very important factor. It seems to me that many cigar smokers have their cigars unlit most of the time they are in the mouth, which perhaps is also a very important factor.

Miss Grant: Also, they do not inhale the way a cigarette smoker does.

[Interprétation]

Des milliards de cigarettes en soi, ça ne veut rien dire. Combien de cigarettes par personne? Est-ce que le taux par personne a augmenté?

M. Foster: On parlait du nombre de personnes qui fumaient.

M. Osler: Le pourcentage de personnes qui fument a augmenté alors? Est-ce que la consommation de cigarettes augmente seulement au même rythme que le nombre d'individus?

M. Bradley: Je voudrais faire un commentaire. La consommation de cigarettes par personne a aussi légèrement diminué. Est-ce la question que vous nous posiez?

M. Osler: Oui. Si la production de cigarettes augmente, si la population augmente, cela ne veut pas dire grand chose à notre avis...

M. Bradley: D'accord. Si vous mesurez par exemple le nombre de cigarettes par consommateur, si cela augmente constamment, et c'est vrai qu'il y a une augmentation de consommation, mais l'an dernier, pour la première fois, on a vu une légère baisse aux États-Unis.

M. Foster: Vous dites que la cigarette est le principal problème ici. Je me demande pourquoi il n'y a pas plus de maladies respiratoires chroniques et de cancers du poulmon si on fume le cigare. Quelqu'un a laissé entendre qu'une cigarette brûle à une température cent fois plus élevée qu'un cigare et qu'il y a moins d'inhalation dans le cas du cigare. Certains chiffres indiquent qu'il n'y a pas plus de maladies respiratoires chez ceux qui fument le cigare. Quelle en est l'explication?

Dr. Jeanes: Je pense que ce que vous dites est vrai dans une certaine mesure. Pas tout à fait vrai, mais les fumeurs de pipe et de cigare n'ont pas autant de maladies respiratoires que les fumeurs de cigarettes. C'est peut-être la température. Dans un cigare, il y a beaucoup plus de filtre et c'est peut-être un élément très important. Je pense que la plupart du temps les cigares ne sont même pas allumés. C'est un facteur important.

Mlle Grant: Il y a aussi le fait que le fumeur de cigare n'inhale pas dans la même mesure que le fumeur de cigarette.

[Text]

Dr. Jeanes: Do they inhale?

Miss Grant: A cigar smoker does not inhale, no. Cigar smoke is so strong it would knock you over.

Mr. Foster: My other question relates to advertising. You do not suggest putting any ban on newspaper advertising or advertising in stores. The Canadian Medical Association recommended that all forms of advertising be banned. I was wondering why you distinguish between the different forms?

Miss Grant: I was taking it a step at a time, attacking the one that I thought did the most harm first. We do not approve of any advertising, and, above all, we do not approve of the newspaper advertising that offers \$10,000, or somebody gets a car, or something like that. We would like to see the special gifts banned.

My chief reason for levelling my attack at TV, however, is that it gets at small children, and they are the ones I am most interested in protecting. I feel that adults should be able to reason these things out for themselves, but children do not, and they are got at by the singing commercials, the pictures and the glamorous people, and so on. This I think is bad.

Mr. Foster: You are just proposing what the CMA proposed only you are doing it in steps?

Miss Grant: Yes, that is right.

Mr. Foster: My other question relates to the tobacco companies. We have not yet had any of them before our Committee.

What sort of co-operation, or obstruction do you get from the tobacco companies in your research and in your promotional campaigns?

Mr. Jeanes: I do not think we have had any obstruction. Of course, the biggest obstruction is that voluntary health associations such as ours work on very small budgets for our work and promotional programs. We do not work in the millions that the tobacco companies have. Therefore, although they do not obstruct us in any active way yet the sheer power of their advertising budget just overwhelms us in the message that we would like to get across. No, they do not set out to obstruct us in any particular way except by this power of advertising.

Mr. Foster: Do you have any figure for the number of millions of dollars spent annually on advertising by tobacco companies in Canada?

[Interpretation]

Dr. Jeanes: Mais est-ce qu'il inhale au moins?

Mlle Grant: Non; le fumeur de cigare n'inhale pas. La fumée du cigare est trop forte.

M. Foster: Mon autre question se rapporte à la publicité. Vous ne suggérez pas de bannir la publicité dans les magasins ou dans les journaux. L'Association canadienne médicale en a parlé. Je me demande pourquoi vous établissez une distinction entre les deux?

Mlle Grant: Une chose à la fois. Je pensais aux choses les plus importantes d'abord. Naturellement, nous n'approuvons pas cette publicité. Nous ne pensons pas que la publicité dans les journaux soit bonne, surtout lorsqu'on offre des prix de \$10,000, ou une auto ou quelque chose de semblable. Nous aimerions voir ces prix abolis. Mais je me suis plutôt attaquée à la télévision car c'est ce qui touche le plus les jeunes enfants, et ce sont eux, selon moi, qu'il faut avant tout protéger. Les adultes doivent être capable de raisonner par eux-mêmes, mais les enfants sont vulnérables et ils s'intéressent à la publicité, et je trouve que c'est mal.

M. Foster: Vous faites la même proposition que la CMA, avec la différence que vous proposez un certain échelonnement.

Mlle Grant: C'est ça.

M. Foster: Mon autre question, se rapporte aux industries du tabac. Ces sociétés n'ont pas encore comparu devant le Comité. Je me demande quel genre de collaboration ou quelle obstruction elles offrent au cours de votre campagne de promotion et de recherche?

Dr. Jeanes: Non, il n'y a pas eu d'obstruction mais les associations bénévoles, comme la nôtre, ont des budgets terriblement limités pour nos recherches et notre publicité. Nous n'avons pas des millions comme les compagnies de tabac. Elles ne nous nuisent pas directement, mais leurs budgets de publicité nous dépassent largement. Non, elles ne nous font rien pour nous nuire, mais la publicité est très grande.

M. Foster: Avez-vous des chiffres? Savez-vous combien de millions les compagnies de tabac dépensent en publicité au Canada chaque année?

[Texte]

Mr. Jeanes: I have seen the figure quoted. Is it \$30 million?

Miss Grant: I think it is \$30 million in Canada.

Mr. Foster: Thirty million.

Miss Grant: I think that is it; but it is off the top of my head. I had it once. I did not think to bring it.

Mr. Foster: That represents a dollar and a half *per capita*.

Mr. Jeanes: Yes.

Mr. Foster: Thank you very much.

Mrs. MacInnis (Vancouver-Kingsway): Mr. Chairman, knowing this to be a voluntary association I have been very much impressed over the years with how much it has been able to do, particularly in British Columbia where I know about the Christmas seals campaign.

I am interested in what you are saying tonight, which is I think, that relative to children there are two big influences—the influence of the parents in the home, coupled with television.

We have been discussing television quite a bit. From evidence we have heard I feel that the parents' influence is exceedingly important even before the children go to school in nullifying some of the worst effects of television on children.

Has your Association had campaigns, what have you been doing, to try to beam some of the facts of the situation at parents?

Mr. Jeanes: Sir, we regard parents as part of the adult group to which we try to bring our message. As I said earlier, unfortunately, if they are confirmed smokers we find it very difficult to influence them. In fact we have found in some cases that if we really get the message to the children they can have a greater impact on their parents than can we by our message, by their going home and telling their parents what they have learned in school. I think heavy-smoking parents are a very difficult group to deal with,—just as difficult as the rest of the adults.

Miss Grant: Yes; we do emphasize in much of our literature the effect of smoking on children. There is no doubt that the children of smokers are more likely to smoke than are the others. We tell our secretaries that when they speak to the parent-teachers associations this is what they should stress, and a great many parents, at great sacrifice, have topped smoking.

[Interprétation]

Dr Jeanes: J'ai vu le chiffre, je pense qu'il s'agit de \$30 millions au Canada.

Mlle Grant: Je pense qu'il s'agit de \$30 millions au Canada.

M. Foster: Trente millions.

Mlle Grant: Oui, c'est ça.

Mais, je ne m'en souviens plus exactement. J'avais le chiffre exact. Je n'ai pas pensé à le prendre dans ma documentation.

M. Foster: Cela représente \$1.50 par personne?

Dr Jeanes: Oui.

M. Foster: Merci beaucoup.

Mme MacInnis (Vancouver-Kingsway): Monsieur le président, je suis fort impressionnée par le travail des associations bénévoles, surtout en Colombie-Britannique. Je m'intéresse à ce que vous dites ce soir, surtout en ce qui a trait aux enfants. Il y a l'influence des parents, ainsi que l'influence de la télévision. Pour ma part, je pense que dans certains témoignages que j'ai entendus, que l'influence des parents est très importante même pour les enfants d'âge pré-scolaire et cela peut combattre les plus mauvais effets de la télévision sur les enfants.

Est-ce que votre association a fait campagne pour essayer de faire comprendre cela aux parents?

Dr Jeanes: Eh bien, les parents font partie du groupe des adultes, c'est à eux que nous voulons transmettre nos messages. S'ils sont des fumeurs invétérés, il paraît difficile de les influencer. En fait, nous avons remarqué que dans certains cas, si les enfants comprennent les messages, ils peuvent avoir une certaine influence sur leurs parents en leur disant que c'est ce qu'ils ont appris à l'école. Je pense que les parents qui fument beaucoup représentent un groupe fort difficile à traiter; aussi difficile que le reste des adultes.

Mlle Grant: Eh bien, dans notre documentation, nous insistons sur l'influence de la cigarette sur les enfants. Il n'y a pas de doute que les enfants des fumeurs ont plus de chance de fumer que les autres. Nous disons aux gens qui s'adressent aux associations de parents-élèves d'insister là-dessus.

[Text]

However, as Dr. Jeanes has said, some of the children are our best advocates when they get home. The other day I had asked for criticisms of a film strip we had shown. One little boy wrote, "I am going to hide all the cigarettes my parents 'bye'. They will not know where they are. I know it is sneaky, but I hope my 'seam' works." This was a child of grade three or four. They do try.

We really try to get at the parents, particularly the mothers, but it is very difficult for the mothers to stop smoking—evidently more so than for the fathers.

Mrs. MacInnis (Vancouver-Kingsway): Beginning just a little earlier in the effort to reach people, is your organization, or any other, able to get at high school pupils?

Sex education is now becoming a must in schools, and this is coupled, I have no doubt, with the fact that some day they will be parents and must start to think of the consequences of sex conduct at that age. Is it possible, or is anything being done, to reach these potential parents with this education relative to cigarette-smoking and its dangers?

Miss Grant: Yes. We are starting from grade four with different material to reach different grades.

Mrs. MacInnis (Vancouver-Kingsway): How do you reach them?

Miss Grant: Our local associations, for example, know they are going to have this campaign. They start by getting the permission of the school inspectors to launch the campaign, and then they go to the principals. Some of the school inspectors will actually give the teachers part of Friday afternoon off to attend the seminar on cigarette smoking.

We then supply the teachers with books. We have two or three quite good books on this, and the local association supplies these to every teacher in the area. If the teacher is not ready to show a film on smoking the local secretary will go in prepared to answer the children's questions. There are at least half a dozen places in Ontario where this has been done for example; and B.C. has put on a terrific campaign. They are trying to get the high school students to write the material and prepare film strips on this, because they think high school children might know more about what would appeal to small children than do adults.

Mrs. MacInnis (Vancouver-Kingsway): Has there been any attempt to assess the results

[Interpretation]

Il y a des parents qui ont fait de grand sacrifice pour cesser de fumer. Car, les enfants sont nos meilleurs avocats lorsqu'ils arrivent chez-eux. L'autre jour j'ai reçu une note. J'avais demandé aux enfants de critiquer un extrait d'un film qu'on avait montré. Un petit garçon a dit: «Je vais cacher toutes les cigarettes que mes parents achètent. Ils ne sauront pas où les trouver». Je sais que c'est un peu rusé, mais j'espère que mon plan fonctionnera. Un enfant de troisième ou de quatrième année.

Nous essayons d'atteindre les parents. Il est très difficile de demander aux mères de cesser de fumer. C'est plus dur pour elles que pour les pères.

Mme MacInnis (Vancouver-Kingsway): Un peu plus tôt vous avez dit que votre organisation a pour but d'atteindre les enfants du niveau secondaire. Maintenant, l'éducation sexuelle est devenue une nécessité. Et, parce qu'on leur dit qu'un jour ils seront des adultes et des parents, ils doivent alors penser aux conséquences de leurs actes. Est-ce possible, ou du moins fait-on quelque chose pour atteindre ces futurs parents en leur expliquant les dangers de la cigarette?

Mlle Grant: Oui, nous commençons en quatrième année. Nous avons de la documentation pour atteindre différents stades.

Mme MacInnis (Vancouver-Kingsway): Comment les rejoignez-vous?

Mlle Grant: Nos associations locales, qui savent que nos campagnes essaieront d'avoir la permission des inspecteurs d'écoles pour mettre la campagne en marche. On s'adresse aux enseignants et aux dirigeants. Par exemple, nous aurons des heures libres pour assister à des séminaires sur la cigarette. Ensuite, nous donnerons des manuels aux professeurs. Ce sera de bons livres et les associations locales fourniront les manuels. On montrera des films sur la cigarette. Nos secrétaires locaux pourront répondre aux questions des enfants. Il y a au moins une demi-douzaine d'endroits en Ontario et en Colombie-Britannique où on a organisé une campagne extrêmement dynamique. On essaie d'atteindre les enfants d'écoles secondaires. On veut qu'ils préparent des films et de la documentation car on pense que les enfants d'écoles secondaires connaissent mieux les enfants que les adultes.

Mme MacInnis (Vancouver-Kingsway): Avez-vous pu évaluer les résultats de votre

[Texte]

yet. Have your campaigns gone far enough for you to be able to measure in any way their effect?

Miss Grant: I would not think so, in a whole campaign.

Mrs. MacInnis (Vancouver-Kingsway): No, but in any localities?

Miss Grant: The Canadian Medical Association, with our Association and others has done one in Peterborough. They issued a questionnaire in the spring and the questionnaire was assessed in November. They have not yet published those figures, but we hope to get them before very long.

Mr. Bradley: Mr. Chairman, may I add a remark to what has been said? The tuberculosis associations, with their very limited resources, have been doing everything they can to educate children in the schools, and the parents, as well. But you have to keep in mind, as was mentioned a moment ago, that the cigarette companies spend \$30 million of their total revenue on advertising alone. The total amount of revenue now raised by every tuberculosis association across Canada is only \$3 million.

Our total revenue for administration, for education, for the Christmas seal campaign, for every purpose, is just one tenth of the amount that the cigarette companies spend on advertising. I must give major credit to the professional workers in the TB field—I am a voluntary worker myself—who have gone out on a local community basis and organized this educational campaign amongst the school children—and as far as their budget will permit them, amongst the adults as well—but the amount of funds at their disposal is very limited.

Mr. Mather: May I ask one supplementary, Mr. Chairman.

The Chairman: A supplementary, Mr. Mather.

Mr. Mather: On this matter of the importance of "Be smart, don't start" type of approach to the young people, I wonder if the delegation is familiar with the figure that this Committee received some time ago from the National Health and Welfare people to the effect that in the last eleven years approximately one million Canadians have quit smoking but that every day of every month approximately 300 Canadians start smoking, which is about 9,000 a month, and it would

[Interprétation]

travail? Pouvez-vous mesurer l'influence de ces campagnes?

Mlle Grant: Pas dans une campagne d'ensemble. Dans certaines localités, peut-être.

Mme MacInnis (Vancouver-Kingsway): Dans chacune des localités?

Mlle Grant: L'Association médicale canadienne a fait son enquête à Peterborough, elle a présenté un questionnaire au printemps et un autre en novembre pour évaluer les résultats de la campagne. On a pas encore obtenu ces chiffres mais nous espérons les obtenir d'ici peu.

M. Bradley: Je voudrais dire quelques mots sur ce qu'on a dit. L'Association contre la tuberculose, avec ses ressources limitées, fait ce qu'elle peut pour éduquer les enfants dans les écoles et les parents aussi. Ce dont il faut se rappeler, cependant, c'est qu'il y a un instant on a mentionné que les compagnies de cigarettes dépensent, pour la publicité seulement, 30 millions de dollars de tous leurs revenus pour la publicité seulement. Le montant total de revenu recueilli par chaque association anti-tuberculeuse au Canada n'est que de 3 millions de dollars.

Tous nos revenus utilisés pour l'administration, les programmes d'éducation, la campagne du timbre de Noël et nos autres projets ne représentent qu'un dixième du montant que dépensent les fabricants de cigarettes pour la publicité. Je dois donc donner aux travailleurs bénévoles de la lutte anti-tuberculeuse, j'en suis un moi-même, tout le mérite qui leur revient. Ils sont allés travailler au niveau de la collectivité pour faire des campagnes éducatives auprès des élèves des écoles et dans la mesure où leur permet leur budget, ils font campagne aussi auprès des adultes; les fonds dont ils disposent sont très limités.

M. Mather: Puis-je poser une question supplémentaire, monsieur le président?

Le président: Une question supplémentaire. M. Mather

M. Mather: Au sujet de ce point... de cet argument sur l'importance d'encourager les jeunes à ne pas commencer à fumer. Je me demande si la délégation est au courant d'une note qui a été présentée par les fonctionnaires du ministère de la Santé et du Bien-être, à notre comité à l'effet qu'un million de Canadiens environ ont cessé de fumer au cours des 11 dernières années, mais que tous les jours quelque trois cents Canadiens commencent à fumer, ce qui veut dire qu'il y a environ

[Text]

seem obvious that those people who are starting are younger people, if not children. I do not know if this is really a question, but I wanted to know if the delegation was familiar with that fact. It seems to be a pretty striking illustration of the need for concentrated effort on the younger people.

Miss Grant: It is aware and saddened by it.

The Chairman: Mr. Osler.

Mr. Osler: Thank you, Mr. Chairman. I would like to know if anybody has any statistics on how long cigarette smoking has been popular. I perhaps should add that I was an immediate post First World War baby and my understanding of the folklore immediately preceding my advent into the world was that men did not smoke cigarettes, that it was a sissy thing to do. Women occasionally did if they were very avant-garde, but men smoked pipes or cigars. It was really only during the First World War in the trenches when pipes or cigars were not available that this really took hold and "coffin nails" became available to all the troops all the time.

I want to know if anybody can tell me if that folklore is true, and if so, whether there is any relationship between that folklore and the death of the people who came under it. My father came from a very long-lived family and yet he died at age 62 of emphysema. The story was that he caught double pneumonia in the trenches at one point and had to carry on for about a week with a demonstrable fever, and all the rest of it. I do not think I buy that today. I think it was probably due to the fact that he smoked liked a furnace.

I wonder if you have any statistics relating to the advent of cigarettes as a popular thing.

Dr. Jeanes: Sir, unfortunately these are not facts on which statistics were kept or can be compiled at this stage, but it is a fact on which one gets a very firm impression—and one cannot have more than an impression—that as you say the smoking of cigarettes by men really started after the First World War and by women at the beginning of the Second World War.

Scientifically and statistically these facts are related to the advent of chronic respiratory disease in women. Prior to 1939 bronchitis,

[Interpretation]

9,000 nouveaux fumeurs chaque mois. Il semble évident que ces nouveaux fumeurs sont surtout des jeunes gens, des enfants. Ce n'est peut-être pas vraiment une question, mais je voudrais savoir si la délégation est au courant de ce fait qui semble être une illustration assez frappante du besoin de concentrer les efforts auprès des jeunes.

Mlle Grant: Nous sommes au courant et nous le déplorons.

Le président: M. Osler.

M. Osler: Merci monsieur le président. Je me demande si quelqu'un a des statistiques indiquant depuis combien de temps l'usage de la cigarette s'est généralisé. Je voudrais peut-être ajouter que je suis né immédiatement après la Première Guerre mondiale et je me rappelle qu'on m'a raconté qu'avant ma naissance, les hommes ne fumaient pas la cigarette, c'était paraître efféminé. Les femmes fumaient la cigarette, de temps en temps, si elles étaient très avant-gardistes, mais les hommes fumaient la pipe ou le cigare. C'est vraiment pendant la Première Guerre mondiale alors que la pipe et le cigare n'étaient pas disponibles dans les tranchées que «les clous de cercueil», c'est-à-dire, les cigarettes, ont été distribuées constamment à toutes les troupes.

J'aimerais savoir si quelqu'un peut me dire si cette anecdote est vraie et s'il y a un rapport direct entre cette anecdote et la mort des gens qui l'ont vécue. Mon père était issu d'une famille jouissant d'une longévité très avancée et pourtant il est mort d'emphyseme à l'âge de 62 ans. On a dit qu'il avait attrapé une pneumonie double dans les tranchées et qu'il a dû demeurer à son poste pendant une semaine environ malgré une forte fièvre et tout ce qui l'accompagne. Je ne crois pas pouvoir accepter cette version. Je pense qu'il est mort parce qu'il fumait comme une cheminée.

J'aimerais savoir si vous avez quelques statistiques permettant de déterminer à quel moment l'usage de la cigarette s'est généralisé?

Dr Jeanes: Monsieur, ce sont là des faits qui, malheureusement, ne peuvent pas faire l'objet de statistiques pour le moment. Mais ce sont des faits tels qu'on a l'impression très forte, même si ce n'est qu'une impression, que les hommes ont vraiment commencé à fumer la cigarette après la Première Guerre Mondiale et les femmes au début de la Deuxième Grande Guerre. Sur le plan scientifique et statistique, ces faits sont reliés à l'arrivée des maladies respiratoires chez la femme. Avant 1939, l'emphyseme, la bronchite et le

[Texte]

emphysema and lung cancer were very rare conditions in women.

By the late 1950s, when women as a group had been smoking heavily for 20 years, they were rapidly catching up to the men.

Miss Grant: I am rather older than Dr. Jeanes. I remember the First World War and I can assure you it is not just folklore. It is true. Before the First World War you never saw a man smoke a cigarette—or a lady, either. Ladies just did not smoke at that point. But after the Second World War smoking became increasingly common and nobody knew it was dangerous. This is the whole point. It was not until about the Second World War that we began to get this rise in emphysema cases. It has increased. We had 92 deaths in 1950 and 900 and some last year. This is the way that emphysema has gone up.

Mr. Osler: I know my father was perfectly healthy at the age of 60 and at age 62 he was a cringing invalid gasping for breath, period. There was just complete and total collapse from emphysema. He just drowned, really. I do not mean to be personal but I have a suspicion that a lot of veterans you run into are gasping wrecks too and they were not necessarily gassed, or anything.

I wonder if anybody has anything to relate on the advertising of cigarettes on TV. If we are talking about banning anything I think we are talking about an awful lot of money, and this is always an awkward thing for politicians.

For instance, I was on the board of the CBC and for several years we tried to get the Department of Health and Welfare to give us a directive which would encourage us to cut out cigarette smoking. They would not do it because it would mean a loss of \$3 or \$4 million a year, which meant that the government would have to cough up an extra \$3 or \$4 million a year, apart from any trouble they might get into politically.

I wonder if the argument about TV advertising is so valid that only TV and radio should be picked upon. There is the other argument about TV content being equally valid, and every time you get into other types of TV content we are told that nobody has any statistics to prove that violence on TV leads to violence in life or that morality on TV has anything to do with morality in life.

[Interprétation]

cancer du poumon étaient très rares chez la femme.

Vers la fin des années 1950, au moment où les femmes, en tant que groupe, avaient fumé fortement depuis 20 ans, elles ont rejoint rapidement le taux de mortalité des hommes victimes de ces maladies.

Mlle Grant: Je suis un peu plus vieille que le Dr. Jeanes et je me souviens de la Première Guerre mondiale. Je vous assure que ce n'est pas du folklore. C'est vrai.

Avant la Première Guerre mondiale, on ne voyait jamais un homme fumer une cigarette ou une femme. Les femmes ne fumaient pas, tout simplement. Mais, après la Première Guerre mondiale, l'usage de la cigarette a augmenté de plus en plus et personne ne savait que c'était dangereux. C'est ça le problème. Ce n'est qu'après la Deuxième Guerre mondiale que la fréquence de l'emphysème s'est accrue. Et cela a continué. Nous avions 92 décès en 1950 et l'an dernier quelque 900. Voilà donc les progrès de l'emphysème.

M. Osler: Je sais qu'à 60 ans, mon père jouissait d'une excellente santé et qu'à 62 ans, il n'était plus qu'un invalide craintif et hâletant. Il fut victime d'un dérèglement total dû à l'emphysème. Il a tout simplement coulé à pic. Je ne veux pas revenir constamment à mon expérience personnelle mais j'ai l'impression que beaucoup des anciens combattants qu'on rencontre sont des loques hâletantes, sans nécessairement avoir souffert d'asphyxie par les gaz ou d'autre chose.

Je me demande si quelqu'un peut établir un rapport avec la publicité à la télévision? Si nous parlons de bannir quelque chose, je pense que nous parlons de beaucoup d'argent en même temps ce qui est toujours délicat pour un politicien.

Par exemple, au temps où j'étais à Radio-Canada, nous avons essayé pendant plusieurs années d'obtenir du ministère de la Santé nationale et du Bien-être social des directives nous encourageant à réduire l'usage de la cigarette. Ce fut en vain, car une telle action aurait fait perdre 3 ou 4 millions de dollars chaque année, perte que le gouvernement aurait dû compenser d'une autre manière sans oublier les problèmes qui auraient alors été soulevés au niveau de la politique.

Je me demande si l'argument touchant la publicité télévisée est à ce point valable pour que nous concentrions nos efforts uniquement à la télévision et à la radiodiffusion. Il y a cet autre argument aussi valable et portant sur le contenu des émissions de télévision. Chaque fois que nous parlons du contenu des émissions de télévision, on nous réplique qu'il n'y a aucune statistique prouvant que la violence

[Text]

We are getting into a pretty murky, deep pond here and I think it would be a welcome change if all cigarette advertising, regardless of media, were recommended by the people who come before us, if that is what they are after, because I foresee if you cut it down to one medium a whole lot of psychological experts are going to tell you that everything is meaningless by the time you have finished.

It seems to me that it is just as relevant if you see an ad in an attractive magazine that says you are going to get the girl or you are going to be Gaylord Hauser, or somebody, if you smoke the right brand of cigarettes as it is if you see it on television. Presumably those people who buy the advertising at great cost in a magazine feel the same way or they would not do it. Is not the whole argument, really, that advertisers base their selling on the cost per capita of passing their message along, regardless of medium? If it costs a dollar per person per season, or something like that, then it is worthwhile doing on television and they do it on television or they do it in magazines or they do it in something else. Perhaps it should be cut down to TV and radio, which is only a spectacular aspect of advertising.

I wonder if anybody really knows whether it creates more of an impression when it is shown on television than when it is published in newspapers and magazines. I doubt it.

My third point, Mr. Chairman, getting down to the morality of the thing, I wonder if it is any less moral to advertise the smoking of cigarettes, which appear to have a known statistical result than it is to advertise the selling of motor cars, which also appear to have a known statistical result.

Motor cars are sold on the basis of sex, speed and desirability rather than utility, and the latest thing is to tell people that if they buy a certain type of motor car they will look like a fighter pilot and in this way get the girl. It used to be that if they looked like somebody else they would get the girl. It has nothing to do with the utility of driving a car which Henry Ford stuck to in the old days.

[Interpretation]

exposée à la télévision encourage la violence chez les gens ou qu'il y ait rapport entre la moralité apportée par la télévision dans les foyers et la moralité des gens en général.

Je crois que nous nous exposons à nous perdre dans un marais profond et obscur et je pense qu'une modification intéressante serait de voir à ce que tout message publicitaire concernant les cigarettes quel que soit l'organe publicitaire utilisé soit sanctionné par les personnes qui témoignent devant nous, si c'est là leur désir, car je prévois que si vous ne vous occupez que d'un seul organe publicitaire, une foule d'experts en psychologie nous diront que, une fois fini, tout n'aura plus de sens.

Il me semble qu'une annonce de cigarette publiée dans une revue attrayante et qui nous dit que vous obtiendrez gain de cause auprès de votre dulcinée ou que vous serez un vrai Don Juan si vous fumez telle marque de cigarettes est aussi importante que la même annonce télévisée. Il est à prévoir que ceux qui payent très cher cette publicité dans les revues sont du même avis que moi, sinon ils s'en abstiendraient. Est-ce que l'argument réel ne serait pas que les publicistes font leur vente en regard du coût par capita de la transmission du message, quel que soit l'organe choisi? S'il en coûte \$1 par personne, par saison, ou quelque chose du genre, ça vaut la peine d'utiliser la télévision et ils l'utilisent, ou ils utilisent les revues, ou tout autre organe de diffusion. Peut-être notre action devrait se limiter à la télévision et à la radio, les deux aspects les plus spectaculaires de la publicité.

Je me demande si quelqu'un sait vraiment si la publicité télévisée a réellement plus d'influence que la publicité des journaux ou des revues. J'en doute. Ma troisième question, monsieur le président, concerne l'aspect moral de la publicité des cigarettes. Et je me demande s'il est moins moral de faire de la publicité pour la cigarette qui semble avoir certains dangers prouvés sur le plan statistique que pour la vente des automobiles qui semblent aussi avoir certains dangers prouvés statistiquement?

Dans la vente des automobiles, on se sert du sexe, de la vitesse, de l'attrait de l'automobile plutôt que de l'utilité du véhicule. L'astuce la plus récente est de déclarer qu'en achetant un certain genre de voiture vous aurez l'air d'un as et qu'ainsi vous serez reçu par la fille de vos rêves. Anciennement on disait qu'on obtenait la jeune fille désirée, lorsqu'on ressemblait à telle ou telle personne. On ne parle plus du tout du point de vue utilitaire, point de vue si fortement mis de l'avant par Henry Ford aux tous débuts.

[Texte]

I think we will be opening a real can of worms in this respect. I am prepared to see the advertising of all cigarettes cut out but I think we should realize what we are doing. When we start it I think we will have all kinds of psychological experts telling us that we are in a real morass. I do not know whether anybody has any thoughts on the matter.

Dr. Jeanes: I think, sir, you have asked a lot of questions and answered some of them, or perhaps posed the difficulty of answering the questions. Perhaps while my colleagues think of answers I could refer to one factor, and that is the cost factor in relation to the budget. You said that the Department of National Health and Welfare would not make a firm recommendation to you and there was also concern about the CBC losing the budget.

We feel that one has to be realistic about this and look at the over-all cost factor. We are becoming increasingly concerned with health as a cost factor in this country, and as we get nearer to Medicare and the increasing cost of medical services, the sheer cost of treating one patient with chronic bronchitis and emphysema over a twenty-year period far outweighs the cost of cigarette advertising. You lose revenue on cigarette advertising, in the long run you will be saving on the costs of health services.

Mr. Foster: Do you have any estimates of the cost to the Canadian economy of these three main diseases?

Mr. Bradley: Mr. Chairman, may I make a contribution to that answer? We do not have a cost but we do have some figures taken I believe, from the Dominion Bureau of Statistics.

For pneumonia, bronchitis and other respiratory diseases, mainly emphysema, we have some figures here from 1950 to 1964. In 1950 the number of hospital separations for these cases was 34,000. In 1964, just fourteen years later, they had increased 50 per cent to nearly 53,000, so that in a fourteen-year period there has been a 50 per cent increase in the number of hospital discharges for these respiratory diseases. I am afraid we do not have actual cost figures yet.

[Interprétation]

Je crois qu'avec cette question nous ouvrons la porte à une tourmente terrible. Je suis prêt à accepter de bannir toute publicité concernant les cigarettes, mais je crois que nous devrions réaliser ce que nous faisons. Lorsque nous commencerons il y aura toutes sortes d'experts en psychologie qui nous diront que nous sommes dans un vrai borborygme. Je ne sais pas si quelqu'un aurait quelque chose à dire à ce sujet...

Dr. Jeanes: Je crois monsieur que vous avez demandé beaucoup de questions et répondu à quelques-unes d'entre elles ou peut-être que vous avez posé la difficulté de répondre à ces questions. Peut-être pendant que mes collègues songent à des questions je pourrais vous citer un facteur qui est important, et ce facteur est le coût relativement au budget. Vous avez dit que le ministère de la Santé et du Bien-être social ne voulait pas vous faire une recommandation ferme et que l'on craignait aussi que Radio-Canada perde son budget.

Nous croyons qu'il faut être réaliste à ce sujet et voir le facteur coût dans son ensemble. De plus en plus nous nous inquiétons de la santé comme facteur coût dans ce pays et plus nous approchons de l'adoption de l'assurance-santé «Medicare» et de l'augmentation des services médicaux, le prix véritable du traitement d'un patient qui souffre de bronchite chronique et d'emphyseme pendant une période de vingt ans, dépasse de beaucoup le coût de la publicité sur la cigarette. Il faut vraiment établir l'équilibre entre ces deux facteurs. Si vous perdez certains revenus pour la publicité de la cigarette, à long terme, vous épargnerez sur le coût des services de santé.

M. Foster: Avez-vous quelque estimation du coût à l'économie canadienne de ces trois principales maladies?

M. Bradley: Monsieur le président, permettez-moi de faire une contribution à cette réponse? Nous n'avons pas de chiffres sur le coût, mais nous avons des chiffres qui proviennent, je crois, du Bureau fédéral de la statistique.

Pour la bronchite chronique, pneumonie, et autres maladies respiratoires, surtout l'emphyseme, nous avons des chiffres qui vont de 1950 à 1964. En 1950, les congés des hôpitaux pour ces cas étaient de 34,000. En 1964, seulement 14 ans plus tard, ils avaient augmenté de 50 p. 100 pour atteindre environ 53,000, de sorte que dans une période de 14 ans, il y a eu une augmentation de 50 p. 100 du nombre des congés des hôpitaux pour ces maladies respiratoires. Quant au coût exact, je crains que nous n'ayons pas encore de chiffres réels.

[Text]

Mr. Foster: I wonder how much it rose in relation to the general population during that period. Would it have risen 30 per cent?

Dr. Jeanes: Could we also say that this excludes those provinces that do not keep these statistics.

Miss Grant: Yes; it excludes the Province of Ontario.

Mr. Foster: It is very difficult to put a price on it.

Mrs. MacInnis (Vancouver-Kingsway): May I ask a supplementary on that?

I understand that in Britain there has been some attempt to curtail advertising on the radio and television, or perhaps it is just television. Has there been any noticeable improvement in the situation of these respiratory diseases or are statistics available yet?

Dr. Jeanes: Mr. Chairman, the time factor is far too short for there to be any noticeable difference. It has been only two or three years. The damage to lungs is built up by 10, 15, 20 years of cigarette smoking. One does not achieve much in the community as a whole by one or two years of reduced smoking. In the individual, one achieves a great deal. A heavy smoker who stops smoking does improve the condition of his bronchi tremendously, but in the community as a whole you need a much longer time than two years to notice a marked improvement.

Mr. Mather: I have a supplementary question, Mr. Chairman, which is more in the nature of putting very briefly a fact on record. In connection with the question of whether the loss entailed to the nation as the result of heavy cigarette smoking by its people is less or greater than the revenue or the amount of money that is produced for the government by the tobacco industry, I wonder if you knew that we had earlier testimony by The Canadian Medical Association on same question. In their opinion the loss was greater as a result of early death and curtailment of economic expenditure by those who died by the diseases which crippled many people and cost so many days work loss in industry and in all these other elements. In their opinion as an organization, the cost to the public was greater than any revenue which the industry produced. I just ask whether you are familiar with that point.

[Interpretation]

M. Foster: Je me demande quelle a été l'augmentation de ces malades en rapport avec l'augmentation de la population durant cette période. L'augmentation serait-elle de 30 p. 100?

Dr. Jeanes: Pouvons-nous dire aussi que cela ne comprend pas les provinces qui ne tiennent pas ces statistiques?

Mlle Grant: Oui; cela ne comprend pas la province d'Ontario.

M. Foster: C'est très difficile d'en fixer le prix.

Mme MacInnis (Vancouver-Kingsway): Puis-je poser une question supplémentaire à ce sujet?

Je crois comprendre qu'en Grande-Bretagne il y a eu une tentative pour empêcher la publicité à la radio et à la télévision ou peut-être est-ce seulement la télévision. Est-ce qu'on a ressenti une amélioration sensible de la situation visant ces maladies respiratoires ou est-ce qu'on a déjà des statistiques?

Dr. Jeanes: Le facteur temps, monsieur le président, est beaucoup trop court, pour que l'on sente une différence marquée. On parle que de deux ou trois ans. Les dommages aux poumons se font sentir après avoir fumé des cigarettes pendant 10, 15 ou 20 ans. On ne peut pas vraiment changer une collectivité après avoir moins fumé pendant deux ou trois ans. Chez l'individu, on peut réaliser beaucoup. Un gros fumeur qui arrête de fumer s'aperçoit que la condition de ses bronches s'améliore de beaucoup, mais dans une collectivité prise dans son ensemble il faut beaucoup plus que deux ans pour remarquer une amélioration sensible.

M. Mather: Une question supplémentaire, monsieur le président, qui consiste plutôt à inscrire brièvement un fait au procès-verbal. Il s'agit de la question savoir si des pertes encourues par le pays à la suite de l'usage excessif de la cigarette par ses habitants est plus considérable ou moins considérable que les revenus ou le montant d'argent que retire le gouvernement de l'industrie du tabac, je me demande si vous saviez que nous avons eu un témoignage antérieur de l'Association canadienne des médecins sur la même question. A leur avis, la perte était plus grande à la suite d'une mort précoce et d'une diminution des dépenses à l'économie par ceux qui sont morts des maladies qui ont paralysé beaucoup de gens et ont provoqué tant de jours de travail perdus pour l'industrie et pour tous ces autres éléments. Selon eux, en tant qu'association, le coût pour le public était plus élevé que quelque revenu que l'in-

[Texte]

Dr. Jeanes: Yes; I did share their report, sir.

The Chairman: Mr. Knowles?

Mr. Knowles (Norfolk-Halifax): Mr. Chairman, I was rather intrigued by the statistic that came out earlier that the incidence of TB has declined over the years, largely through the efforts of the national TB association, while at the same time the incidence of cigarette consumption has increased, which would seem to indicate that perhaps there is not as much relationship between the smoking of tobacco and tuberculosis as one might think.

If this is so, perhaps we are putting too much emphasis on cigarette consumption and perhaps there are other causes that relate to the increase in emphysema and lung cancer. What comment would you have?

Dr. Jeanes: Sir, I think I can state quite emphatically that there is really no relationship between cigarette smoking and tuberculosis. The causative factor of tuberculosis is the tubercle bacillus and you can only develop active tuberculosis if you inhale or ingest tubercle bacilli and your body is in such a state of resistance that you do not control the infection and the disease progresses. This is quite unrelated to cigarette smoking. Tuberculosis is an infectious bacillary disease of the lung. The conditions about which we are talking, chronic bronchitis and emphysema, are degenerative conditions of the lung produced by the irritation of tobacco smoke. They are really not related in any way.

Mr. Knowles (Norfolk-Halifax): It is not true, though, that in sanatoria the patients are discouraged from smoking cigarettes?

Dr. Jeanes: Yes, that is quite true, sir. The reason is this, and we do not see this as much as we used to: If a patient has a large tuberculous cavity in the lung, there was always a great danger that he might rupture a blood vessel and bleed from that. Bleeding in a patient with tuberculosis could be a disaster, so that you did everything possible to discourage him from coughing in order to avoid this very serious complication. Cigarette smoking just made them cough, so this was the rationale of trying to discourage sanatorium patients from smoking. It was merely related to this mechanical factor of the rupture of a blood vessel in a cavity. You could

[Interprétation]

dustrie produise. Je voulais seulement savoir si vous étiez au courant de cette opinion?

Dr. Jeanes: Oui; je partage leur opinion, monsieur.

Le président: Oui, monsieur Knowles?

M. Knowles: Monsieur le président, j'ai été assez intrigué par les statistiques présentées plus tôt, à l'effet que la fréquence de la tuberculose avait diminué au cours des années surtout grâce aux efforts de l'Association nationale de lutte contre la tuberculose, tandis qu'en même temps la fréquence de la consommation de la cigarette a augmenté, ce qui semble indiquer que peut-être il n'y a pas tant de rapport entre l'usage du tabac et la tuberculose comme on pourrait le croire.

Si c'est le cas, apparemment nous pourrions trop insister sur la consommation de la cigarette, et il y a peut-être d'autres causes qui expliquent l'augmentation d'emphysème et de cancer du poulmon? Quel commentaire pourriez-vous faire là-dessus?

Dr. Jeanes: Monsieur, je pourrais insister certainement sur le fait qu'il n'y a pas de rapport entre l'usage de la cigarette et la tuberculose. La cause immédiate de la tuberculose est le bacille tuberculeux et vous pouvez développer une tuberculose active si vous inhalez ou si vous ingérez ces bacilles et si votre corps est dans un tel état de résistance que vous ne contrôlez pas l'infection. La tuberculose est une maladie infectieuse bacillaire du poulmon. Cela ne se rapporte pas du tout à la cigarette et la maladie progresse. Les conditions dont nous parlons, la bronchite chronique et l'emphysème sont simplement des dégénéralions du poulmon causées par l'irritation due à la fumée du tabac. Elles ne sont pas reliées de quelque façon que ce soit.

M. Knowles (Norfolk-Halifax): N'est-il pas vrai cependant, que dans les sanatoriums, on dissuade les malades de fumer la cigarette?

Dr. Jeanes: Oui, cela est très vrai, monsieur. La raison est la suivante et cela ne se voit pas aussi souvent qu'autrefois. Si vous avez un malade qui a une grande cavité tuberculeuse dans le poulmon, il y a toujours un grand danger qu'il puisse rompre un vaisseau sanguin et avoir une hémorragie. Si vous avez une hémorragie et que vous avez la tuberculose cela peut-être désastreux. Donc, on fait tout ce qu'on peut pour le dissuader de tousser afin d'éviter cette complication très grave. La fumée de cigarette les faisait tousser. Voilà donc la raison pour laquelle on tente de dissuader les malades au sanatorium de fumer. C'est simplement à cause de ce

[Text]

limit the spread of infection and this complication the less they coughed, and cigarette smoking made them cough more so you tried to discourage them. That is the important immediate factor.

From the long-term point of view you were trying to inculcate in these people the principles of good health. You were thinking of their lines in the future, and if you were treating them for one serious disease you seized the opportunity, because as chest physicians we were interested in lungs, to try to educate them about the health of their lungs in the future.

Mr. Knowles (Norfolk-Halifax): Thank you.

The Chairman: Are there any other questions?

Mr. Foster: I have a supplementary to this question. Your Association spends thousands of dollars every year taking chest X-rays. I wonder if you have ever given thought to the idea of taking sputum samples and having these checked and reporting back to the patient whether the cells coughed up from the bronchi are in an advanced state and might be suspicious of cancer? Surely the danger from cancer and these other diseases is greater than TB now. Has your Association considered this or are there practical problems that make it impossible to do so?

Dr. Jeanes: Yes, we have considered this as a matter of program and it is being done on a trial basis, principally in Toronto, although some of our other associations are concerned with this. There are practical problems. Where is the other place?

Miss Grant: In British Columbia.

Dr. Jeanes: British Columbia as well, in Vancouver. The practical problems are finding sufficient staff to do this particular examination of the sputum, because it is a fairly technical procedure and it has to be done with a very high degree of accuracy. You can do nothing worse to an individual than to report a false positive and then subject him to the problems of detailed X-ray investigation, perhaps a bronchoscopy, and then at the end, when you put his life in misery for a month, say, "Sorry, but we cannot find your lung cancer." Therefore, your standards of sputum examination for cancer cells have to be very high and it produces dreadful problems when you get false positives. But it is

[Interpretation]

facteur mécanique de rupture d'un vaisseau sanguin dans une cavité. Vous pouvez limiter l'étendue de l'infection et de cette complication si vous les empêchez de tousser et comme ils toussent plus lorsqu'ils fument, on essaie de les en dissuader. Voilà le facteur immédiat important.

A plus long terme, on essaie de les inculquer des principes de bonne santé. On pense à leur vie future et si on les traite pour une maladie grave, on saisit cette occasion parce qu'à titre de médecins des poumons nous sommes intéressés aux poumons, pour essayer de les renseigner sur la santé de leur poumon pour l'avenir.

M. Knowles (Norfolk-Halifax): Merci.

Le président: Y a-t-il d'autres questions?

M. Foster: J'ai une question supplémentaire à celle-ci. Votre Association dépense des milliers de dollars chaque année pour faire des radiographies pulmonaires. Je me demande si vous n'avez jamais songé à prendre des prélèvements de salive pour les faire analyser et ensuite faire rapport aux patients de l'état dans laquelle se trouve les cellules bronchiales, et qu'elle était la possibilité d'avoir un cancer? Sûrement le danger du cancer et de ces autres maladies est beaucoup plus grand que la tuberculose maintenant. Votre Association a-t-elle étudié ce problème ou y a-t-il des problèmes pratiques qui rendent cela impossible?

Dr. Jeanes: Oui, nous avons étudié cela comme faisant partie d'un programme et c'est une chose que l'on fait à titre d'essai, surtout à Toronto, même si d'autres associations s'y intéressent aussi. Il y a des problèmes pratiques qui se posent. Où est l'autre endroit?

Mlle Grant: En Colombie-Britannique.

Dr. Jeanes: En Colombie-Britannique aussi bien qu'à Vancouver. Le problème pratique consiste à trouver suffisamment de personnel pour faire ces examens particuliers du crachat, parce que c'est un problème assez technique et qu'il faut le faire avec un très haut degré d'exactitude. On ne peut rien faire de pire à un individu que de faire un faux rapport et ensuite de lui faire subir tous les ennuis d'une radiographie détaillée peut-être une bronchoscopie et le rendre malheureux pendant un mois, pour enfin lui dire: «Domage mais nous ne pouvons pas découvrir votre cancer du poumon.»

Par conséquent, vos normes d'examen du crachat pour y découvrir des cellules cancé-

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being done. Dr. Norman Delarue and his group in Toronto are doing this on a group of Eaton's employees who were heavy smokers. When they come for their annual chest X-ray they also have a sputum test. This is being done on a study basis at the moment to work out just how practical this is; it is also being done by Dr. Grzybowski and his group in Vancouver.

Mr. Foster: It seems to me that if the technical problems in this could be worked out the educational impact would be terrific.

Dr. Jeanes: Yes.

The Chairman: A supplementary question, Mr. Mather.

Mr. Mather: We had testimony along this line, as I recall, by a member of Dr. Delarue's staff, who impressed me a great deal. He said that whereas many people go to a doctor, have an X-ray of their lungs, are told the X-ray does not show any shadow or anything indicating a breakdown and go away perhaps reassured and continue smoking, in effect, according to this doctor, it may well be that the ordinary X-ray in a doctor's office does not pick up the symptoms or the characteristics of decay or breakdown in the lung quick enough to in the end save or help the victim.

As I say, I was very impressed by his testimony at that time. I know a number of personal friends who are heavy smokers and who occasionally go and have a checkup with their doctor. Their doctor gives them an X-ray, there is nothing indicated and they go away and continue to smoke. But according to that doctor, Dr. Delarue's staff man, this is not a very safe situation because really the ordinary X-ray does not pick up the symptoms quick enough to allow arresting it until perhaps it is too late. Would you comment on that?

Dr. Jeanes: Yes sir. If I could with great respect refer to your terminology, it is the patient who has symptoms and these are all important for the early diagnosis of lung cancer—the cough that an individual develops that he did not have two weeks ago and persists. We have a pamphlet that we call *The Doctor's Detectives* in which we refer to the fact that the physician in trying to diagnose lung cancer must use all the tools at his disposal,

[Interprétation]

reuses doivent être très élevées. Donc ces analyses pour rechercher des cellules cancéreuses sont faites dans certains cas. Il peut y avoir de graves problèmes lorsque nous ne sommes pas certains. Le Dr. Norman Delarue et son équipe à Toronto font des essais avec des employés d'Eaton qui sont des gros fumeurs. Lorsqu'on fait une radiographie, une fois par année on analyse également les crachats. Ceci se fait à titre d'essai seulement afin de savoir si cette méthode est rentable. Dr. fait la même chose avec son groupe à Vancouver.

M. Foster: Il me semble que si l'on pouvait régler le problème technique, cela aurait des répercussions relatives à l'éducation des plus intéressantes.

M. Jeanes: En effet.

Le président: Vous avez une question supplémentaire, M. Mather?

M. Mather: Nous avons eu un témoignage dans ce sens. Si je me souviens bien, un membre de l'équipe du docteur Delarue, nous avons fait rapport à ce sujet et il m'a fort impressionné. Il disait que bien des gens aillent voir un médecin pour faire faire une radiographie, bien qu'ils se fassent dire qu'il n'y a pas d'ombre ou quoi que ce soit qui montre quelque chose d'inquiétant, ils sont rassurés et ils commencent à fumer aussitôt qu'ils sont partis de chez le médecin, selon le médecin il est bien possible que cette radiographie soit insuffisante pour déceler les symptômes ou les caractéristiques d'une dégénérescence du poumon assez vite pour en fin de compte sauver ou aider la victime. Comme je l'ai dit, j'étais fort impressionné par son témoignage. J'ai plusieurs amis qui fument beaucoup et qui de temps à autre vont subir un examen médical général. On leur fait faire une radiographie, on leur dit qu'il n'y a rien d'inquiétant et ils continuent de fumer. Selon ce docteur membre de l'équipe du docteur Delarue, ce n'est pas une situation très sûre, parce qu'une radiographie ordinaire ne peut pas assez vite déceler des signes précurseurs, pour qu'on puisse les arrêter. Pouvez-vous faire des commentaires à ce sujet?

Dr. Jeanes: Tout d'abord, laissez-moi reprendre votre terminologie. Le patient a des symptômes qui sont importants pour les diagnostics précoces du cancer. Une personne contracte la toux qu'il n'a pas eu il y a deux semaines et elle continue. Nous avons une petite brochure qui s'appelle «Le détective du médecin», qui aide le médecin à diagnostiquer le cancer du poumon, car il faut qu'il utilise tout ce qui est à sa disposition. Les

[Text]

of which the patient's symptoms are perhaps the most important lead.

If the patient has positive symptoms, even if your initial X-ray is negative you should then follow up by your careful sputum examination and perhaps by bronchoscopy—and even if these things are negative if the patient has symptoms X-ray him again in two weeks. As I said, you have to use all the tools at your disposal and keep on using them if the patient has suggestive symptoms.

Mr. Mather: Thank you.

Mr. Howe: Year by year research is responsible for more and better types of X-ray equipment. Are there indications that they eventually will come up with something that will check this in the early stages? Sputum tests were mentioned but the former witness said they were too complicated and this method took too long when there were many involved.

Dr. Jeanes: I think the quality of chest X-rays has been very high for quite a number of years. Certainly the routine chest X-ray taken by hospitals, clinics and mobile units of this country is of a uniformly high standard.

You do have some problems of diagnosis in a few patients where a lesion may be very small or hidden behind the heart or a rib or somewhere in the mediastinum, and this is always difficult. But with the ordinary techniques that we have for taking chest X-rays and the high quality of films, I think it must be very unusual. If you take into account that the patient has symptoms which would lead you to take an additional view, perhaps a sideways view, and X-ray is not very likely to miss a significant lesion.

Mr. Osler: The point of the evidence we heard before was that if the X-ray picks up the lesion the lesion is already too far along to be able to do much about it.

Dr. Jeanes: Yes. I think this is a pessimistic view. Unfortunately in lung cancer the prognosis is pessimistic. It is a 5 per cent survival rate in five years. So yes, if you do see the lesion in the X-ray, even though it appears to be operable, the long-term outlook is very gloomy.

How do we find the lesion before you can see it in the X-ray is quite a difficult thing to answer, if it is just the size of a millimeter or so across? As you say, the ordinary X-ray techniques may not show this up. But I think

[Interpretation]

symptômes sont préalablement les meilleurs filets.

Si le patient a des symptômes possibles même si le rayon X est négatif il faut quand même un examen soigné du crachat et faire un prélèvement des tissus et même si c'est négatif, si le patient a des symptômes, il faut le réexaminer deux semaines plus tard. En fait, il faut se servir de tous les instruments disponibles et continuer à s'en servir si certains facteurs laissent croire que le patient pourrait avoir le cancer.

M. Mather: Merci.

M. Howe: A tous les ans, la recherche permet d'avoir un équipement de radiologie de plus en plus perfectionné. Je me demande si éventuellement on pourra déceler le cancer à un moment précoce plutôt que d'effectuer une analyse du crachat. Un témoin vient de dire que cette méthode est trop compliquée et prend trop de temps au cas où il y aurait beaucoup de personnes.

Dr. Jeanes: Je pense que la qualité des radiographies pulmonaires a été excellente pendant plusieurs années. Par exemple, un examen de routine dans les cliniques, les unités mobiles et les hôpitaux dans ce pays sont d'une qualité très élevée, en général.

Vous avez évidemment certains problèmes de diagnostic chez quelques patients où une lésion, peut-être très petite, où cachée derrière le cœur ou une côte, ou quelque point dans le médiastin, et c'est toujours difficile dans ces cas-là. Mais avec les techniques ordinaires que nous avons pour les radiographies pulmonaires, avec des films très sensibles, je pense que nous sommes assez perfectionnés. Par exemple, si un patient à des symptômes qui vous font prendre une radiographie de côté, par exemple, vous risquez fort rarement de vous tromper.

M. Osler: Une autre question. Je pense au témoignage que nous avons déjà entendu, un rayon X indique une lésion et la lésion est tellement avancée qu'on ne peut plus rien faire.

Dr. Jeanes: Oui. Je pense que c'est assez pessimiste. Malheureusement, dans le cancer du poumon, c'est toujours pessimiste comme pronostic. Par exemple, vous savez que vous avez une chance sur cinq de survivre pendant cinq ans. Par conséquent, oui, si vous voyez la lésion dans le rayon X, en général, les perspectives sont assez sombres à long terme. Comment trouver la lésion avant de pouvoir la voir sur la radiologie, c'est assez difficile, parce qu'il peut y avoir qu'un millimètre. Et les techniques de la radiologie ordinaire

[Texte]

that this is where the individual astute physician of the patient, the family doctor, is still all important in medicine. If the patient has sense enough to go to him and say, "I have a cough and it is persistent," and the doctor follows it up and is really prepared to investigate this patient and to reinvestigate him in two or three weeks time, this may be the greatest hope in diagnosing a cancer sufficiently early that it can be treated with nearer 100 per cent success.

Mr. Howe: They tell us that the general practitioner is gradually disappearing.

Dr. Jeanes: It is a tragedy because the good family doctor is all-important. If he knows the man comes in and says "I have had a cough for two weeks," he will know whether or not he is a good witness, not just a grumbler. It may be the most important thing in life to have a good family doctor.

The Chairman: Mr. Haidasz.

Mr. Haidasz: Mr. Chairman, I would just like to ask the witnesses this evening whether in their recommendations they limit tobacco in the form of cigarettes to the exclusion of pipe tobacco and cigars as far as advertising is concerned. Also, whether the word "may" in the fourth recommendation should not be more positive and perhaps be substituted by the word "is" so that it will read "...is injurious to health."

Dr. Jeanes: Yes sir, our recommendation at the moment is concerned with cigarettes only because we feel that this is the extremely serious factor. Pipes and cigars are not in the same category, so we are limiting this to cigarettes at the moment.

In respect of substituting "is" for "may", we feel that we have been very strong in the earlier part of our brief and I would be very happy to change the word "may" to "the contents are injurious to health."

Mr. Osler: Could you not be sued for that?

The Chairman: A supplementary, Mr. Osler?

Mr. Osler: Yes, Mr. Chairman. I think it is obvious to all of us that this is not in fact a factual statement. There are people who can smoke like furnaces all their lives and nothing happens to them.

Dr. Jeanes: Yes, that is true.

[Interprétation]

ne permettent pas de l'indiquer. C'est pourquoi le médecin qui connaît bien son patient, le médecin de famille bien souvent, est un facteur très important. Si le patient est assez intelligent pour aller le voir et lui dire qu'il tousse et que la toux persiste, le médecin l'examinera et le réexaminera deux ou trois semaines plus tard. C'est ce qui peut l'aider le mieux pour déceler un cancer assez vite pour qu'on puisse le traiter dans presque 100 p. 100 des cas avec succès.

M. Howe: On m'a dit que le médecin général disparaît de plus en plus.

M. Jeanes: C'est tragique parce que le docteur de famille est assez important. C'est lui qui sait que si tel homme vient le voir et lui dit, je tousse depuis deux semaines, que c'est un vrai témoin ce n'est pas une blague. C'est peut-être la chose la plus importante dans la vie d'avoir un bon médecin de famille.

Le président: Monsieur Haidasz.

M. Haidasz: Monsieur le président, je voudrais simplement demander aux témoins ce soir si dans leurs recommandations ils limitent cet usage du tabac en forme de cigarettes à l'exclusion du cigare et de la pipe dans la publicité. En plus, je me demande si la question de la recommandation ne devrait pas être plus affirmative et remplacé par le mot «est nuisible à la santé» au lieu de «peut être nuisible à la santé», pour dire est nuisible à la santé.

M. Jeanes: Oui, notre recommandation se rapporte aux cigarettes seulement parce que nous estimons que c'est là le facteur le plus grave. La pipe et le cigare n'entrent pas dans la même catégorie. Donc, nous nous limitons à la cigarette pour l'instant. Quant à l'utilisation du mot «peut être nuisible à la santé», nous avons été très fermes dans la première partie de notre mémoire et je serais très heureux de modifier mon texte et de dire: «le contenu est nuisible à la santé» plutôt que «peut être nuisible à la santé».

M. Osler: Est-ce qu'on ne pourrait pas vous poursuivre pour cela?

Le président: Une question supplémentaire, monsieur Osler.

M. Osler: Oui, je pense que tout le monde voit qu'il ne s'agit pas d'une déclaration de fait. Il y a des gens qui peuvent fumer comme des cheminées et ne pas en mourir.

Dr. Jeanes: Oui, c'est vrai.

[Text]

Mr. Osler: So it would be extremely dangerous to change that to "will be".

Mr. Mather: Mr. Chairman, we had discussed that last point earlier in this session. I thought that the witnesses agreed with the Surgeon General of the United States when he made the exact point: that their present labelling is weak where it says "may" and he recommends it should say "shall" or "does"—because it is injurious to health.

In respect of the legal difficulties, I am sure that if the government of the United States or the government of this country decided to legislate that there should be a clear-cut warning to the public on the hazards of cigarette smoking the cigarette industry or anybody else would hardly be in a very good position to upset that ruling. After all, these witnesses, our Committee and any other group we have heard have nothing else to sell but health.

Mr. Osler: Mr. Chairman, I want to make it quite clear I am on the Hon. Member's side. However, I read into the record an example of an 85 year old man who smoked two packages of cigarettes a day for 40 years and he really was in better health than practically anybody around the country. There are people it does not seem to effect although statistically, it affects most people.

Miss Grant: There are immunes to everything.

The Chairman: Mr. Osler, do you have a supplementary question?

Mr. Osler: Yes, a short one.

Mr. Foster: My question concerns the thinking or the emphasis the Canadian Medical Association places on this. One of our previous witnesses, in comparing the incidence of cancer-indicating cells from sputum in a specific group of women.

I believe, the 40 to 50 year age group said that in this group one possibly would find perhaps two positive Pap smears and perhaps 17 samples of sputum indicating a serious problem in the bronchials and lungs. Why does the Canadian Medical Association recommend an annual Pap smear for women over 30 or 35, I believe it is, and yet does not recommend a routine check of sputum samples where the person is a heavy smoker? Also, would it be possible to prove by a sputum test whether or not they were reaching the stage of a cancer situation in the lung? Could you comment on this?

Dr. Jeanes: This is a very constructive idea. As I indicated earlier, we have been con-

[Interpretation]

M. Osler: Ce serait peut-être dangereux de le modifier pour dire «est nuisible à la santé».

M. Mather: Nous en avons parlé plus tôt au cours de la séance et je pensais que les témoins reconnaissaient comme leur chirurgien général des États-Unis que l'étiquetage actuel n'est pas tellement bon, on dit «peut être nuisible à la santé» et ne recommande de dire «sera» ou «est nuisible à la santé». Quant aux difficultés juridiques que cette mesure entraînerait je suis certain que si le gouvernement des États-Unis ou du Canada décidait d'adopter une loi recommandant un investissement bien clair pour le public au sujet des risques entraînés par la cigarette, l'industrie de la cigarette ou n'importe qui d'autre ne serait pas en bonne position pour renverser cette décision, parce que ces témoins, notre Comité et tout autre groupe que nous bien entendus ne font que protéger la santé.

M. Osler: Monsieur le président, je suis du côté de ce député. Il y a par exemple un homme de 85 ans qui avait fumé deux paquets de cigarettes par jour pendant 40 ans et qui était vraiment en meilleure santé que n'importe qui au Canada. Il y a des gens qui ne sont pas du tout affectés bien que, selon les statistiques, presque tout le monde en est atteint.

Mlle Grant: Il y a des gens qui sont immunisés contre tout.

Le président: Monsieur Osler, avez-vous une autre question supplémentaire?

M. Osler: Oui, une question très brève.

M. Foster: Ma question a trait à l'opinion et l'accent de l'Association canadienne médicale à ce sujet. Un des témoins précédents a comparé l'incidence des cellules cancérogènes dans un groupe déterminé de femmes entre 40 à 50 ans.

Dans ce groupe, on pourrait trouver possiblement deux prélèvements de Pap positifs et 17 échantillons de crachats qui indiquent de graves problèmes des bronches et des poumons. Je me demande pourquoi l'Association canadienne médicale recommande des tests de prélèvement de Pap pour les femmes de plus de 30 ou 35 ans et qu'il n'y a pas de vérification régulière de crachats pour les gros fumeurs. Et il serait possible en faisant des tests de savoir s'il y a un cancer du poumon ou non. Pourriez-vous commenter cela?

M. Jeanes: C'est une idée bien constructive, comme je l'ai dit plus tôt. Nous nous som-

[Texte]

cerned with this study on sputum smears in heavy smokers for only about two or three years—I mentioned Dr. Delarue's work in Toronto and the work in Vancouver—whereas Pap smear studies have been going on for many years because carcinoma of the uterus has been known and has been much more rampant for a long time—much more so than lung cancer. We are only just getting into this lung cancer era. I think your idea is an excellent one and we will perhaps hopefully get into this.

Mr. Foster: Certainly it has been indicated by the sample that the chances of carcinoma of the lung as opposed to carcinoma of the cervix or uterus was something like eight times as great.

Dr. Jeanes: Yes.

The Chairman: If you have no other questions I wish to thank Dr. Jeanes, Mr. Bradley and Miss Grant for their representations on behalf of the Canadian Tuberculosis and Respiratory Disease Association.

Dr. Jeanes: Thank you. Would you allow me to make one correction?

The Chairman: Certainly.

Dr. Jeanes: Unfortunately, there is one error in our brief, and I do apologize for this.

In the middle of page 5, just before Summary and Conclusions, we say "10 mgs. of nicotine." This should read "10 mgs. of tar." I am sorry but the word "nicotine" should be deleted and the word "tar" replaced. We would like to thank you, sir, and the Members of the Committee.

Mr. Howe: We wonder about the tar and the nicotine. Which is the worst offender?

Dr. Jeanes: Well the nicotine is the poison and it is a constituent of tar. Ten milligrams of tar would contain I think one-half a milligram of nicotine, or something like that.

Mr. Howe: It is an ingredient of the tar and it is the dangerous ingredient.

Dr. Jeanes: Yes.

The Chairman: Thank you once again. Ladies and Gentlemen, the meeting will adjourn until 11 o'clock tomorrow morning at which time we will consider Bill S-15. As the Honourable Minister of Health and Welfare will be present I would ask you to read the evidence of the Proceedings of the Standing Committee on Banking and Commerce, No. 7.

[Interprétation]

mes préoccupés de cette étude sur l'étude des frottis de crachats chez les gros fumeurs depuis deux ou trois ans seulement. Le docteur Delarue, à Toronto, un autre à Vancouver font ce genre d'études. Les frottis vaginaux se font depuis longtemps, car le cancer de l'utérus est connu depuis beaucoup plus longtemps que le cancer du poumon. Nous commençons à nous attaquer au cancer du poumon, maintenant. Je pense que votre idée est excellente et nous nous en occuperons.

M. Foster: On a indiqué par le moyen d'échantillons que le carcinome du poumon est huit fois plus élevé que le carcinome de l'utérus.

M. Jeanes: Oui.

Le président: Avez-vous d'autres questions, messieurs? Je voudrais, en votre nom, remercier le docteur Jeanes, M. Bradley et M^{lle} Grant qui ont présenté un mémoire au nom de l'Association canadienne contre la tuberculose et les maladies respiratoires.

M. Jeanes: Permettez-moi d'apporter une correction.

Le président: Certainement.

M. Jeanes: Il y a une erreur dans notre mémoire, au milieu de la page 5, juste avant «résumé et conclusions», nous disons 10 mg. de Nicotine, il faudrait lire 10 milligrammes de goudron, à la place. Nous tenons à vous remercier, monsieur le président, et messieurs les membres du Comité.

M. Howe: Au sujet du goudron et de la nicotine. Quel est le plus dangereux?

M. Jeanes: La nicotine est le poison. C'est un composant du goudron. 10 milligrammes de goudron contiennent un demi-milligramme de nicotine.

M. Howe: C'est un composant du goudron et la nicotine est l'élément dangereux?

M. Jeanes: Oui.

Le président: Merci beaucoup, mesdames et messieurs. Nous allons lever la séance. Nous reprendrons demain matin, à 11 heures, pour étudier le Bill S-15. L'honorable ministre de la Santé et du Bien-être social sera parmi nous. Je vous demanderai donc de lire le compte rendu du Comité sur les questions bancaires et commerciales n° 7 relatif au Bill S-15.

APPENDIX I

CANADIAN TUBERCULOSIS AND
RESPIRATORY DISEASE
ASSOCIATION
343 O'CONNOR STREET, OTTAWA,
ONTARIO

BRIEF TO THE STANDING PARLIAMEN-
TARY COMMITTEE ON HEALTH, WEL-
FARE, AND SOCIAL AFFAIRS CONCERN-
ING THE DANGERS OF CIGARETTE
SMOKING

The Canadian Tuberculosis and Respiratory Disease Association (CTRDA) is concerned, as any health agency must be, with the threat to health created by cigarette smoking. The evidence that cigarette smoking is harmful to health is irrefutable. Uncounted studies, major and minor, have been carried on in countries differing geographically, economically and socially. These studies have invariably come to the same conclusion—cigarette smoking is harmful to health, particularly to the health of the heart and lungs.

The principal studies have been the report to the Royal College of Physicians of London, England, U.S. Surgeon-General's report, and the Study of Ninety-two thousand Canadian Veterans from the Department of National Health and Welfare. The scientific factors established by these studies are incontrovertible. Smoking is hazardous to health. It is a vital factor in the great increase in lung cancer, emphysema and chronic bronchitis.

It is significant that the tobacco industry, which has urgent reason for producing contradictory evidence and immense financial resources for compiling such evidence were it available, has not been able to provide a statistical challenge.

The CTRDA and the Canadian Thoracic Society (CTS) established a very firm attitude towards the problem of cigarette smoking and health, clearly set out in Resolutions passed at annual meetings as follows:

(Canadian Tuberculosis Association Annual Report 1965-66, Report of Resolutions Committee, page 4, Resolution 7). Be it resolved that:—

"The Canadian Tuberculosis Association strengthens and increases its previous commitments against the hazards of cigarette smoking to which is attributed much serious ill health including chronic bronchitis, emphysema, lung cancer and various ailments

APPENDICE I

ASSOCIATION CANADIENNE CONTRE
LA TUBERCULOSE ET LES MALADIES
RESPIRATOIRES
343, RUE O'CONNOR,
OTTAWA, ONTARIO

MÉMOIRE POUR LE COMITÉ PARLEMEN-
TAIRE PERMANENT SUR LA SANTÉ, LE
BIEN-ÊTRE ET LES AFFAIRES SOCIALES
CONCERNANT LES DANGERS DE LA
CIGARETTE

L'Association canadienne contre la tuberculose et les maladies respiratoires est intéressée, comme toute agence de santé doit l'être, par la menace à la santé créée par l'usage de la cigarette. L'évidence que la fumée de cigarette est dommageable à la santé est irréfutable. Un grand nombre d'études—majeures et mineures—ont été faites dans des régions différentes, géographiquement, économiquement et socialement. Ces études ont invariablement abouti à la même conclusion—fumer la cigarette est dommageable à la santé, particulièrement à la santé du cœur et des poumons.

Les principales études ont été: le rapport du Collège royal des médecins de Londres, Angleterre; le rapport du Médecin-chef des États-Unis; et une observation du cas de 92,000 vétérans canadiens par le Ministère de la Santé nationale et du Bien-être. Les facteurs scientifiques établis par ces études sont irréfutables. Fumer est contraire à la santé. C'est un élément positif d'augmentation des cas de cancer du poulmon, d'emphysème, et de bronchite chronique.

Il est significatif que l'industrie du tabac, qui a d'urgentes raisons de produire l'évidence contraire et d'immenses ressources financières disponibles pour le faire, si c'était possible, n'a pas été capable de produire des statistiques pour relever ce défi.

L'Association canadienne contre la tuberculose et les maladies respiratoires et la Société thoracique du Canada ont pris une attitude ferme, vis-à-vis le problème que pose la cigarette par rapport à la santé, et clairement exprimée dans les résolutions suivantes votées aux réunions annuelles:

(Association canadienne antituberculeuse, rapport annuel de 1965-1966—rapport du Comité des résolutions, page 4, résolution 7). Il est résolu que:

«L'ACA renforcisse et augmente ses précédents engagements contre les risques de la fumée de cigarette, auxquels sont attribués de sérieuses maladies, incluant la bronchite chronique, l'emphysème, le cancer du poulmon et plusieurs maladies du cœur et des

of the heart and blood vessels. It recognizes that prevention of these diseases is much more effective than cure and that any preventive programme is best directed toward our young people, but not forgetting the great merit of an appropriate example being set by their elders."

(Canadian Tuberculosis Association Annual Report 1963-64, Report of Resolutions Committee, page 6, Resolution 8). Be it resolved that:—

"Since it is recognized that the inhalation of tobacco tar products has a wide range of harmful effects not only on the respiratory system but other essential body processes, the Canadian Thoracic Society places itself on record as condemning the inhalation of tobacco tar products as detrimental to the general health and welfare of the Canadian people and also incriminating this habit as one of the causative factors of carcinoma of the lung."

The Ontario Tuberculosis and Respiratory Disease Association and the Ontario Thoracic Society in November, 1968 presented jointly with six other health organizations a statement of their policies to the Minister of National Health and Welfare completely along the lines of the above Resolutions.

On the assumption that the Department of National Health and Welfare will set forth the facts on various aspects of smoking hazards, that the Canadian Cancer Society will set out the problem of increase in lung cancer and that the Canadian Heart Association will do the same for the effects of cigarette smoking on the heart, the CTRDA wishes to concentrate on the effects of cigarette smoking as evidenced by the alarming increase in non-infectious lung diseases of which bronchitis and emphysema are the outstanding examples.

In 1967 there were 1,693 deaths from these two diseases in Canada. In round figures this was an increase of 50 per cent in three years. It was more than two and a half times the number of deaths caused by tuberculosis. The sad fact appears to be that Canada is facing a man made epidemic of a non-infectious disease. Doctors estimate that eight out of ten of those dying from these diseases have been heavy cigarette smokers.

Pasteurization of milk and purification of water have removed these factors in tuberculosis and typhoid but we are rapidly

vaisseaux sanguins. L'ACA reconnaît que la prévention de ces maladies est plus efficace que leur traitement et que tout programme de prévention est mieux d'être dirigé vers le groupe de jeunes, mais ne doit pas exclure le bien-fondé de l'exemple que leur doivent leurs aînés.

(Association canadienne antituberculeuse, rapport annuel de 1963-1964—rapport du Comité des résolutions, page 6, résolution 8). Il est résolu que:

«Depuis qu'il est reconnu que l'inhalation du goudron émanant des produits du tabac comporte une grande variété d'effets nocifs, pas seulement sur l'appareil respiratoire, mais sur d'autres processus essentiels de l'organisme, la Société canadienne de thoracologie prend elle-même position en condamnant l'inhalation des produits du tabac, comme nuisible à la santé et au bien-être général des Canadiens et en incriminant aussi cette habitude comme un des facteurs qui cause le cancer du poulmon.»

L'Association ontarienne contre la tuberculose et les maladies respiratoires et la Société de thoracologie de l'Ontario, en novembre 1968, ont présenté conjointement avec six autres organismes de santé, un rapport de leurs politiques, au Ministre de la Santé et du Bien-être, dans le même sens que les résolutions ci-haut mentionnées.

A supposer que le Ministère de la Santé nationale et du Bien-être mette l'accent sur les différents aspects des risques de la cigarette; que la Société canadienne du Cancer présente le problème de l'augmentation du nombre de cancers du poulmon et que l'Association canadienne des maladies du cœur mette en relief les effets de la fumée de cigarette sur le cœur, l'ACTMR veut concentrer son travail sur les effets de la consommation de la cigarette, comme une évidence, dans la hausse alarmante des maladies du poulmon non infectieuses, parmi lesquelles la bronchite et l'emphysème sont deux exemples typiques.

En 1967 il y a eu 1,693 mortalités attribuables à ces deux maladies, au Canada. En chiffres ronds, cela signifie une augmentation de 50%, en trois ans. C'est plus que deux fois et demie le nombre de mortalités causées par la tuberculose. L'évidence nous est apparue que le Canada fait face à une épidémie causée par l'incurie des hommes qui propage des maladies non infectieuses. Les médecins estiment que huit personnes sur dix qui meurent de ces maladies ont été de gros fumeurs de cigarettes.

La pasteurisation du lait et la purification de l'eau ont éloigné les risques de tuberculose et de typhoïde, mais nous les remplaçons en

replacing these by cigarette smoking causing death from lung cancer, heart disease, chronic bronchitis and emphysema—an unique example of a man made epidemic.

The rising death rate from these diseases has not come suddenly. The increasing threat has been observable for some years and the CTA even before it became officially the CTRDA set forth its position in resolutions at the annual meetings of the CTRDA and its medical section CTS as previously stated.

The CTRDA makes a sustained effort to encourage provincial and local associations in anti-smoking programmes. Consultant services are available to them, as well as films, filmstrips, pamphlets and posters. Health education spots are provided to radio stations and to the two TV networks, CBC and CTV. Though literature has been distributed widely to all age groups, most programmes have concentrated on school children, our conviction being that prevention is better than cure.

At present the most impressive provincial programme is that being carried on by the British Columbia Tuberculosis-Christmas Seal Society. The sum of \$20,000 has been set aside for this programme which is an indication of the belief of the organization involved in the value of education.

A number of our local associations across Canada have also developed campaigns and programmes against smoking.

Specific Proposals

The Canadian Tuberculosis and Respiratory Disease Association recommends that all advertising of cigarettes on radio and television be banned. Our reason is that among those who have begun to smoke, this publicity may properly be called advertising, but in pre-school children it would be more accurately described as education to smoke.

There is ample evidence that, when children are indoctrinated before they arrive at school age, it is extremely hard to alter the impressions gained in formative years. At present, in any home with television, radio, or both, a child learns from babyhood on to associate cigarette smoking with glamorous youth, beautiful scenery, luxurious furniture,

fumant la cigarette, cause de mortalités par cancer du poulmon, maladie du cœur, bronchite chronique et emphyseme—un exemple unique d'épidémie causée par l'incurie des hommes.

Le taux croissant des mortalités attribuables à ces maladies ne s'est pas accru soudainement. Le risque croissant a été observé pendant plusieurs années et l'Association canadienne antituberculeuse, avant même qu'elle devienne officiellement l'Association canadienne contre la tuberculose et les maladies respiratoires, a statué ses positions à l'occasion de ses réunions annuelles, ainsi que celles de sa Section médicale, tel que déjà mentionné.

L'Association canadienne contre la tuberculose et les maladies respiratoires fait un effort soutenu pour encourager les programmes anti-cigarettes des associations provinciales et locales. Elles peuvent disposer de plusieurs services, tels que: films, bandes illustrées, dépliants et affiches. Des messages éducatifs sont fournis aux stations de radio et de télévision, de même qu'aux chaînes de la Société Radio Canada, CBC et CTV. Bien que la documentation distribuée puisse convenir à tous les groupes d'âge, la plupart des programmes ont été orientés vers les enfants, dans les écoles, car nous sommes convaincus que la prévention vaut mieux que la guérison.

Actuellement, le programme provincial le plus impressionnant est celui que poursuit la Société du Timbre de Noël de la Colombie-Britannique. Une somme de \$20,000 a été consacrée à la réalisation de ce programme, ce qui indique l'intérêt que cette organisation porte aux priorités de l'éducation. Un certain nombre d'associations locales, à travers le Canada, ont également mené des campagnes et développé des programmes contre les méfaits de la cigarette.

Recommandations

L'Association canadienne contre la tuberculose et les maladies respiratoires recommande:

Que toute publicité sur la cigarette, à la radio ou à la télévision soit bannie. Pour ceux qui ont commencé à fumer, nous considérons que cette publicité peut se présenter comme une forme de sollicitation, mais que pour les enfants d'âge pré-scolaire elle peut être considérée comme une forme d'éducation, une sorte d'entraînement à fumer.

Il est de toute évidence que, chez les enfants qui ont été endoctrinés avant leur arrivée à l'école, il est difficile de changer les impressions fortes incrustées pendant leurs années de formation pré-scolaire. Actuellement, dans toute maison où il y a un appareil de télévision ou de radio, ou les deux, un enfant apprend dès son bas âge à associer

expensive cars, thrilling sports—in short everything pleasant in the adult world. Thus long before a child can understand that cigarette smoking is harmful, he has been conditioned to associate it with pleasure, contentment and prosperity.

CBC and CTV should urge their staff not to smoke on camera. We commend such announcers as Mr. Earl Cameron, Mr. Stanley Burke and Mr. Percy Saltzman and any others who refrain from this practice on camera. Could others be induced to join this group?

Promotional devices such as free gifts and cash prizes used by tobacco companies be made illegal.

Consideration should be given to making it a requirement that tobacco companies print a warning on cigarette packages to the effect that to smoke the contents may be injurious to health. Such a practice has been adopted in the United States. We believe an even better one, though doubtless harder to impose, would be legislation requiring that a red line be put on cigarettes showing at what point the smoker has absorbed 10 mgs. of tar.

Summary and Conclusion

1. That all advertising of cigarettes on radio and television be banned.
2. CBC and CTV should urge their staff not to smoke on camera.
3. Promotional devices such as free gifts and cash prizes used by tobacco companies be made illegal.
4. Consideration should be given to making it a requirement that tobacco companies print a warning on cigarette packages to the effect that to smoke the contents may be injurious to health.

The CTRDA would be glad to cooperate with the government in a study to assess the cost of emphysema and bronchitis to the nation. Those defending cigarette smoking are quick to point out the amount of revenue which the government receives from the sale of cigarettes and also that land which is of almost no economic value for anything else yields a high acre revenue when planted

l'habitude de fumer la cigarette à un enchantement de la jeunesse, à des scènes qui se déroulent dans des décors élégants, des ameublements luxueux, des automobiles dernier cri, des événements sportifs excitants, bref, tout ce qui évoque le merveilleux monde des adultes. Ainsi, bien avant qu'on enseigne à l'enfant que la consommation de la cigarette est nocive, il a été conditionné à associer la cigarette à des motifs de contentement, de plaisir et de prospérité.

Que CBC et CTV incitent les membres de leur personnel à s'abstenir de fumer devant les caméras. Nous recommandons des annonceurs tels que M. Earl Cameron, M. Stanley Burke, M. Percy Saltzman et d'autres qui s'abstiennent de cette pratique devant les caméras. D'autres annonceurs ne pourraient-ils pas être invités à joindre ce groupe?

Que des moyens de promouvoir les ventes tels que cadeaux et prix en argent remis par des compagnies de tabac soient considérés illégaux.

Qu'on attache de l'importance à une requête exigeant que les compagnies de tabac impriment une recommandation sur les paquets de cigarette à l'effet que fumer le contenu peut-être dommageable à la santé. Une telle pratique a été adoptée aux États-Unis. Nous misons sur une méthode plus efficace que celle-là, bien que plus difficile à imposer, et que serait une législation pour obtenir qu'une ligne rouge soit placée sur les cigarettes indiquant à quel point de consommation le fumeur a absorbé 10 milligrammes de goudron.

Conclusion

1. Que toute publicité sur la cigarette, à la radio ou à la télévision soit bannie.
2. Que CBC et CTV incitent les membres de leur personnel à s'abstenir de fumer devant les caméras.
3. Que des moyens de promouvoir les ventes tels que cadeaux et prix en argent remis par des compagnies de tabac soient considérés illégaux.
4. Qu'on attache de l'importance à une requête exigeant que les compagnies de tabac impriment une recommandation sur les paquets de cigarette à l'effet que fumer le contenu peut-être dommageable à la santé.

L'Association canadienne contre la tuberculose et les maladies respiratoires serait heureuse de coopérer avec le gouvernement dans une étude pour établir le coût de l'emphyseme et de la bronchite, au pays. Ceux qui se portent en défenseur de l'usage de la cigarette s'empressent de faire remarquer le montant du revenu que le gouvernement perçoit sur la vente des cigarettes, ainsi que l'espace occupé

in tobacco. It should be possible to get figures to counter this argument by stating the millions of dollars which are taken from the economy in hospital costs and payment of disability allowances.

The CTRDA commends the government for the steps already taken and particularly for the excellent programme which has been sponsored by the Department of National Health and Welfare. The studies undertaken and the materials produced have been of the highest quality.

Colin Dobell, President

C. W. L. Jeanes, Executive Secretary.

par la culture du tabac sur des terrains qui ne seraient d'aucune valeur économique pour une autre utilisation. Il serait possible de fournir des chiffres pour donner de la force à cet argument en faisant état des millions de dollars qui figurent dans le coût d'opération des hôpitaux et dans le paiement des allocations d'invalidité.

L'ACTMR loue le gouvernement pour les pas franchis et particulièrement pour l'excellent programme qui a été commandité par le Ministère de la Santé nationale et du Bien-être. Les études et les travaux étaient de la plus haute qualité.

Colin Dobell Président

C.W.L. Jeanes, Secrétaire général

OFFICIAL BILINGUAL ISSUE

FASCICULE BILINGUE OFFICIEL

HOUSE OF COMMONS

CHAMBRE DES COMMUNES

First Session

Première session de la

Twenty-eighth Parliament, 1968-69

vingt-huitième législature, 1968-1969

STANDING COMMITTEE

COMITÉ PERMANENT

ON

DE LA

HEALTH, WELFARE AND

SANTÉ, DU BIEN-ÊTRE SOCIAL

SOCIAL AFFAIRS

ET DES AFFAIRES SOCIALES

Chairman

M. Gaston Isabelle

Président

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MAY 30 1969

UNIVERSITY OF TORONTO

MINUTES OF PROCEEDINGS
AND EVIDENCE

PROCÈS-VERBAUX ET
TÉMOIGNAGES

No. 25

TUESDAY, APRIL 22, 1969

LE MARDI 22 AVRIL 1969

Respecting

Concernant

BILL S-15,

LE BILL S-15,

An Act to amend the Food and Drugs Act and the Narcotic Control Act and to make a consequential amendment to the Criminal Code

Loi modifiant la Loi des aliments et drogues et la Loi sur les stupéfiants ainsi que, par voie de conséquence, le Code criminel

Appearing:

A comparu:

Hon. John Munro

Minister of National Health
and Welfare

Ministre de la Santé nationale et du
Bien-être social

WITNESSES—TÉMOINS

(See Minutes of Proceedings)

(Voir Procès-verbaux)

The Queen's Printer, Ottawa, 1969
L'Imprimeur de la Reine, Ottawa, 1969

STANDING COMMITTEE ON
HEALTH, WELFARE AND
SOCIAL AFFAIRS

Chairman
Vice-Chairman

and Messrs.

Forget,
Fortin,
Foster,
Gendron,
Godin,
Haidasz,
Howe,

M. Gaston Isabelle
Mr. Steve Otto

Knowles (Norfolk-
Haldimand),
Knowles (Winnipeg
North Centre),
Mrs. MacInnis (M^{me}),
McBride,
Osler,

(Quorum 11)

La secrétaire du Comité,
Gabrielle Savard,
Clerk of the Committee.

COMITÉ PERMANENT DE LA
SANTÉ, DU BIEN-ÊTRE SOCIAL
ET DES AFFAIRES SOCIALES

Président
Vice-président

et Messieurs

Paproski,
Ritchie
Robinson,
Rochon,
Rynard,
Yanakis—(20).

Pursuant to S.O. 65(4)(b)

Conformément à l'article 65(4)(b) du
Règlement

¹ Replaced Mr. Mather on April 22, 1969.

¹ Remplace M. Mather le 22 avril 1969.

ORDER OF REFERENCE

THURSDAY, March 27, 1969.

Ordered,—That Bill S-15, An Act to amend the Food and Drugs Act and the Narcotic Control Act and to make a consequential amendment to the Criminal Code be referred to the Standing Committee on Health, Welfare and Social Affairs.

ATTEST:

Le Greffier de la Chambre des communes
ALISTAIR FRASER
The Clerk of the House of Commons

ORDRE DE RENVOI

Le JEUDI 27 mars 1969

Il est ordonné,—Que le Bill S-15, Loi modifiant la Loi des aliments et drogues et la Loi sur les stupéfiants ainsi que, par voie de conséquence, le Code criminel, soit déferé au comité permanent de la santé, du bien-être social et des affaires sociales.

ATTESTÉ:

[Text]

MINUTES OF PROCEEDINGS

TUESDAY, April 22, 1969,
(30)

The Standing Committee on Health, Welfare and Social Affairs met this day at 11:20 o'clock a.m. The Chairman, Mr. Gaston Isabelle, presided.

Members present: Mrs. MacInnis, Messrs. Forget, Foster, Gendron, Haidasz, Howe, Isabelle, Knowles (Winnipeg North Centre), Osler, Paproski, Rochon, Rynard, Yanakis (13).

Appearing: The Hon. John Munro, Minister of National Health and Welfare.

Witnesses: From the Department of National Health and Welfare: Dr. R. A. Chapman, Director General; Dr. A. C. Hardman, Deputy Director General; Food and Drug Directorate; and Mr. J. D. McCarthy, General Counsel.

The Committee proceeded to the consideration of Bill S-15, An Act to amend the Food and Drugs Act and the Narcotic Control Act and to make a consequential amendment to the Criminal Code.

Clause 1 was called.

The Minister read a prepared statement and answered questions of Members. Drs. Chapman and Hardman and Mr. McCarthy also supplied information to the Members.

Clause 1 was allowed to stand.

At 1:00 o'clock p.m., the Committee adjourned to 11:00 o'clock a.m. Thursday, April 24, 1969 to resume consideration of the subject-matter of Bills on smoking.

[Texte]

PROCÈS-VERBAL

Le MARDI 22 avril 1969
(30)

Le Comité permanent de la Santé, du Bien-être social et des Affaires sociales se réunit aujourd'hui à 11 h. 20 du matin, sous la présidence de M. Gaston Isabelle.

Présents: M^{me} MacInnis, MM. Forget, Foster, Gendron, Haidasz, Howe, Isabelle, Knowles (Winnipeg-Nord-Centre), Osler, Paproski, Rochon, Rynard, Yanakis (13).

A comparu: L'hon. John Munro, Ministre de la Santé nationale et du Bien-être social.

Témoins: Du Ministère de la Santé nationale et du Bien-être social: D^r R. A. Chapman, directeur général; D^r A. C. Hardman, directeur général adjoint, direction des Aliments et Drogues; M. J. D. McCarthy, avocat général.

Le Comité entreprend l'étude du bill S-15, Loi modifiant la Loi des aliments et drogues et la Loi sur les stupéfiants ainsi que, par voie de conséquence, le Code criminel.

L'article 1 est mis en discussion.

Le Ministre lit un exposé, il répond aux questions des députés. Les docteurs Chapman et Hardman et M. McCarthy répondent aussi aux questions des membres du Comité.

L'article 1 est réservé.

A 1 heure de l'après-midi, le Comité s'ajourne à 11 heures du matin le jeudi 24 avril pour continuer l'étude de la teneur des bills sur la cigarette et le tabac.

La secrétaire du Comité,
Gabrielle Savard,
Clerk of the Committee.

[Texte]

EVIDENCE

(Recorded by Electronic Apparatus)

Tuesday, April 22, 1969.

The Chairman: Ladies and gentlemen, I now see a quorum. We have before us today Bill S-15, An Act to amend the Food and Drugs Act and the Narcotic Control Act and to make a consequential amendment to the Criminal Code.

I wish to welcome the Minister of National Health and Welfare and also three officers of the Department, Dr. R. A. Chapman, Mr. J. D. McCarthy and Dr. A. C. Hardman. I will now call Clause 1.

On Clause 1—"Contraceptive device"

The Chairman: I will ask the Minister to make his opening statement at this time.

Hon. J. C. Munro (Minister of National Health and Welfare): Mr. Chairman, members of the Committee, I am pleased to be present today on behalf of the legislation you have before you, namely Bill S-15. As I pointed out at the second reading, the Bill is a consolidation of two previous bills, one dealing with contraceptive devices and family planning information, the other with a new category of drugs.

On the first part of the legislation, I do not think that I am exaggerating when I say that it is a long awaited improvement to our body of law. We all know that the ban on contraceptives has become a dead letter—the last prosecution was in the nineteen-thirties—yet the ban on advertising and dissemination of information has been effectively preventing a great number of people from planning their families because of a lack of knowledge and awareness. This has been especially true in the economically deprived areas of our country both urban and rural.

This Bill, therefore, recognizes the right of individuals to decide the management of their families, including the number and spacing of children—a right designated by the United Nations' World Leaders Declaration on Population as a basic human right. The Bill also permits the distribution of the knowledge and

[Interprétation]

TÉMOIGNAGES

[Enregistrement électronique]

Le mardi 22 avril 1969

Le président: Mesdames et messieurs, je crois que nous avons quorum. Nous devons étudier le bill S-15, *Loi modifiant la Loi des aliments et drogues et la Loi sur les stupéfiants ainsi que, par voie de conséquence, le Code criminel*.

Je tiens à souhaiter la bienvenue au ministre de la Santé nationale et du Bien-être social et aussi aux trois fonctionnaires du ministère, le Dr. R. A. Chapman, M. J. D. McCarthy et de Dr. A. C. Hardman. Je propose la discussion de l'article un.

Article 1—"Produit anticonceptionnel".

Le président: Le ministre fédéral de la Santé fera maintenant la déclaration d'ouverture.

L'hon. John Carr Munro (Ministre de la Santé nationale et du Bien-être social): Monsieur le président, messieurs les membres du Comité, je suis heureux de vous parler du bill que vous avez en main, c'est-à-dire, le Bill S-15. Comme je l'ai signalé à l'étape de la deuxième lecture, le Bill S-15 groupe deux anciens projets de loi, l'un traitant des contraceptifs et de l'information relative à la planification familiale, l'autre traitant d'une nouvelle catégorie de drogues.

Je ne pense pas exagérer en disant que, pour la première partie de la législation, il s'agit d'une nette amélioration de l'ensemble de nos lois. Nous savons tous que l'élimination des contraceptifs est plus ou moins lettre morte, la dernière poursuite à ce sujet ayant eu lieu dans les années 1930. Par contre, la lutte contre la publicité et la diffusion de renseignements a, de fait, empêché un grand nombre de famille de planifier les naissances, à cause du manque de renseignements et d'éveil au problème. Ceci se vérifie surtout dans les régions économiquement faibles de notre pays, tant les régions urbaines que rurales.

Ce projet de loi reconnaît donc aux personnes le droit de planifier leur famille, y compris le nombre d'enfants qu'ils auront et l'espacement des naissances, c'est un droit reconnu par la Déclaration des Nations Unies pour le contrôle de la population, comme un droit fondamental. Il prévoit aussi la diffusion

[Text]

means of family planning to parents who desire or who may desire so to plan.

The legislation does not seek to force family planning on anyone. That must remain a personal judgment, based on individual concepts of freedom, conscience and the existing family situation. However, the legislation should result in a broader distribution of information, so that everyone—rich or poor, rural or urban, with or without readily available and affordable medical personnel and facilities—can be aware of the why and the how, the pros and the cons of manner and method.

No one will deny that there are families who may fervently desire such information, whom such information may truly benefit, who are not now receiving it. Certainly, for economic and socio-psychological reasons, there are many presently trapped in poverty who would like to know, who need to know—and they have the right to know. Yet all too often, family planning information has been restricted to the middle and upper classes, who have the sophistication and the easy access to trained counsel which the poor do not, because of the type of advertising and distribution campaign necessary to reach them has been restrained by the law as it presently stands.

I also would like to mention that passage of this particular legislation has been awaited anxiously by many Canadian hospitals, provincial and local health units, social agencies and private planning groups that have been quietly at work for years and now desire to extend the reach of their programs. In short, this Bill recognizes present realities and needs, and opens the door to enable various public and private agencies to react positively to changing social patterns which affect the family and thus the total fabric of Canadian life.

The next few clauses of the Bill propose a series of amendments of a technical or administrative nature only.

In the administration of the Food and Drugs Act and the Narcotic Control Act certificates of analysis traditionally have been employed. The language used in the respective sections of these acts, however, has not been identical and the purpose of this amendment is merely to introduce uniformity into the provisions of the Narcotic Control Act and the three areas of the Food and Drugs Act where such certificates of analysis are called for.

Complete protection is given to the person against whom the certificate will be produced and, with leave of the court, that person may

[Interpretation]

de l'information à ce sujet aux parents qui désirent ou pourraient souhaiter planifier leurs familles. La loi ne cherche pas à imposer la planification familiale à qui que ce soit. Cela doit être une décision personnelle fondée sur les concepts personnels de liberté, de conscience et de la situation familiale. Toutefois, on distribuera plus librement les renseignements pour que tous, riches et pauvres, ruraux ou urbains, ayant ou non à leur disposition le personnel médicale nécessaire, puissent connaître le pourquoi et le comment, le pour et le contre des méthodes à suivre.

Personne ne niera que des familles qui pourraient souhaiter avoir ces renseignements et qui pourraient en tirer profit ne les reçoivent pas présentement. Il y a certainement plusieurs familles qui, pour des raisons économiques, sociales et psychologiques, sont enlisées dans la pauvreté et qui désirent avoir ces renseignements, qui en ont besoin, et elles ont le droit d'être renseignées. Trop souvent, les informations ont été limitées à la classe moyenne et à la classe supérieure qui ont plus d'accès que les pauvres aux divers conseillers, étant donné que la publicité était restreinte en vertu de la Loi.

Aussi, je tiens à dire que l'adoption de cette loi est attendue impatiemment par beaucoup d'hôpitaux canadiens, par les services de santé, par les agences sociales, par les organisations de planification familiale, et bien d'autres groupes œuvrent en silence dans ce domaine et veulent étendre la portée de leurs programmes. En résumé, le projet de loi répond aux besoins actuels et permet aux divers organismes publics et privés de réagir positivement face aux tendances sociales en évolution qui affectent la famille et ce faisant l'évolution de la vie au Canada. Les autres articles du projet de loi présentent une série de modifications d'ordre administratif ou technique seulement.

L'Administration de la Loi des aliments et drogues et de la Loi sur les stupéfiants utilise couramment les certificats d'analyse. Le libellé des articles de ces lois qui traitent de ce sujet n'est pas identique et le but de cette modification est d'apporter plus d'uniformité dans les termes des articles portant sur le certificat d'analyse. On offre une protection totale à la personne contre laquelle on utiliserait le certificat et, par ordre de la Cour, cette personne pourra contre-interroger l'analyste. Elle pourra, aussi, sous ordre de la Cour, présenter l'analyste comme son propre témoin.

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call the analyst for cross-examination. He can, of course, if he wishes, call the analyst as his own witness, without leave of the court.

A further amendment of a rather technical kind deals with a provision of the Act which, in effect, exempts from it any food or drug that is manufactured for export to another country. This exemption has not, however, applied to controlled drugs and, by this amendment, will not apply to the new category of restricted drugs either.

A further technical amendment deals with the authority to control a substance which is not in itself a drug, but which may be used in connection with the manufacture of a controlled drug or a restricted drug. To do this it is necessary to add the words "or other substance" to the definition of what may be listed in the schedule.

There is one further amendment to Part III of the Food and Drugs Act. This relates to the offence of possession for the purpose of trafficking in a controlled drug. The present section provides that if the individual legally acquired possession of the drug, this shall be an absolute defence regardless of whether that possession was for the purpose of trafficking. This Bill proposes to amend that provision by making this no longer an absolute defence. A court may or may not, on the facts of the particular case, find the circumstances under which the drug was obtained sufficient to satisfy it that the possession was not for purposes of trafficking, but the manner in which the drug was obtained will no longer foreclose the court from examining the purpose for which it was obtained.

The balance of the Bill deals with the creation of a new Part IV of the Food and Drugs Act entitled "Restricted Drugs".

In 1962, following the thalidomide tragedy, the Food and Drugs Act was amended to create a new schedule of drugs, the sale and distribution of which were prohibited. The only drugs placed in this Schedule at that time were thalidomide and LSD.

This prohibition of the sale and distribution was considered sufficient at that time and there was no evidence of any illicit manufacture or distribution of either of these. Arrangements were made to ensure that this prohibition did not affect the scientific research which was being carried out with respect to LSD. This research is still going on, but the results to the present time have not established its place in therapy.

Within the last three years, however, this drug has achieved a certain unfortunate popularity with a number of young people, both here in Canada and in a number of

[Interprétation]

Il y a aussi un autre amendement qui est plutôt technique et qui traite de l'article de la Loi qui, en fait, en exempte tous les aliments et drogues fabriqués pour l'exportation. Cette exemption ne s'applique pas aux drogues contrôlées et aux termes de l'amendement, ne s'appliquera pas à la nouvelle catégorie de drogues de catégorie restreinte. Un autre amendement de portée technique traite du contrôle de certaines substances qui en soi ne sont pas des drogues mais qui peuvent être utilisées pour la fabrication de drogues, contrôlées ou de catégorie restreinte. Pour le faire, il est nécessaire d'ajouter les mots «et autre substance» à la définition de ce qui est inscrit à l'annexe.

Il y a un autre amendement à la Partie III de la Loi des aliments et drogues. Il s'agit de l'infraction découlant de la possession d'une drogue contrôlée en vue de la vente. L'article prévoit que si on entre légalement en possession d'une drogue, on est entièrement protégé même si on a l'intention de la vendre. Par ce projet de loi, nous voulons éliminer cette protection totale. Un tribunal, face aux faits présentés en cour, peut accepter ou non que les circonstances dans lesquelles on s'est procuré la drogue garantissent que l'achat n'avait pas été fait en vue de la revente, mais la manière de se procurer les drogues n'empêchera plus les tribunaux de vérifier la raison de l'acquisition de la drogue. Le reste du bill traite de la création d'une nouvelle Partie IV à la Loi des aliments et drogues, intitulée «Drogues d'usage restreint».

En 1962, après la tragédie de la thalidomide de la Loi des aliments et drogues a été modifiée par l'insertion d'une nouvelle annexe de drogues dont la vente et la distribution étaient interdites. Les seules drogues inscrites à l'annexe à ce moment-là étaient la thalidomide et le LSD.

La défense de vendre et de distribuer ces produits était considérée suffisante à ce moment-là et il n'y avait de preuves de fabrication ou de distribution illégales de l'une ou l'autre. Des ententes ont été faites afin de s'assurer de ne pas empêcher la recherche scientifique qui s'effectuait sur le LSD. Les recherches se poursuivent encore mais les résultats n'ont pas encore prouvé que cette drogue pourrait servir en thérapie.

Depuis trois ans, cette drogue a une popularité néfaste chez un grand nombre de jeunes à la fois au Canada et dans d'autres pays. Son utilisation non contrôlée et non médicale

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other countries. Its unsupervised and non-medical use has resulted in many tragedies including chromosome damage, mental breakdown and even several deaths. While the widespread publicity given to these drugs has had a deterrent effect, it has not eliminated the social use of this drug.

The police, in their enforcement activities with respect to narcotics and controlled drugs, have frequently encountered supplies of this drug which can be easily manufactured by a competent chemist with adequate laboratory facilities.

Because unauthorized possession of LSD has not been an offence, the police frequently have been required to return it to the persons in whose possession it was found, notwithstanding the dangers of the use which would clearly follow its return.

It was, therefore, proposed that a new category should be created within the Food and Drugs Act to deal with this problem. The proposal to create such a category to be known as "Restricted Drugs" appeared in Bill S-21 of last year which died on the Order Paper with Dissolution. At that time, LSD was the only drug listed in the proposed Schedule of Restricted Drugs.

More recently, three other powerful and dangerous substances have made their appearance on the illicit market. These substances have, therefore, been included in the proposed Schedule J along with LSD. These three substances had, in the interim, been added to Schedule H, the Prohibited Drug list under the Food and Drugs Act, but with the enactment of Part IV, they will be transferred along with LSD from the Prohibited to the Restricted Drug Schedule.

This legislation will permit additional psychologic substances to be added to Schedule J in the future if this is required. There are a great number of such drugs and natural substances known, but not widely used at present. If the need arises these can be added to the Schedule in order that maximum protection to the public health can be achieved without legitimate research and experimentation being affected.

I mentioned earlier that the provisions of this Bill go back two years when they began as parts of two predecessor bills. A great deal has happened in this field of drug abuse in that time and this has been reflected in the enormous increase in the number of prosecutions under both the Food and Drugs Act and the Narcotic Control Act.

The numbers of prosecutions for possession of a drug listed under paragraph 3 of the Schedule to the Narcotic Control Act

[Interpretation]

a causé de nombreuses tragédies, y compris l'endommagement des chromosomes, la folie et même la mort dans plusieurs cas. L'immense publicité accordée aux drogues a eu des effets néfastes et elle n'a pas éliminé l'utilisation de cette drogue.

En appliquant la Loi sur les narcotiques et les drogues contrôlées, la police a souvent trouvé des quantités de drogues qui pouvaient être fabriquées facilement par un chimiste compétent dans un laboratoire bien équipé.

La possession illégale de LSD n'est pas un délit. La police a souvent été obligée de la remettre aux gens qui en avaient en leur possession sans tenir compte des dangers de son utilisation.

Il a donc été proposé de créer une nouvelle catégorie dans la Loi sur les aliments et drogues pour traiter de cette question. La catégorie proposée appelée «drogues contrôlées» était mentionnée dans le Bill S-21 l'an dernier qui a été dissout à la Chambre. A ce moment-là, le LSD était la seule drogue mentionnée dans cette liste.

Récemment trois autres substances puissantes et dangereuses sont apparues sur le marché illégal. Ces substances seront ajoutées au projet d'Annexe J, comme le LSD. Ces trois substances, entre temps, ont été ajoutées à l'Annexe H des drogues interdits en vertu de la Loi sur les aliments et drogues, mais avec l'application de la Partie IV, elles seront transférées avec le LSD de la liste des drogues interdites à l'Annexe des drogues contrôlées. La loi permettra d'ajouter d'autres substances psychologiques à l'Annexe J à l'avenir, au besoin. Il y a un grand nombre de drogues et de substances naturelles connues, mais qui ne sont pas utilisées aujourd'hui sur une grande échelle. Si le besoin s'en fait sentir, on les ajoutera à l'Annexe pour protéger la santé du public au maximum sans que cela nuise aux recherches et aux expériences légitimes. J'ai dit plutôt que les dispositions du projet de loi remontent à deux ans, lorsque ces dispositions faisaient partie de deux bills précédents. Bien des choses se sont produites dans le domaine de l'abus des drogues et il semble qu'il y ait de plus en plus de poursuites en vertu de la Loi sur les aliments et drogues et la Loi sur le contrôle des narcotiques.

Le nombre des poursuites pour possession de drogues, énumérées en vertu du paragraphe 3 de l'Annexe à la loi sur le contrôle des

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increased during these two years from 493 in 1966 to 1727 in 1968. In spite of the enormous variety of individual situations involved in that number of cases, however, the relevant section of that Act provides very little scope for flexibility, either on the part of Crown prosecutors or presiding judges and magistrates. There is no provision for the Crown to choose to proceed summarily; it is obliged to proceed by way of indictment. There is no provision for a judge or magistrate to impose a fine as a penalty; he is obliged to impose a penal sentence—though he can, of course, suspend it.

This rigidity in the Act has been the subject of increasing criticism from a wide variety of sources, the addiction research agencies of several provinces, the John Howard Society, the Elizabeth Fry Society, the United Church, university-sponsored conferences and judges and magistrates.

Clearly there is need for the introduction of scope for flexibility into this section. For that reason I gave notice in the House on second reading of this Bill that it would be proposed at committee stage that a further amendment to the Narcotic Control Act be included in this Bill.

This amendment will be brought forward by my Parliamentary Secretary. It will provide the flexibility in both procedure and penalties which is now lacking. As well as the presently obligatory procedure of indictment with maximum penalty of seven years in cases of possession, the Crown will be given the option, if it chooses, of proceeding by way of summary conviction, in which case the penalty provisions will be identical to those proposed for Restricted Drugs, that is, on conviction of a first offence a maximum fine of \$1,000 or six months imprisonment or both, and on conviction of a subsequent offence, a maximum fine of \$2,000 or one year imprisonment or both.

Another amendment will be proposed by my Parliamentary Secretary which relates to subsection 2 of section 10 of the Narcotic Control Act, and subsection 2 of section 36 of the Food and Drugs Act, which provides for the issue of a search warrant by a magistrate. The counterpart sections of the Criminal Code provide for the issuance of such warrants by Justices of the Peace, and some difficulties have been experienced in remote areas in locating magistrates for this purpose. For this reason, it is proposed to replace the word "Magistrate" in the appropriate sections of these Acts with the word "Justice".

The omnibus Bill covers a great many areas in the health field, some in a major

[Interprétation]

narcotiques a augmenté au cours des deux ans de 493 en 1966 jusqu'à 1,727 en 1968. En dépit de la variété énorme de situations personnelles impliquées dans un certain nombre de cas, l'article de la Loi prévoit peu de souplesse, même de la part du procureur de la Couronne ou des juges et des magistrats. La Couronne ne peut se contenter de procédures sommaires; on doit procéder par accusation. Les juges ou les magistrats ne peuvent imposer d'amende comme peine, ils sont obligés d'imposer une pénalité, même s'ils peuvent naturellement la suspendre.

La rigidité de la loi a été critiquée par plusieurs, les organismes de recherches sur la narcomanie dans plusieurs provinces, la *John Howard Society*, la *Elizabeth Fry Society*, la *United Church*, les conférences parrainées par les universités, et les juges et magistrats. Il semble vraiment nécessaire d'avoir plus de souplesse dans cet article. Pour cette raison, j'ai saisi la Chambre, lors de la deuxième lecture du projet de loi, qu'on proposerait au Comité, d'insérer dans le projet de loi une autre modification à la Loi sur le contrôle des narcotiques.

La modification sera présentée par mon secrétaire parlementaire. La modification permettra des procédures et des pénalités plus souples, ce qui manque à l'heure actuelle. Tout comme pour la procédure obligatoire d'accusation avec une punition maximum de 7 ans dans les cas de possession, la Couronne sera autorisée à choisir de procéder par voie d'accusation sommaire. Dans ce cas, les punitions seront les mêmes que celles qui étaient imposées pour les drogues contrôlées pour un premier délit, une amende maximum de \$1,000 ou six mois de prison ou les deux, et pour un délit subséquent, une amende maximum de \$2,000 ou un an de prison ou les deux à la fois.

Une autre modification sera proposée par le secrétaire parlementaire. Elle a trait au paragraphe 2 de l'article 10 de la Loi sur le contrôle des narcotiques et au paragraphe 2 de l'article 36 de la Loi sur les aliments et drogues qui prévoit la délivrance d'un mandat de perquisition par un magistrat. Les articles analogues du code criminel prévoient que cela peut être fait par les juges de paix. On a rencontré certaines difficultés à cet égard dans des régions reculées pour nommer les magistrats, c'est pourquoi on propose de remplacer dans certains articles de ces lois le mot «magistrat» avec le mot «juge».

Le Bill Omnibus couvre bien des domaines qui se rattachent à la santé. Certains, de

[Text]

manner and others in a more limited technical manner. My officials and I will be pleased to answer any questions you many have in regard to any of its provisions.

Thank you very much, Mr. Chairman.

The Chairman: Thank you, Mr. Munro. Are there any questions? Mr. Rynard?

Mr. Rynard: Mr. Chairman, I would like to ask, again—I believe I asked this in the House—when this chemical analysis has been done and the inspector has gone in, whether from that sample a sample will be given to the person that manufactured those goods?

Mrs. MacInnis (Vancouver-Kingsway): Mr. Chairman, are we going over the whole business or are we just dealing clause by clause?

The Chairman: We are having a general discussion for the moment.

Mrs. MacInnis (Vancouver-Kingsway): General discussion.

Mr. Rynard: This is a question that was asked in the House and, I believe, the Minister said he would try to look into it and give me an answer in the Committee.

Mr. Munro: If I may, Mr. Chairman, I would like Dr. Chapman, Director, Food and Drug to answer that.

Dr. R. A. Chapman (Director General, Food and Drug Directorate): In response to the question asked by Dr. Rynard, we do not anticipate that a sample of a narcotic, a Restricted Drug or a Controlled Drug that has been seized as evidence will be provided to the accused for independent analysis. This does not preclude, of course, the accused from obtaining expert witnesses to challenge the validity of a method of analysis.

Mr. Rynard: I just want a little more elucidation of that. Why would that not be his right? You have taken a sample, so why would he not have a right to that sample and have his analysis made, if he so wanted to? This would seem to me to be a fundamental right.

Dr. Chapman: Mr. Chairman, in many instances, we actually do not have a sufficient sample in order to divide the sample. In the case of narcotic, for example, it simply may be an eye-dropper or a syringe which has to be taken to the laboratory and very carefully washed out to determine whether or not a narcotic or restricted drug is actually present. Under those circumstances, of course, it just would not be possible to provide a sample.

[Interpretation]

façon importante et dans d'autres cas, il s'agit de questions techniques restreintes. Je serai heureux tout comme mes fonctionnaires de répondre à vos questions.

Le président: Merci, monsieur Munro. Avez-vous des questions à poser? Monsieur Rynard?

M. Rynard: Monsieur le président, j'aimerais poser une question que j'ai déjà posée à la Chambre, à savoir quand l'analyse chimique a été effectuée et quand l'inspecteur y est allé, si, de cet échantillon on donnera un échantillon au fabricant de ce produit?

Mme MacInnis (Vancouver-Kingsway): Monsieur le président, faisons-nous une étude globale de la question ou une étude article par article?

Le président: Pour l'instant, c'est une discussion globale.

Mme MacInnis (Vancouver-Kingsway): Une discussion globale.

M. Rynard: C'est une question qui a été posée à la Chambre et, je crois, que le ministre avait répondu qu'il essaierait de l'étudier et de me donner une réponse au Comité.

M. Munro: Si vous me le permettez, monsieur le président, j'aimerais que le docteur Chapman, directeur des Aliments et Drogues y réponde.

Dr R. A. Chapman (Directeur général des Aliments et Drogues): Monsieur le président, en réponse à la question qui vient d'être posée, nous ne songeons pas à ce que l'échantillon d'un narcotique, d'une drogue contrôlée ou interdite qui est saisi comme preuve soit donné à l'accusé pour une analyse distincte. Cela n'exclut pas naturellement l'accusé de trouver comme témoin des spécialistes pour contester ou non de la validité d'une méthode.

M. Rynard: J'aimerais seulement qu'on précise un peu plus cette question. Pourquoi n'en aurait-il pas le droit? Vous avez pris un échantillon. Pourquoi n'aurait-il pas droit à cet échantillon et à faire faire une analyse s'il le désire? Cela me semblerait un droit fondamental.

Dr Chapman: Monsieur le président, dans bien des cas, nous n'avons pas d'échantillons suffisants pour les subdiviser. Dans le cas des narcotiques, il peut s'agir seulement d'une seringue ou d'un compte-goutte qu'il faut porter au laboratoire et le nettoyer avec soin pour déterminer si cela contenait ou non des narcotiques ou des drogues contrôlées. Dans ce cas, il ne serait pas possible de fournir un échantillon.

[Texte]

Mr. Rynard: Yes, I can see that, but I wonder if there were a sufficient amount would it not be a good point to do so and a point that would protect the man who manufactured it, made it, sold it or whatever the problem was? If there were enough material why should he not have a chance to have his day in court, too, on that point? I can see your point and I think it was very well explained that in many cases the amount involved is so small that it could not be done, but where the amount is large enough, why could it not be done just for protection and to have the thing as clear as possible?

Dr. Chapman: Mr. Chairman, the difficulty is, of course, to write the legislation in such a way that you can differentiate between these two situations. It would seem to me that, as has already been indicated, the accused has the opportunity of obtaining expert witnesses to challenge the validity of methods of analysis and he also has the right with the permission of the court to call the analyst for questioning.

Mr. Munro: If I might, I would like to add something there, Mr. Chairman? This is not any different from, say, the liquor cases under the Liquor Control Act where I do not think the Crown releases the bottles of confiscated liquor to the accused. I do believe that the defence if it wished to have a defence witness of its own—biochemist or an expert witness of some kind—would be given permission to go in to the facility the Crown has which in this case would be the Food and Drug laboratories to conduct his own analysis with the people there, but he would not be allowed to take the substance or whatever it may be away with him.

Mr. Rynard: In other words, his chemist, or whoever he got to go into Food and Drug, would be able to analyse this. I think that probably covers the point.

My other point was about barbiturates. You have now taken the responsibility entirely away from who wrote the prescription. What bothers me about this is that you punish the fellow for having them, but he just continues to get them from whatever source he can. He is not going to tell you.

Mr. Munro: He is not going to what?

Mr. Rynard: He is not going to tell you where he got those barbiturates. If he does, he is probably not telling the truth, so how are you going to stop the source of supply? If you do nab that fellow, he has a friend down

[Interprétation]

M. Rynard: Oui, je peux comprendre cela. Mais s'il y avait une quantité suffisante, ce serait une bonne chose de faire différemment et ne pas protéger la personne qui l'a fabriquée, traitée, vendue ou autre. S'il y avait une plus grande échantillon, pourquoi ne pourrait-il pas avoir la chance de s'en servir devant le tribunal? Je comprends ce que vous voulez dire et votre explication me semble très bonne. Il est vrai que dans bien des cas, la quantité est infime et qu'il serait impossible de le faire, mais si la quantité est suffisante, pourquoi ne pourrait-on pas le faire par mesure de protection et pour mettre les choses très au clair?

Dr Chapman: Monsieur le président, la loi doit être rédigée de façon à pouvoir distinguer ces deux situations. Comme on l'a déjà indiqué, l'accusé peut demander comme témoins des spécialistes pour mettre en doute la validité des méthodes d'analyse. Il peut aussi avec la permission du tribunal, de faire venir l'analyste pour le questionner.

M. Munro: J'aimerais ajouter quelque chose, monsieur le président. Ce n'est pas différent de certains autres cas, comme l'alcool en vertu de la Loi des régies des alcools où je ne crois pas que la Couronne remette les bouteilles confisquées à l'accusé. Je crois que si défense désire un témoin personnel, un biochimiste ou un témoin spécialiste d'une certaine manière aurait le droit de se servir des installations dont la Couronne dispose, comme dans ce cas, les laboratoires des aliments et drogues pour poursuivre ses propres analyses avec les gens qui y travaillent mais il n'aurait pas le droit de prendre la substance ou quoi que ce soit.

M. Rynard: En d'autres termes, son chimiste ou n'importe qui il pourrait trouver pour aller dans les aliments et drogues serait capable d'analyser cela. Cela règle la question, je pense.

Une autre question au sujet des barbituriques. Vous avez à présent enlevé toute responsabilité à celui qui a rédigé l'ordonnance. Ce qui me tracasse est que vous punissez celui qui les a en main, mais on ne se préoccupe pas de la source. Il ne vous le dira pas.

M. Munro: Il ne dira pas quoi?

M. Rynard: Il ne vous dira pas où il a obtenu ces produits. Ou bien, il ne dira pas la vérité. Alors comment trouvera-t-on la source? Si vous arrêtez cet individu, il y a certain de ses amis qui agit de la même façon. C'est

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the street who goes on operating in the same way.

What I am suggesting is that you may make it more difficult to find the source. Because it is rather difficult to get them without a prescription. To me this is a part of it.

Dr. Chapman: Mr. Chairman, the problem previously, of course, was that it was a defence for an accused to prove that he had obtained the barbiturate, the controlled drug, from a legitimate source. But we found that in many instances individuals were going to a number of different physicians, getting these drugs legally and then going out on the streets and peddling them. Under the wording of the present act it was an absolute defence, despite the fact that the intent of the law was being violated.

We have no intention, of course, of interfering with the practice of medicine.

Mr. Rynard: This is the point I was coming to.

Dr. Chapman: This certainly is not our intention. The purpose was as I have indicated.

Mr. Rynard: This is the very point I was going to bring up. So far as the courts are concerned, as I understand it, this absolves from responsibility the person who gives the prescription.

Mr. Munro: What do you mean by "absolves"?

Mr. Rynard: You say the onus is thrown entirely on the peddler, or the fellow who is getting the barbiturate. This is what I understand. He is the one who is brought up to court, and that is it. Previously you went back to where he got the prescription and the doctor, or whoever wrote it, was brought up, too.

Dr. Chapman: No, sir, that was not the case.

Mr. Rynard: Why do you say it was not the case?

Dr. Chapman: The physician—

Mr. Rynard: The physician was held responsible for the prescription he wrote. That is in the medical act.

Dr. Chapman: Yes, that is quite correct; but the physician is practising medicine—

Mr. Rynard: That is right.

Dr. Chapman: —and he feels that this person requires this particular drug. The

[Interpretation]

encore plus difficile de remonter à la source parce qu'il est assez difficile d'obtenir des barbituriques sans ordonnance. A mon avis, c'est un paradoxe.

Dr. Chapman: Monsieur le président, il semble que l'accusé devait auparavant essayer de prouver qu'il avait obtenu les barbituriques d'une source légale. Nous avons trouvé dans bien des cas les individus allaient chez bien des médecins différents, ils obtenaient la drogue légalement et ensuite ils la revendaient. Et avec le libellé de la loi actuelle, c'était une défense absolue même si on violait l'esprit de la loi. Nous n'avons pas l'intention de nous ingérer dans la pratique de la médecine.

M. Rynard: C'est le point auquel j'en venais.

Dr. Chapman: Ce n'est pas notre intention. Le but était celui que j'ai indiqué.

M. Rynard: C'est exactement ce que j'es-sayais de dire. En ce qui concerne les tribunaux, comme je le comprends, cela absout de toute responsabilité la personne qui rédige l'ordonnance.

M. Munro: Que voulez-vous dire par «absout»?

M. Rynard: Vous dites que la responsabilité est rejetée entièrement sur le vendeur ou l'acheteur de barbiturique. C'est ce que je comprends. C'est lui qui est amené devant les tribunaux. Auparavant, vous remontiez jusqu'où il avait obtenu l'ordonnance, jusqu'au médecin ou quiconque l'avait rédigée était aussi traduit devant les tribunaux.

Dr. Chapman: Ce n'était pas le cas, non, Monsieur.

M. Rynard: Pourquoi dites-vous que ce n'était pas le cas?

Dr. Chapman: Le médecin...

M. Rynard: Le médecin était responsable de l'ordonnance qu'il avait rédigée. C'est dans la loi médicale.

Dr. Chapman: C'est juste, mais le médecin exerce la médecine...

M. Rynard: C'est exact.

Dr. Chapman: ...et il pense que cette personne a besoin de cette drogue. Le problème

[Texte]

problem arose where an individual was going to a number of different physicians who were providing this individual with the drug which they each individually considered he needed. But the individual, in turn, was getting these drugs and going out on the street and peddling them.

Mr. Rynard: Yes.

Dr. Chapman: But the law said that if he could prove in court that he had obtained the drugs legally this was a valid defence.

Mr. Rynard: That is right.

Dr. Chapman: It does not seem to me that this should be a valid defence.

Mr. Rynard: It might be that the doctor will be checked on and will be a little more careful in his diagnosis before issuing the prescription—because he issued this prescription for some specific reason. This is why I am pointing out that this may be weakening instead of strengthening it. I do not know; but this is as it strikes me.

Mr. Munro: Mr. Chairman, Dr. Hardman is a physician. He would like to speak to this.

Dr. A. C. Hardman (Deputy Director General (Drugs) Food and Drug Directorate): In the record-keeping for the controlled drugs reports are forwarded to our division of narcotic and control drugs. These are scrutinized and when we identify a person who is receiving multiple prescriptions from various physicians the officers of this division advise each of the physicians that this person is receiving prescriptions from other physicians.

In most cases the physicians have been very grateful to have this knowledge. It may be that the persons are addicted and require and should receive treatment for their physical addiction to barbiturates. But we usually have supporting evidence in those cases in which they are trafficking in the product.

The problem in the past was that these people, through the multiple prescription route, received a large amount of barbiturates through prescriptions written by several physicians.

The federal government has not charged a physician in this respect. There is no offence under our act for practising medicine. But in our contacts with the profession, sir, they are grateful to have this knowledge from our officers.

Mr. Rynard: I am sure they are. I have a point which requires elucidation. How many barbiturates can a doctor prescribe?

[Interprétation]

se créait lorsque quelqu'un allait voir plusieurs médecins, qui remettaient tous une ordonnance dont il avait besoin, si cette personne à son tour obtenait des drogues et retournait les vendre dans la rue.

M. Rynard: Oui.

Dr. Chapman: Mais la loi précise que s'il pouvait prouver en cour qu'il avait obtenu les drogues légalement, cette défense était valide.

M. Rynard: C'est vrai.

Dr. Chapman: Il ne me semble pas que cette défense devrait être valide.

M. Rynard: Il pourrait arriver qu'on vérifie chez le médecin, et que peut-être que le médecin sera plus prudent dans ses diagnostics car il doit écrire les ordonnances pour des raisons précises. Cela peut affaiblir la loi au lieu de la rendre plus ferme. C'est comme cela que je la comprends.

M. Munro: Monsieur le président, le Dr Hardman est médecin et il aimerait parler à ce sujet.

Dr. A. C. Hardman (Sous-directeur général des drogues, Direction des aliments et drogues): Dans le dossier pour le contrôle des drogues, les rapports sont transmis à notre division du contrôle des narcotiques et des drogues. Ces rapports sont étudiés avec soin. Lorsqu'on se rend compte que quelqu'un reçoit de multiples ordonnances de divers médecins, les fonctionnaires de cette division avertissent tous ces médecins en disant que l'individu reçoit plus d'une ordonnance. Les médecins dans la plupart des cas, sont très reconnaissants de le savoir, il se peut que cette personne doit être traitée parce qu'il prend déjà trop de drogue mais dans bien des cas, il y a le trafic du produit.

Dans le passé, les gens en recevant des ordonnances multiples, ont reçu de grandes quantités de barbituriques grâce à des ordonnances rédigées par divers médecins.

Le gouvernement n'a pas accusé les médecins car cela relève de la pratique de la médecine, mais dans nos contacts avec nos médecins, ils sont reconnaissants de recevoir ces renseignements de notre ministère.

M. Rynard: Je suis sûr qu'ils le sont. Il y a une explication que je veux avoir. Quelle quantité de barbiturique un médecin peut-il prescrire?

[Text]

Dr. Hardman: This will depend, of course, sir, on the disease which they are treating. If the individual is an epileptic, and we draw this to the doctor's attention, he usually informs us of the diagnosis and this individual's prescription subsequently will go through the screen. However, if the person is receiving medication for sleeping then we exercise what we feel constitutes good medical practice—and it seems commonly accepted by the Canadian Medical Association—that a physician should not prescribe initially so that an individual can commit suicide with it.

The second element is the number of repeats on a prescription. We have received advice from the Canadian Medical Association about what one would consider to be good medical practice. If we find that a doctor is prescribing amounts in excess of, or at a rate more frequent than is shown on, this guideline that has been given to us, we discuss it with him. In the majority of cases he has a valid reason for so doing.

Mr. Rynard: Then on the law of averages it would be rather difficult to profit from the barbiturates, where you get a small quantity. If you have to pay the doctor a fee of \$5.50 to see him you are not going to do much trafficking, are you?

Mr. Hardman: Not if the doctors are prescribing in small amounts, sir. But we do occasionally find a doctor who prescribes excessive amounts, and when we draw it to his attention he is no longer a source of this trafficking.

Mr. Rynard: If the doctor is contacted on this point it seems to me that that could be a weakness in the bill.

I believe the other point about which I asked the Minister was whether loops, inserts and springs, and so on, were going to be put in by doctors or were going to be used in welfare organizations, and so forth. Under whose control will those devices be?

Mr. Munro: I think I answered that correctly. My officials informed me that I did, at any rate.

Dr. Chapman: do you wish to comment on this?

Dr. Chapman: We consider, of course, that these would be inserted only on the recommendation of a physician and by a physician; and we do not contemplate in any way restricting the sale or advertising of these products, for that reason.

Mr. Rynard: Would nurses be able to use those devices in birth control clinics, and so forth?

[Interpretation]

Dr. Hardman: Cela dépend des maladies traitées. Si l'individu est un épileptique et qu'on attire l'attention du médecin là-dessus, il nous donne le diagnostic et l'ordonnance est remplie. Toutefois, si une personne reçoit des médicaments par exemple, pour dormir, alors ce que nous croyons être une bonne pratique médicale et qui est accepté par l'Association médicale canadienne reconnaît, c'est le fait qu'un médecin ne doit pas donner des quantités suffisantes qui permettent de se suicider.

Deuxièmement, il y a le nombre de fois qu'une ordonnance peut être répétée. L'Association médicale canadienne nous a fait part de ses usages pratiques; si un médecin prescrit de grandes quantités ou à un rythme plus fréquent que ce qui paraît normal, alors nous lui en parlons. Dans la plupart des cas, il a une raison valide d'agir ainsi.

Mr. Rynard: Dans le cas des barbituriques, il serait plutôt difficile de faire beaucoup de trafic car les quantités sont minimales. Si vous devez payer \$5.50 pour le voir, vous ne ferez pas beaucoup de trafic, n'est-ce pas?

Dr. Hardman: Pas si les médecins prescrivent de petites quantités. Mais à l'occasion, un médecin peut prescrire des quantités excessives; lorsqu'on attire son attention sur ce fait, il nous donne des explications.

M. Rynard: Si on communique avec le médecin sur ce point, il me semble que cela peut être une faiblesse du bill.

Il y a une autre question que je voudrais poser au ministre, savoir si les dispositifs intra-utérin devaient être installés par le médecin, ou être utilisés par les organisations de bien-être, ou autre. Sous le contrôle de qui cela se fera-t-il?

M. Munro: Je crois que j'ai répondu exactement à cette question. Mes fonctionnaires m'ont dit que je l'avais fait. D^r Chapman, avez-vous des commentaires à ce sujet?

Dr. Chapman: Nous considérons que ces dispositifs seront installés seulement sur recommandation du médecin, et par un médecin, et nous n'envisageons en aucun cas d'en restreindre la vente ou la publicité; pour cette raison.

M. Rynard: Est-ce qu'une infirmière pourrait les installer, par exemple, dans les cliniques de planification familiale?

[Texte]

Dr. Hardman: This, sir, is outside federal jurisdiction in that it would constitute what would be considered to be the practice of medicine in a province.

Mr. Rynard: Had what about the Northwest Territories?

Dr. Hardman: I am not familiar with the medical act, if there is a medical act, or what the licensing arrangements are, for the Northwest Territories. I am sorry; I do not know.

Mr. Rynard: Perhaps someone could give us this information at a later meeting.

Mr. Munro: I think Mr. McCarthy can answer that.

Mr. J. D. McCarthy (General Counsel, Department of National Health and Welfare): Yes; I think, basically speaking, Mr. Chairman, physicians in the employ of our department and working in the north country govern themselves by the ordinary standards of medical practice that apply in a province.

I am not a physician, but I understand there are areas in which there just are not physicians, and nurses acquaint themselves with procedures and skills that ordinarily are not within the purview of a nurse, but in those instances I imagine they would, in a sense, pinch-hit for the procedures that would ordinarily be conducted by physicians.

Mr. Rynard: The point I was making there, Mr. Chairman, and I am not saying that it is not a good thing, but you have to have, as the Chairman knows, a sterile technique to do those things and this is the point that was concerning me: somebody trained in the sterile use of this loop or this link or whatever is used. This is the point I want to make, that this should be in the Bill.

Mr. Munro: I do not think we have the power to do it.

Mr. Rynard: In the Northwest Territories?

Mr. Munro: Oh, in the Northwest Territories...

Mr. McCarthy: Mr. Chairman, if I might add, the only authority that we have in the Northwest Territories arises out of our activities in connection with Indians and Eskimos. Basically speaking, this is a peculiar thing to the Department of National Health and Welfare and does not apply generally to physicians in those areas. Generally speaking, with that exception that I have mentioned, the method and standards of the practice of

[Interprétation]

Dr Hardman: Cela ne relève pas de la juridiction du gouvernement fédéral. Cela relève de la pratique de la médecine dans chaque province.

M. Rynard: Que dire des Territoires du Nord-Ouest?

Dr Hardman: Je ne connais pas la Loi sur la médecine des Territoires du Nord-Ouest, s'il y en a une; je ne sais pas non plus comment on accorde les licences et les permis.

M. Rynard: Peut-être quelqu'un pourrait-il nous donner ce renseignement à une autre réunion.

M. Munro: Je pense que M. McCarthy peut répondre à cette question?

M. J. D. McCarthy (conseiller général, ministère de la Santé nationale et du Bien-être social): Oui, essentiellement, monsieur le président. Les médecins au Service de notre Ministère dans les Territoires du Nord-Ouest se conduisent suivant les normes ordinaires appliquées dans une province.

Maintenant, je crois comprendre qu'il y a des régions où il n'y a pas de médecins où les infirmières se mettent au courant de la procédure et des techniques qui généralement dépassent leurs fonctions, mais étant donné les circonstances, je crois qu'elles s'efforcent plus ou moins de remplacer les médecins.

M. Rynard: Monsieur le président, je ne prétends pas que c'est une bonne chose, mais il faut connaître une technique de stérilisation pour faire ces choses et c'est ce qui m'intéresse; quelqu'un reçoit une formation pour l'utilisation de cette boucle, de cet anneau ou de cette chose quelconque à des fins de stérilisation. Je voudrais que ceci soit inclus dans le projet de loi.

M. Munro: Je ne pense pas que nous ayons l'autorité pour ce faire.

M. Rynard: Dans les territoires du Nord-Ouest?

M. Munro: Dans le cas des territoires du Nord-Ouest...

M. McCarthy: Monsieur le président la seule autorité que nous avons dans les Territoires du Nord-Ouest découle de nos activités relatives aux Indiens et aux Esquimaux. A proprement parler, cela intéresse, particulièrement le ministère de la Santé nationale et du Bien-être social et ne s'applique pas, en général, aux médecins de ces régions. En général, sauf pour cette exception que je viens de mentionner, les méthodes et les nor-

[Text]

medicine are really not within our responsibility. The practice of medicine comes within provincial jurisdiction.

Mr. Rynard: My impression was, and maybe I am wrong on this, that the Department of National Health and Welfare run most of the hospitals up there.

Mr. McCarthy: Mr. Chairman, only Indian hospitals and hospitals for the treatment of Indians and Eskimos.

Mr. Rynard: How about the one at Inuvik? Are there no white people in there?

Mr. McCarthy: Whites are admitted, I understand, where there is no other facility for them.

Mr. Rynard: I think we have a little confusion here but perhaps it might be wise at another time to look into this.

The other thing I want to ask, and this is the end of my questioning, is, was there ever a prescription written for LSD in Canada? I notice what you say about the prescriptions and so forth, and sort of a suggestion that there was, and I just want for my own information to know if there ever was a prescription written for LSD.

Dr. Hardman: No.

Mr. Rynard: There never was?

Dr. Hardman: No. LSD has never been available on the market through retail outlets. With the prohibition that the Minister mentioned in 1962 provision was made for legitimate medical and scientific research in institutions authorized by the Minister. The procedure was that the research worker would apply to the Minister for the purchase of a specified amount of the LSD 25, and this was authorized and dispatched. So that, it always has been a very controlled drug and it has never been available to the medical profession.

Mr. Rynard: Thank you.

Mrs. MacInnis (Vancouver-Kingsway): Mr. Chairman, I want to bring up with the Minister and his officials again a problem that has been bothering me and bothering a lot of other people having to do with advertising in connection with family planning and contraceptives.

I know that the Minister dealt with this in the House and it has been dealt with in other places, but I want to take off from this point where this morning he mentioned again that

[Interpretation]

mes de la pratique de la médecine ne sont pas vraiment de notre ressort. L'exercice de la médecine relève de la compétence provinciale.

M. Rynard: Mon impression, et je peux me tromper, c'est que le ministère de la Santé nationale et du Bien-être social dirige la plupart des hôpitaux là-bas.

M. McCarthy: Monsieur le président, seuls les hôpitaux indiens et les hôpitaux pour le traitement des Indiens et des Esquimaux.

M. Rynard: Et l'hôpital d'Inuvik? Il n'y a pas de Blancs, là?

M. McCarthy: Les Blancs sont admis, je crois, là où il n'y a pas d'autres installations pour les recevoir.

M. Rynard: Je crois que la chose est assez confuse maintenant. Peut-être qu'on pourrait attendre une autre fois pour en parler.

Une autre chose que je veux demander, et c'est ma dernière question, est-ce qu'on a jamais écrit une ordonnance pour le LSD, au Canada? J'ai remarqué ce que vous avez dit au sujet des ordonnances et ainsi de suite, et je voudrais tout simplement savoir, personnellement, si jamais on a donné des ordonnances pour le LSD.

Dr Hardman: Non.

M. Rynard: Jamais?

Dr Hardman: Jamais. On n'a jamais vendu de LSD au détail. En 1962, la Loi que le ministre a mentionnée avait prévu une disposition autorisant la recherche scientifique et médicale dans les institutions reconnues par le ministre. La procédure suivie, c'était que le chargé de recherche devait faire une demande au ministre pour acheter une quantité précise de LSD-25, ce qui a été autorisé et expédié. Donc, le LSD a toujours été une drogue contrôlée et les médecins n'ont jamais pu s'en procurer.

M. Rynard: Merci.

Mme MacInnis (Vancouver-Kingsway): Monsieur le président, encore une fois, je vais poser au ministre et à ses fonctionnaires un problème qui m'inquiète beaucoup et inquiète beaucoup d'autres personnes, depuis longtemps; il s'agit de la publicité relative à la planification familiale et aux produits anti-conceptionnels.

Je sais que le ministre en a parlé en Chambre, et on en a parlé ailleurs, mais je veux revenir à ce point qu'il a soulevé ce matin, et selon lequel on a trop souvent limité aux

[Texte]

all too often knowledge of family planning has been restricted to the middle and upper classes.

Again in the House, on March 27, he said that the result is evidenced in such statistics as the average number of children in a public assistance family in Canada being almost double that of the Canadian average. I understand that it was the intent that in the regulations under this legislation the advertising of contraceptives is to be limited strictly to family planning in medical journals. I want to read what the General Counsel for the Committee, speaking before the Senate Banking and Commerce Committee on November 13, said:

At the moment we are proceeding on the basis that we will limit the advertising to responsible agencies connected with family planning, but advertising to the general public of a commercial nature of contraceptives as such will not, for the time being, be permitted.

That sounds to me fairly definite, Mr. Chairman. The first point I want to make is that to limit the advertising of contraceptives strictly to professional publications, and to cut it out from newspapers, magazines, radio and television would be to continue with the situation to which the Minister has made reference, that the knowledge of family planning has been too often limited to the middle and upper classes, when very obviously the statistics given by the Minister and others show that we need very wide dissemination quickly among people of lower income as well. This is the first point that is bothering me and I have some others in connection with it, but I would like the Minister or one of his officials to comment on this point.

Mr. Munro: Through you, Mr. Chairman, to Mrs. MacInnis, I would be happy to have my officials amplify this.

On the first point, just how wide this advertising should be would depend, I think, on the degree of liberal wording in the regulations. The wording in Clause 2 of the Bill, of course, reads:

"(3) Except as authorized by regulation, no person shall advertise to the general public any contraceptive device or any drug manufactured, sold or represented for use in the prevention of conception."

[Interprétation]

classes moyenne et supérieure la diffusion de l'information sur la planification familiale.

Une autre fois, encore en Chambre, le 27 mars, il a dit que, d'après les statistiques, la moyenne des enfants, dans les familles recevant de l'aide de l'État, a presque doublé au Canada, comparativement à la moyenne Canadienne. Je crois savoir que les règlements adoptés aux termes de cette mesure législative prévoyaient que la publicité des produits anticonceptionnels doit être limitée à la planification familiale, dans les publications médicales. Le Conseil général s'est présenté devant le Comité du Sénat sur les affaires bancaires et commerciales, le 13 novembre, et a dit ceci:

Pour le moment, nous suivons le principe que nous allons limiter la publicité aux agences responsables qui s'occupent de planification familiale, mais on ne permettra pas, pour le moment, que la publicité commerciale sur les contraceptifs comme tels, s'adresse au grand public.

Cela me paraît assez clair, monsieur le président. Voici ma première question. On veut limiter la publicité sur les contraceptifs à certaines publications professionnelles et l'empêcher dans les revues, dans les journaux, à la radio et à la télévision, mais j'ai l'impression que ce serait perpétuer la situation que mentionnait le ministre, à savoir que la connaissance de la planification familiale a été trop souvent limitée aux classes moyennes et aux classes supérieures de la société, alors qu'on sait très bien que les statistiques données par le ministre et d'autres personnes indiquent qu'il faut faire une dissémination très grande, rapidement, chez les gens à faible revenu. Voilà la première question qui me préoccupe. J'en ai d'autres qui se rattachent à celle-ci, mais je voudrais que le ministre, ou un de ses collaborateurs, fasse des commentaires sur ce point.

M. Munro: Eh bien, monsieur le président, Madame MacInnis, mes collaborateurs se feront un plaisir de vous donner plus de détails.

Pour ce qui est du premier point, je crois que tout dépend du libellé du Règlement, s'il est libéral ou non. Le texte de l'article 2 du projet de loi, évidemment, se lit comme suit:

2. (3) Sauf autorisation prévue par les règlements, nul ne doit annoncer au grand public un produit anticonceptionnel quelconque ou une drogue fabriquée ou vendue pour servir à prévenir la conception, ou représentée comme pouvant servir à prévenir la conception.

[Text]

I think that there is latitude there, if you should see fit, for a fairly liberal interpretation to permit this information to be disseminated in a wide way.

It is true that one of the concerns, and this was expressed in the Harley Committee Report, was that about good taste and so on, and this being done by anyone on a wide basis in all the daily magazines and some of the other magazines, so that the feeling has been that the regulations will be not of a kind to prevent legitimate advertising by responsible agencies or organizations concerned with birth control and family planning. Therefore, I think when you consider all the agencies in this country, for instance, that are involved in this area, I do not think that they necessarily have to be agencies that are exclusively dealing with family planning. They can be all sorts of voluntary agencies of which this is just one of the areas of their concern. You have the type of social welfare agencies that we know of, that have budgets from the United Appeal and so on, that can take an active role in this area.

I think it is worth an experiment to see whether with all these resources this information could not be adequately disseminated across the country without us at the same time allowing direct advertising by manufacturer or retailers.

Mrs. MacInnis (Vancouver-Kingsway): I would like to go into this more deeply. I wonder whether or not it is advisable to put this type of advertising in a special category. For instance, it is legal now to advertise in the ordinary media patent medicines, cosmetics, beauty aids, tampons, toilet papers, suppositories for feminine hygiene, deodorants and all kinds of other products. I was on the committee and I know where the concern arose. At that time the whole subject of family planning and birth control was new and subject to very much the same type of discussion that we have listened to in the House in the past week on another topic, because it was new. Consequently, people formerly were afraid of great screaming billboards showing some of the more lurid devices whereas I think now that we have sort of settled down.

I just want to show the Committee the trap into which we are falling if we put this into a special category. For instance, I have here an advertisement:

[Interpretation]

Alors, je pense que, ici, il existe une certaine latitude et je pense qu'on pourrait interpréter de façon assez libérale cet article pour permettre la propagation de cette information.

Un des problèmes qu'on a énoncés dans le rapport du Comité Harley, c'est le bon goût, etc. et n'importe qui le fait à une grande échelle dans tous les journaux quotidiens, et dans les revues, de sorte que le sentiment général était que le Règlement ne serait pas de nature à empêcher la publicité légale par les organismes ou organisations qui s'occupent de planification familiale. De sorte que il me semble que si vous considérez toutes les agences du Canada qui s'occupent de ces questions, je pense que ce n'est pas nécessaire que ces agences s'occupent exclusivement de planification familiale. Ce peut-être des organismes bénévoles, dont il ne s'agit alors que d'un domaine. Il y a des agences de bien-être social que nous connaissons, qui reçoivent de l'argent de la Fédération des œuvres, et qui peuvent jouer un rôle actif dans ce secteur.

Cela vaut la peine, d'après moi, de voir si, avec toutes ces ressources, les renseignements ne pourraient pas être convenablement diffusés à travers le pays, sans pour autant que les manufacturiers ou les marchands au détail fassent de la publicité.

Mme MacInnis (Vancouver-Kingsway): Je voudrais traité de la question plus avant. Je me demande s'il convient ou non d'inclure ce genre de publicité dans une catégorie particulière. Par exemple, est-ce le cas en ce moment d'annoncer dans les organes d'information ordinaires les médicaments brevetés, les cosmétiques, les aides de beauté, les tampons, le papier de toilette, les suppositoires pour l'hygiène féminine, les désodorisants et toutes sortes d'autres produits. J'ai fait partie du comité et je sais où l'inquiétude s'est manifestée à l'époque, toute la question de la planification familiale et des contrôles des naissances était un sujet nouveau se prêtant en grande partie au même genre de discussion à laquelle nous avons assisté à la Chambre au cours de la semaine dernière, sur un autre sujet, parce que la question était nouvelle. En conséquence, les gens avaient peur au début que l'on mette des panneaux réclame criards exposant les diapositifs les plus sinistres, alors que maintenant je crois que les choses se sont tassées.

Je voudrais simplement montrer au comité dans quelle sorte de piège nous tombons si nous mettons cela dans une catégorie spéciale.

[Texte]

The Perfect Answer to a very Special Problem.

A 2-second spray of Koro Sanitary Napkin Deodorant Spray is the answer to that very special female problem—menstrual odour. It's quick and easy to apply...

This ad is legal under our Food and Drugs Act.

Here is one that will become illegal if we put these contraceptives into a special category:

For Your Peace of Mind...

Birth Control without Side Effects. Medically supervised clinical studies have shown EMKO to be highly effective; no side effects encountered. Millions rely on EMKO.

That will become illegal.

So will this:

Now, A contraceptive for the woman who wants children—later.

It says a number of other things about Delfen contraceptive foam. This is in no way discouraging to anybody's taste and, furthermore, it puts birth control and family planning in a very wise framework. That is an advertisement for Delfen, a contraceptive foam by the Ortho chemical people.

Here is another one that will become illegal:

Right now he needs his mother more than a brother.

You can give him the time and mothering he needs if you use Delfen Contraceptive Foam, the pleasant contraceptive that works alone.

That is an ad which appeared in the *Redbook* for September 28—

Mr. Munro: I have seen it.

Mrs. MacInnis (Vancouver-Kingsway): —and *My Baby* and no doubt some other magazines.

Here are some more:

Until you're ready to have your next baby... consider Delfen.

You gave him life now give him you—indicating that children should be spaced.

This kind of advertising goes into MacFadden *True Experience* and *Photoplay*, the very magazines that the low income people read in

[Interprétation]

Par exemple, j'ai ici une annonce La réponse parfaite à un problème très spécial. En vaporisant 2 secondes votre serviette hygiénique avec le désodorisant Koro, vous réglerez ce problème très particulier pour la femme que sont les odeurs menstruelles. Il s'applique rapidement et facilement...

Cette annonce est légale selon notre Loi des aliments et drogues.

En voici une qui deviendra illégale si nous plaçons ces contraceptifs dans une catégorie spéciale.

Pour votre tranquillité d'esprit, le contrôle des naissances sans effets secondaires. Des études cliniques sous surveillance médicale ont démontré la grande efficacité d'Emko qui n'a pas d'effets secondaires. Des millions se fient à Emko.

Ceci deviendra illégal. De même que ce qui suit «Un contraceptif maintenant pour la femme qui veut des enfants, plus tard». On dit beaucoup d'autres choses au sujet de la mousse contraceptive Delfen. Ceci ne choque le bon goût de personne et, de plus, cela cerne sagement le contrôle des naissances et la planification familiale. Il s'agit d'une annonce traitant d'une mousse contraceptive nommée Delfen, un produit des laboratoires pharmaceutiques Ortho.

En voici une autre qui deviendra illégale:

«En ce moment, il a plus besoin de sa mère que d'un frère. Vous pouvez lui donner le temps et l'amour maternel dont il a besoin en vous servant de la mousse contraceptive Delfen, ce contraceptif qui agit seul».

Cette annonce a paru dans le *Redbook* du 28 septembre.

M. Munro: Je l'ai vu.

Mme MacInnis (Vancouver-Kingsway): Aussi dans *My Baby* et sans doute dans d'autres magazines. Une autre:

Si vous n'êtes pas prête pour un autre bébé... pensez à Delfen.

Vous lui avez donné la vie, maintenant donnez-vous à lui.

C'est une façon d'indiquer que les naissances devraient être espacées.

Ce genre d'annonce paraît dans *True Experience* et MacFadden et *Photoplay*, justement les magazines que les petits salariés lisent

[Text]

larger amounts than they ever do medical journals.

Here is another one:

How many children do you want? And when?

These are all advertisements for Delfen contraceptive foam and in my view there is nothing remotely disgusting or offensive to the most delicate.

I guess I could just sum it all up by quoting from a letter which came in this morning:

If we are going to have censorship of advertising, I would like to see it applied to the Sara Lee ad...

—that is the cake people, you know—which says,

'You'll get your just desserts tonight' and the bedtime drink which boasts, 'You can get to sleep with me tonight.' A tasteful ad setting out the advantages of birth control would be tame by comparison!

This is the point I want to make. I think it is pandering to prejudice, the same old antediluvian prejudices that we are battling in a dozen fields. It is pandering to prejudice if we set birth control and family planning advertising in a special little pen by itself as though it was something indecent and wholly bad.

The Minister talks about the desirability of experiment. I would like to see us try to experiment with advertising it like an ordinary piece of goods—like toilet paper, feminine deodorants, vaginal douches and so on—and see whether Canadian tastes would not look after the situation without having to put it in a special pen.

Some hon. Members: Hear, hear.

Mr. Munro: I will just make one comment. It is agreed now that if you are a manufacturer or a distributor you could not advertise but any of these other agencies could under our proposed regulations advertise in magazines like *Redbook* and so on that you are describing. Am I correct in that interpretation?

Mrs. MacInnis (Vancouver-Kingsway): Yes, but...

Mr. Munro: Dr. Hardman wishes to make a comment with regard to your foam advertisement.

Dr. Hardman: I think you will find, Mrs. MacInnis, that this was inserted by the

[Interpretation]

d'avantage que les revues médicales. Et voici une autre:

Combien d'enfants voulez-vous, et quand?

Ce sont toutes des annonces pour la mousse anti-conceptionnelle Delfen et, à mon avis, il n'y a rien le moins dégoûtant ou choquant même pour les goûts les plus délicats.

Et je pourrais peut-être résumer le tout en citant une lettre qui m'a été envoyée ce matin.

Si nous devons avoir la censure de la publicité, j'aimerais qu'elle s'applique à l'annonce de Sara Lee. Comme vous le savez, c'est une compagnie de gâteaux.

L'annonce dit:

Vous n'aurez que votre dessert ce soir et votre breuvage du soir qui vous dit: Vous pouvez coucher avec moi ce soir. Une annonce de bon goût faisant valoir les avantages de la contraception serait anodine par comparaison. C'est la thèse que je veux faire valoir.

C'est un encouragement aux préjugés, les mêmes vieux préjugés antidiluvien que nous combattons dans une douzaine de domaines. Ce serait encourager le préjugé que de placer la publicité sur le contrôle des naissances et la planification familiale dans un enclos bien à part comme s'il s'agissait d'une question indécente et entièrement mauvaise.

Le ministre nous parle qu'il serait désirable de faire des expériences. Je voudrais qu'à titre d'expérience on essaie d'annoncer ces choses comme des produits ordinaires, du papier de toilette, des désodorisants féminins, des douches vaginales, etc. afin de voir si les goûts canadiens ne régleraient pas la question sans avoir recours à un enclos spécial.

Des voix: Bravo. Bravo.

M. Munro: J'ai seulement un commentaire à faire. On reconnaît maintenant que si vous êtes fabricant ou distributeur vous ne pourriez pas annoncer mais n'importe quel de ces autres organismes pourraient, en vertu des règlements que nous proposons, annoncer dans des magazines comme *Redbook*, etc. au sujet de ce que vous avez décrit. Est-ce que mon interprétation est juste?

Mme MacInnis (Vancouver-Kingsway): Oui, mais...

M. Munro: Le docteur Hardman désire faire une remarque au sujet de votre annonce de mousse vaginale.

Dr. Hardman: Je crois que vous découvrirez M^{me} MacInnis que c'était une insertion

[Texte]

American manufacturer—if you look at the lead at the bottom...

Mrs. MacInnis (Vancouver-Kingsway): Yes.

Dr. Hardman: ...in an American magazine and these at the present time would be illegal in Canada, although they are sold. If a Canadian person advertised under the Criminal Code he would be subject to it. They are in magazines in Canada.

Mrs. MacInnis (Vancouver-Kingsway): But this *Redbook* for 1968...

Dr. Hardman: ...is an American magazine.

Mrs. MacInnis (Vancouver-Kingsway): But it is sold in Canada.

Dr. Hardman: Oh, yes, but the person who places the ad is not subject to Canadian law. Could I go on for a moment?

Mrs. MacInnis (Vancouver-Kingsway): Yes, but just before you do could I just make this point for the Minister. He says that family planning organizations can advertise in regular journals. Now, Mr. Minister, you know as much about family planning organizations as I do and you know that they do not have money to advertise in a wholesale way to reach ordinary people.

Dr. Hardman: If I may explain the position, we have a problem in that not all devices, drugs and substances for family planning purposes are of the same nature. If we take an oral contraceptive or an injectible contraceptive drug, there are a number of hazards associated with its use. We feel that this must be prescribed by a physician and therefore there is no role for promotional advertising to the public by the manufacturer of this category.

The second category was the one mentioned by Dr. Rynard, the intrauterine devices which must be inserted by a skilled, trained professional and, again, the merits of an individual one should not be promoted to the general public as they may be a hazard.

We have the third category, however, of condoms, barrier foams and jellies, in which the individuals themselves can utilize the device.

Advertising in this case has a broader term than merely publication in a paper. It does mean the open display in a pharmacy as well as the publication in a journal. I think that

[Interprétation]

faite par le fabricant américain si vous regardez au bas de la page.

Mme MacInnis (Vancouver-Kingsway): Oui.

Dr. Hardman: Dans un magazine américain, et cette annonce serait illégale en ce moment au Canada, même si les produits sont en vente. Si un Canadien faisait cette annonce, il tomberait sous le coup du code criminel.

Mme MacInnis (Vancouver-Kingsway): Mais la revue *Redbook* de 1968...

Dr. Hardman: ...est une revue américaine.

Mme MacInnis (Vancouver-Kingsway): Oui, mais elle se vend au Canada.

Dr. Hardman: Oui, mais la personne qui a inséré l'annonce ne tombe pas sur le coup de la loi canadienne. Puis-je ajouter quelque chose.

Mme MacInnis (Vancouver-Kingsway): Oui, mais avant d'aller plus loin, permettez-moi de soulever un point pour le ministre. Il dit que les organismes qui s'occupent de planification familiale peuvent annoncer dans les journaux ordinaires. Monsieur le ministre, vous en connaissez autant que moi sur les organismes qui s'occupent de planification familiale et vous savez qu'elles n'ont pas l'argent pour annoncer massivement pour atteindre tout le monde.

Dr. Hardman: Je vais vous donner une explication. Tous les instruments, drogues, substances, pour la planification familiale ont un aspect commun. Par exemple, si vous prenez un produit anticonceptionnel oral, ou un contraceptif injectable, il y a toutes sortes de danger, qui sont associés à son usage. Nous croyons qu'une ordonnance médicale est nécessaire, et que par conséquent il ne saurait être question de publicité commerciale de la part du fabricant à l'intention du public.

La deuxième catégorie était celle mentionnée par le docteur Rynard—les dispositifs que vous devez insérer dans l'utérus, qui doivent être insérés par un professionnel qualifié. Cette fois-ci, les mérites d'un dispositif en particulier ne devraient pas faire l'objet de publicité au public, parce qu'il peut y avoir des dangers encore une fois.

Toutefois, vous avez la troisième catégorie des condoms, des mousses inhibantes et des gélées dont les personnes peuvent se servir. La publicité ici signifie beaucoup plus que le simple fait de publier dans un journal. Ça veut dire qu'on peut le présenter à l'étalage dans une pharmacie, autant qu'on peut en faire de la publicité dans une revue.

[Text]

we will have to make exempting regulations in this area for this type of contraceptive device.

And there is a fourth type, the feminine hygiene douche spray and apparatus—and again this can be utilized by the individual. However, with both of these they are not 100 per cent effective and if we permit the manufacturer to advertise we must also ensure that in his advertisement there is a caution that they are not fully effective.

Mrs. MacInnis (Vancouver-Kingsway): I am so glad you brought this up, Dr. Hardman, because I do realize there are such categories. Nobody was suggesting that "the pill" or the intrauterine device be removed from where they are now. They are not subject to general advertisement at all.

But I think condoms, diaphragms, jellies, creams, foam or anti-spermicides of various kinds ought to be free to be advertised by manufacturers with, as you say, the escape clause that they are not 100 per cent effective. Does the Department intend to leave this type of advertising free to the manufacturers and agents, or does it all have to go through the Family Planning Service?

Mr. Munro: We have the authority to do it by regulation. Just what the precise nature of the regulation would be, I cannot say.

Mrs. MacInnis (Vancouver-Kingsway): Yes, but I would like to urge you very strongly, Mr. Minister, to consider this and also the matter of the douche. I am not talking as a feminist, but let me tell you that women are far more accustomed to the physical appearance of foams, jellies, douches, and all this sort of thing. It shocks men to think of seeing those things depicted in the newspapers, but women are used to them. Why force women to bootleg these things and force them to go around and get them in a hole in the corner way when they should be able to see them. After all, men do not have to suffer the inconvenience of using them but I think they could suffer the embarrassment of seeing them until they get used to them.

Mr. Munro: Mr. Chairman, I am not really arguing against Mrs. MacInnis, I am making this observation without particularly taking sides in the matter, but—

Mrs. MacInnis (Vancouver-Kingsway): I would like you to take sides.

[Interpretation]

Je pense que, dans ce domaine, il faut faire des règlements d'exception pour ce genre de produits anti-conceptionnels. Quant à la quatrième catégorie, il s'agit de la douche vaginale et tout l'appareil nécessaire; encore une fois c'est le client qui s'en sert lui-même. Comme ces moyens ne sont pas efficaces à 100 p. 100, si nous permettons aux fabricants d'en faire la publicité, il faut veiller à ce que son annonce contienne un avertissement à l'effet qu'ils ne sont pas efficaces à 100 p. 100.

Mme MacInnis (Vancouver-Kingsway): Je vous remercie de votre exposé, Dr. Hardman, car je me rends compte de l'existence de ces catégories. Personne ne disait que la pilule ou les produits intra-utérins ne pouvaient être acceptés dans la catégorie où ils se trouvent maintenant. Il ne font l'objet d'aucune publicité présentement.

Mais je crois que les diaphragmes, les gelées, les crèmes, les mousses, devraient pouvoir être annoncés par leurs fabricants avec une disposition disant que ce n'est pas garanti à 100 p. 100. Mais le ministère entend-il laisser ce genre de publicité aux fabricants, ou est-ce qu'il faut absolument que le tout se fasse par l'entremise des organismes de planification familiale?

M. Munro: Nous avons l'autorité de le faire, par règlements. Pour ce qui est de la nature précise de ces règlements je ne pourrais dire ce qu'elle sera.

Mme MacInnis (Vancouver-Kingsway): Monsieur le ministre, je voudrais vous demander, et j'appuie fermement, d'étudier cette question et celle des douches. Je ne suis pas féministe, ici. Mais, nous les femmes, nous sommes beaucoup plus habituées à l'apparence physique, des mousses, des gelées, des douches, et de toutes ces histoires-là. Ça choque les hommes à la pensée qu'ils verront ces articles annoncés dans les journaux, mais les femmes sont habituées. Pourquoi forcer les femmes à se les procurer à la sauvette, alors qu'elles devraient pouvoir les voir. Après tout, les hommes n'ont pas à subir les incon vénients que représente leur utilisation. Je crois qu'ils pourraient au moins accepter de les voir jusqu'à ce qu'ils s'y habituent.

M. Munro: Je ne m'objecte pas, monsieur le président, au point de vue de M^{me} MacInnis. Je ne fais qu'une observation sans réellement prendre position, mais...

Mme MacInnis (Vancouver-Kingsway): J'aimerais justement que vous preniez position.

[Texte]

Mr. Munro: —in the report of the Standing Committee on Health, Welfare and Social Affairs at page 591, and I believe you were on that Committee, it says:

Fears have been expressed, if changes in the law were made, that contraceptive devices would be sold openly and publicly, as any other commercial item. Another fear was expressed that advertising of such items might become blatant and in poor taste. Your Committee feels both these practices to be undesirable and therefore proposes in its recommendations, certain preventive courses of action.

At the bottom of the same page you make this specific recommendation:

3. That the Food and Drugs Act be amended (probably under "Devices" in Sections 18, 19 and 20) in such a way as to control the advertising of contraceptives.

Mrs. MacInnis (Vancouver-Kingsway): I would like to once again point out, Mr. Chairman, that a lot of water has gone under the bridge since that report was written.

Mr. Munro: I know that.

Mrs. MacInnis (Vancouver-Kingsway): I think it should be updated. Let us try and experiment along the lines of seeing what Canadian taste will do. After all, we have become used to toilet paper and things like that being advertised. Perhaps we would find that we were more used to the idea then we had thought. I think this puts birth control and family planning in the right bracket. I think women should be allowed to try this on their good behaviour, and if you needed to you could always check up on them by way of a fresh regulation.

Mr. Munro: Would you be satisfied if we assured you that we will take your observations into account when we draft the regulations?

Mrs. MacInnis (Vancouver-Kingsway): Very well.

The Chairman: Are there any other questions of the Minister? Mr. Howe.

Mr. Howe: I would like to ask the Minister how much of this information, although it is supposed to be, has not previously been available to welfare agencies and family planning groups, or provided by the provincial government, county health units, or organiza-

[Interprétation]

M. Munro: Le rapport du Comité permanent de la Santé et du bien-être déclare à la page 591:

On a exprimé la crainte que la modification de la loi n'entraîne la vente libre et publique de dispositifs anticonceptionnels tout comme n'importe quel autre article commercial. On a aussi exprimé la crainte que l'annonce de ces articles soit d'une vulgarité criarde et de mauvais goût. Le Comité est d'avis que ces deux pratiques ne sont pas souhaitables et propose donc, parmi ses recommandations, certaines mesures restrictives.

Au bas de la même page, on retrouve cette recommandation précise:

Modifier la Loi des aliments et drogues (probablement les articles 18, 19 et 20 sous le titre «Instruments»), de façon à contrôler la publicité des contraceptifs.

Mme MacInnis (Vancouver-Kingsway): Encore une fois, monsieur le président, je voudrais signaler qu'il y a beaucoup d'eau qui a passé sous les ponts depuis.

M. Munro: Je le sais.

Mme MacInnis (Vancouver-Kingsway): Je pense que le tout devrait être mis à jour. Tentons une expérience afin de connaître le goût des Canadiens. Après tout, nous nous sommes habitués à la réclame faite autour du papier de toilette et autres articles du genre. Peut-être réaliserons-nous que nous étions davantage habitués à l'idée que nous ne le pensions. Je crois que ceci conviendrait à la régulation des naissances et à la planification familiale. Je crois que les femmes devraient pouvoir y avoir recours, quitte à ce que vous adoptiez de nouveaux règlements, si cela s'avère nécessaire.

M. Munro: Seriez-vous satisfaite, si nous vous promettrions que nous considérerons vos suggestions lorsque nous préparerons le texte des règlements?

Mme MacInnis (Vancouver-Kingsway): D'accord.

Le président: Quelqu'un désire-t-il poser d'autres questions au ministre? M. Howe?

M. Howe: J'aimerais demander au ministre dans quelle proportion ces renseignements, bien qu'ils devaient l'être, n'ont pas été mis à la disposition des agences de bien-être, et des organismes de planification familiale, ou fournis par le gouvernement provincial, les servi-

[Text]

tions like that. Has this information not always been available and have they not always had it before them?

Mr. Munro: I would just point out, Mr. Howe, that prior to this bill being presented Section 150 of the Criminal Code made it an offence to do the following:

(2) Every one commits an offence who knowingly, without lawful justification or excuse,

(c) offers to sell, advertises, publishes an advertisement of, or has for sale or disposal any means, instructions, medicine, drug or article intended or represented as a method of preventing conception or causing abortion or miscarriage,

So, it was an offence. I indicated in my opening remarks that it was an offence but we are all aware that everyone knowingly broke this particular law and there have been no prosecutions since about 1930.

I would not deny that unofficially perhaps many welfare agencies in the country have been offering people pills, and so on, different methods, so it is a law that has knowingly been flouted for many years by many reputable organizations in the country. Of course, this is one of the reasons we are trying to legitimize the information by this particular bill.

Mr. Howe: But, Mr. Minister, you indicated that this law was going to make it possible for the poor people, the people of low incomes and who are on welfare, to get this information. As far as the middle income groups and the higher income groups are concerned, previously they were able to look after themselves.

Mr. Munro: Right.

Mr. Howe: Are any more funds going to be available to welfare organizations so that they can disseminate this information and assist people? Are they going to be able to provide people with these things?

Mr. Munro: Yes, they will be able to provide them and actually promote their usage. I indicated that they were breaking the law if they were involved in this type of activity prior to this enactment, and because of that knowledge they are very reticent about it. Some refuse to do it, others try to do it in a very sort of quiet and ineffective way.

If this bill is passed these organizations will then be able to do it in the way they have urged the government for some time to per-

[Interpretation]

ces de santé des comtés ou les autres organismes du genre. Est-ce que ces renseignements n'ont pas toujours été disponibles et à leur portée?

M. Munro: J'aimerais vous signaler, M. Howe, qu'avant la présentation de ce projet de loi, l'article 150 du Code criminel stipulait ce qui suit:

(2) Commet une infraction quiconque, sciemment et sans justification ni excuse légitime,

(c) offre en vente, annonce, ou a, pour le vendre ou en disposer, quelque moyen, indication, médicament, drogue ou article destiné ou représenté comme servant à prévenir la conception, ou à causer un avortement ou une fausse-couche,...

Donc, c'était un délit. J'ai déclaré, au début, qu'il s'agissait d'un délit. Nous savons tous que, sciemment, tous enfreignaient cette loi et que personne n'a été poursuivi depuis 1930, environ.

Je ne nierai pas que de façon non-officielle certaines agences de bien-être du pays ont offert à la population des pilules et les ont mis au courant d'autres méthodes. Il s'agit donc d'un texte de loi dont ont fait fi depuis de nombreuses années divers organismes en vue du pays. C'est là une des raisons pour lesquelles nous tentons de légaliser, par ce bill, la diffusion de ces renseignements.

M. Howe: Monsieur le président, vous avez dit que cette loi permettrait aux gens pauvres, aux gens à faible revenu, qui dépendent de l'assistance sociale, d'obtenir ces renseignements. Les gens à revenu moyen ou élevé étaient capables, eux, de pourvoir à leurs besoins en ce domaine.

M. Munro: Oui, c'est exact.

M. Howe: Est-ce que des sommes additionnelles seront mises à la disposition de ces organismes pour leur permettre de transmettre ces renseignements et aider les gens? Seront-ils en mesure de fournir ces détails à ces personnes?

M. Munro: Oui, ils pourront fournir ces renseignements et en promouvoir l'usage. J'ai dit qu'ils enfreignaient la loi s'ils s'adonnaient à de telles activités avant l'adoption du bill et pour cette raison ils sont un peu réticents. Certains refusent de le faire tandis que d'autres le font d'une façon secrète et inefficace.

Avec l'adoption de ce projet de loi, s'il est adopté, ces organismes pourront agir comme ils demandent au gouvernement de pouvoir le

[Texte]

mit them to do it—in an open way—and they will be able to put forward well-thought-out educational programs which will be directed towards the very economic groups you are talking about, the lower income groups, and so on.

Mr. Howe: In order to do that they will require a little more money than a lot of them have at the present time. Are you going to make more money available to the provinces so they can assist in these welfare programs?

Mr. Munro: There is no question but that the provincial governments will be under some pressure to free up funds for this purpose, and so will we. In our Department and as a matter of government policy we now have to determine whether we are prepared to either give funds indirectly to the provinces to encourage them to get into this in a more active way or to mound through—as we say in the anti-smoking campaign—the health side a more active educational program in this area, and obviously we can consider both of these alternatives once this legislation passes.

Mr. Howe: There are other groups, of course, that have done some wonderful work in this field, and that is the churches and some private voluntary organizations. Is it possible for them to get assistance from the government in carrying forward wider programs?

Mr. Munro: Yes. Anything is possible in that area. You are speaking of individual isolated groups, they are more likely to get grants from the provinces. There is a tendency now at the federal level to give grants to organizations which are national in scope. For instance, there would be nothing to prevent the federal government from giving a grant to the Family Planning Service, which is a national organization, as we do to many other organizations in this area, to promote a program along these lines.

Mr. Howe: Does the Salvation Army not have a program somewhat similar to this?

Mr. Munro: Yes. I do not know if that is one of the organizations we give federal grants to, but they are a national organization. It is conceivable that we could give them money. As far as the federal government is concerned I think it would more likely be an organization that is concerned with this particular area.

Mr. Howe: I have one other question that comes to mind in connection with this whole

[Interprétation]

faire depuis si longtemps, ouvertement. Ils pourront mettre en œuvre des programmes bien pensés à l'intention de ces groupes économiques dont vous parlez, les groupes à faible revenu.

M. Howe: Pour ce faire, ils auront besoin de plus d'argent que plusieurs d'entre eux n'en ont présentement. Donneriez-vous plus d'argent aux provinces pour leur permettre d'aider à la réalisation de ces programmes?

M. Munro: Il est évident que les gouvernements provinciaux seront priés de contribuer davantage à cette fin, et que nous le serons également. Il nous faudra maintenant déterminer si nous serons prêts, soit à confier des sommes indirectement aux provinces pour les encourager à être plus actives, soit appuyer, comme ce fut le cas dans la lutte contre la cigarette, sur l'aspect santé de la question. Il est évident que nous pourrions étudier ces deux solutions lorsque le bill aura été adopté.

M. Howe: Il y a d'autres groupes qui ont fait de l'excellent travail, tels certaines églises et certains organismes privés bénévoles. Est-ce qu'ils pourront recevoir l'aide du gouvernement fédéral pour élargir le champ de leurs activités?

M. Munro: Oui. Tout est possible dans ce secteur. Si vous parlez de groupes individuels isolés, ils obtiendront probablement plus facilement des subventions du gouvernement provincial. A notre niveau, nous tendons plutôt à donner des subventions aux organismes d'envergure nationale. Ainsi rien ne pourrait empêcher le gouvernement fédéral de verser une subvention au Service de planification familiale, qui est un organisme national, comme nous le faisons pour d'autres organismes.

M. Howe: Est-ce que l'Armée du salut n'a pas un programme semblable à celui-là?

M. Munro: Oui. Je ne sais pas si nous leur accordons des subventions fédérales mais c'est un organisme national. Il est possible que nous leur donnions de l'argent. Je crois que le gouvernement fédéral aiderait plutôt un organisme qui s'occupe de ce domaine précis.

M. Howe: Une autre question qui me vient à l'esprit, au sujet des contraceptifs. On parle

[Text]

matter of contraceptives. It says that it includes a contraceptive device but it does not include a drug. Why is the pill not covered? Is it not recognized or is it covered in some other legislation?

Dr. Chapman: Mr. Chairman, I could answer that question. The pill, of course, is classified as a drug and therefore it is covered under the definition of a drug in the Food and Drugs Act. It is on Schedule F and therefore requires the prescription of a physician.

Mr. Howe: Can it be advertised?

Dr. Chapman: Not to the general public. None of the drugs on Schedule F can be advertised to the general public.

Mr. Howe: Is it advertised in the medical journals?

Dr. Chapman: Yes, it is.

Mr. Howe: Thank you.

Mr. Foster: Mr. Munro, it seems to me that by not letting the drug companies advertise their wares directly it is going to put quite a load on the family planning groups. Would it be possible for the drug companies and the manufacturers of contraceptive devices to make grants to family planning groups en masse for their use in advertising?

Mr. Munro: Yes, there is nothing to stop them from doing that.

Mr. Foster: This seems to me to be a good source of funds rather than coming to the federal government or provincial government.

What types of advertising are you thinking of providing in your regulations? Are you thinking about newspapers, magazines and TV?

Mr. Munro: Largely, yes.

Mr. Foster: It seems to me that TV offers one of the greatest possibilities for education in this sphere, on women's programs in the afternoon and this type of thing for family planning groups, and I would hope that this medium would be available.

What about billboards? In some foreign countries we see billboard advertisements. What is the Department's opinion on this type of advertising?

Mr. Munro: I do not know what the Department's opinion is, it is a very subjective thing when we get into this area of the

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de dispositifs contraceptifs mais non de drogues. Pourquoi la pilule n'est-elle pas incluse? Est-ce parce qu'elle n'est pas reconnue ou parce qu'un autre texte de loi prévoit ce pas?

Dr. Chapman: La pilule est classée comme une drogue. Elle est donc incluse dans la définition du mot drogue aux termes de la *Loi des aliments et drogues*. Elle figure à l'appendice F et ne peut être obtenue que sur ordonnance.

M. Howe: Peut-elle faire l'objet de réclame?

Dr. Chapman: Pas à l'endroit du public, en général. Aucune des drogues inscrites à l'appendice F ne peut faire l'objet de réclame publique.

M. Howe: Est-elle annoncée dans les revues médicales?

Dr. Chapman: Oui.

M. Howe: Merci.

M. Foster: Si les compagnies de drogues ne peuvent faire de la publicité pour leurs produits, cela imposera bien des difficultés aux groupes de planification familiale. Est-ce que les compagnies de drogues et les fabricants de contraceptifs ne pourraient pas accorder des subventions aux groupes de planification familiale qui, eux, pourraient consacrer ces sommes à la publicité?

M. Munro: Oui. Rien ne les empêche de le faire.

M. Foster: Ce me paraît être une bonne source de revenus qui empêcherait un recours aux gouvernements fédéral et provinciaux. Quel genre de publicité prévoyez-vous inclure dans les règlements? Avez-vous pensé aux journaux, aux revues, à la télévision?

M. Munro: Surtout, oui.

M. Foster: Je pense que la télévision offre l'une des meilleures possibilités d'éducation en ce domaine principalement durant les émissions féminines de l'après-midi. J'espère qu'on y aura recours. Et les grands panneaux-réclame? Dans certains pays, cette méthode est utilisée. Quel est l'avis du ministère là-dessus?

M. Munro: Je ne sais pas quelle est l'opinion du ministère; c'est un domaine très subjectif lorsqu'on en est rendu là. Il nous faudra

[Texte]

media and what constitutes good taste. We just have to draw the regulations to the best of our ability. It will not be perfect.

Unless Dr. Chapman would like to add something, my only comment to that would be that after the bill passes we are going to take into account many of the observations that have been made in Parliament and made before this Committee when we draft up these regulations, and do the best we can. We have not formed any ironclad conclusions in this direction at the moment. We have contemplated various draft regulations but we are certainly open to suggestion. Do you want to add anything to that?

Dr. Chapman: No, Mr. Munro. This is certainly our position and I think you have stated it very clearly.

Mr. Foster: Will the department of health have a separate budget for this type of educational program? You have a budget now for the anti-cigarette campaign: will you have a separate amount of money for family planning education in Canada?

Mr. Munro: We may. Before we went too far in this area we wanted to get the legislation enacted and then consider what we would do in this area. I think it would be a matter then for government policy to determine just how much we are willing to allocate and how far we are willing to go as a federal government in actually promoting family planning.

As I indicated in my opening remarks, I think the benefits are such that would warrant very serious consideration by the government to assisting in this area as much as possible. But I do feel that that will require a government decision as to policy. It is one thing to remove the prohibition against; it is, of course, another thing, having done that to then actively promote, and if we are going to get in the area of actively promoting, this will require a decision of the government, which, as I have indicated, I am very favourably disposed to but which decision has not been taken. We will await the passage of this bill before that decision is taken.

Mr. Foster: Thank you, Mr. Munro.

Mr. Haidasz: Mr. Chairman, I would like to ask our witnesses just three general questions. One, even though chemical and physical products for contraceptive use have been manufactured and sold in Canada, what has the Food and Drug Directorate done to ensure, one, the safety and efficacy of these products; two, the control of the sale of these products as far as minors are concerned; and

[Interprétation]

établi les règlements au meilleur de notre connaissance. Ce ne sera pas parfait.

Le docteur Chapman voudrait peut-être ajouter quelque chose. Le seul autre commentaire que je ferai c'est que lorsque le bill sera adopté, nous tiendrons compte des commentaires faits en Chambre et ici avant de décider les règlements. Nous ferons de notre mieux. Nous n'avons pas encore tiré de conclusions éternelles. Nous avons déjà songé à diverses choses mais nous sommes prêts à recevoir toute suggestion. Voulez-vous ajouter quelque chose?

Dr. Chapman: Non, monsieur le ministre. C'est notre position et je crois que vous l'avez bien exposée.

M. Foster: Est-ce que le ministère de la Santé aura un budget distinct pour ces programmes d'éducation? Vous avez un budget, présentement, pour la campagne contre la cigarette: aurez-vous un budget distinct pour la planification familiale?

M. Munro: Peut-être. Avant d'aller trop loin dans ce domaine, nous avons voulu obtenir l'approbation du projet de loi. Je crois qu'il appartiendra au gouvernement de décider combien il veut consacrer à cette fin, et jusqu'où il veut aller, en tant que gouvernement pour promouvoir la planification familiale.

Je pense que les avantages sont tels que le gouvernement devra étudier la question très sérieusement. Je crois qu'il appartiendra au gouvernement d'établir la politique à suivre. Éliminer l'interdiction est une chose, promouvoir cette question en est une autre. Mais si nous devons nous lancer dans le domaine de la promotion de cette idée, il faudra que le gouvernement prenne une décision, ce que favorise, mais cette décision n'a pas encore été prise. Nous attendrons que la loi soit adoptée avant de prendre la décision.

M. Foster: Merci, monsieur Munro.

M. Haidasz: Je voudrais poser trois questions d'intérêt général aux témoins. Premièrement, même si des produits physiques et chimiques servant à la contraception sont fabriqués et vendus au Canada, qu'est-ce que la Direction des aliments et drogues fait pour assurer, premièrement la sécurité et l'efficacité de ces produits deuxièmement, pour contrôler la vente de chacun de ces produits

[Text]

what does it plan to do in the future about this aspect?

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Dr. Hardman: Dr. Haidasz, until this act is enacted, many of the substances which are indirectly promoted for birth control purposes such as the condoms, the barrier foams and jellies, have not been subject to our regulations. In other words, they were not being promoted as a medical device or as a drug under our act. So that, we have only indirect knowledge of the efficacy of condoms, diaphragms, barrier jellies and foams.

With respect to the hormonal preparations which have been Schedule "F", these have been subject to the new drug regulations and all of these products have been reviewed for efficacy and safety. We are doing, as you realize, a great deal of work at the present time on the safety aspects of these products.

The same applies to the intrauterine devices; they have not been a medical device under our existing legislation. We have, however, been co-operating with the companies who have been manufacturing this in their providing us with information on their products, but we have not had the authority to do an evaluation until this legislation is enacted.

Mr. Haidasz: In other words, you will study, for example, in the future the safety and efficacy of physical intrauterine devices even, and as far as their abortive potentialities are concerned?

Dr. Hardman: I think we are obliged to do this now. For example, with the intrauterine devices, some of these were containing barium as a trace element for X-ray photography and we have been concerned about the leaching out of this barium and potential action on the uterus. So we have been doing some work in this area.

Mr. Haidasz: How do you propose to control the sale of both chemical and physical contraceptive products as far as the public is concerned, and especially the minors? Can a 16-year old boy or girl walk into a drug store and demand an intrauterine contraceptive device? Will it be available on prescription or just on demand by oral request?

Dr. Hardman: Mr. Chairman, we have not made a restriction as to age in the legislation, I think primarily because we do not control the retail outlets in this situation. The provinces, however, in their pharmacy acts, could restrict the retail outlets and make other necessary restrictions as far as a minor is concerned.

[Interpretation]

dans le cas des mineurs et dernièrement que compte-t-elle faire à l'avenir à ce sujet?

Dr. Hardman: Tant que ce projet ne deviendra pas loi, un grand nombre de substances qui servent aux fins de contraception comme les préservatifs, les mousses et les gelées, ne sont pas assujettis à nos règlements. Ils n'étaient pas qualifiés de dispositifs médicaux ou de drogues aux termes de la loi. De sorte que nous n'avons qu'une connaissance indirecte de l'efficacité des diaphragmes, des préservatifs, des gelées et des mousses.

Quant aux préparations hormonales, mentionnées à l'appendice F, elles sont régies par les nouveaux règlements et tous ces produits ont été étudiés au point de vue efficacité et sécurité. Nous étudions, en ce moment, l'aspect sécurité de ces produits.

Cela s'applique aussi aux dispositifs intra-utérins; ils n'étaient pas considérés comme étant des dispositifs médicaux selon la loi. Mais toutefois, nous avons collaboré avec les fabricants. Les fabricants nous donnent des renseignements sur les produits, nous ne sommes pas autorisés à les évaluer avant que la loi n'entre en vigueur.

Mr. Haidasz: En d'autres termes, à l'avenir, vous étudierez l'efficacité des dispositifs intra-utérins et le fait qu'ils pourraient entraîner l'avortement.

Dr. Hardman: Je crois que nous devons le faire présentement. Certains dispositifs intra-utérins contiennent du baryum, ce qui sert pour la prise de radiographies. Nous craignons les effets que le baryum pourrait avoir sur l'utérus. Nous avons donc étudié cet aspect.

Mr. Haidasz: Comment vous proposez-vous de contrôler la vente de contraceptifs offerts en vente au public, et principalement en ce qui concerne les mineurs? Est-ce qu'un garçon ou une fille de 16 ans pourra entrer dans une pharmacie et demander des dispositifs intra-utérins de contraception? Seront-ils disponibles sur ordonnance seulement?

Dr. Hardman: Monsieur le président, il n'y a pas de restriction quant à l'âge dans la loi, principalement, je crois parce que nous ne réglementons pas la vente au détail. Toutefois, les provinces dans leurs lois régissant les pharmacies pourraient restreindre les magasins de détail et imposer d'autres restrictions dans le cas des mineurs.

[Texte]

We have had discussions with the industry in this regard, and with respect to intrauterine devices, the distribution channel, has not been through retail outlets, but only to hospitals, physicians and clinics. We will be monitoring this to make sure there is no change from this type of distribution pattern, because with the intrauterine devices we feel that this must be not only a prescription item, but fitted by the physician.

Mr. Haidasz: Mr. Chairman, I have just one more question. I presume, then, that the federal authorities will consult with the provincial authorities concerning the distribution of these products to the public, and especially to people under a certain age.

Mr. Munro: It is an area of provincial jurisdiction. As Mr. McCarthy, the legal adviser to the Department says, we really do not have anything to do with it. As you are aware, if we did become concerned, even though it was not within our area of responsibility, it is an avenue we could talk over in the regular channels with the provincial authorities through the Federal-Provincial ministers of health, and so on. Yes, we could have some influence even if it was of an indirect nature. I think that if some of these practices are carried in the way that you indicate the provinces would probably be all too ready to act on their own—if it became of the proportions you indicate, with people going in and buying them and so on.

The Chairman: Mr. Paproski.

Mr. Paproski: Thank you, Mr. Chairman. On Schedule J you have added the four drugs which you now wish to be under restricted drugs. Could we have some explanation of what these drugs are?

Mr. Munro: Yes. There is LSD, STP, DET, DMT, I think I will have to turn that over to Dr. Chapman, Mr. Chairman, for him to indicate what are the harmful effects of these particular substances.

Dr. Chapman: Thank you. Mr. Chairman, these are all hallucinogens, that is compounds that will produce hallucinations when taken, in some cases in very small amounts. Under these circumstances these are certainly dangerous drugs and therefore their sale, distribution and even possession should be restricted.

Mr. Paproski: Are these drugs widely used now, Doctor? And if they are, in what field?

[Interprétation]

Nous nous sommes entretenus avec les industries à ce sujet. Pour ce qui est des dispositifs intra-utérins, ils ne sont disponibles que dans les hôpitaux, chez les médecins et dans les cliniques. Nous surveillerons cela pour qu'il n'y ait pas de changement dans cette pratique, car les dispositifs intra-utérins, à notre avis, doivent non seulement faire l'objet d'une ordonnance mais aussi être installés par un médecin.

M. Haidasz: Ma troisième question. Je suppose que les autorités fédérales consulteront les provinces pour ce qui est de la distribution de ces produits au public, et notamment, aux personnes qui n'ont pas atteint un certain âge.

M. Munro: Cela relève de la compétence provinciale. Comme le conseiller juridique du ministère, monsieur McCarthy, l'a dit, nous n'avons rien à voir dans cela. Comme vous le savez, si cette question nous inquiétait, bien qu'elle ne relève pas de notre compétence, nous pourrions en discuter avec les autorités provinciales, au cours des rencontres fédérale-provinciales des ministres de la Santé. Oui, nous pourrions exercer une certaine influence même si ce n'était qu'indirectement. Je pense que si ces pratiques se poursuivent de la façon dont vous l'indiquez, les provinces agiraient volontiers de leur propre chef, si la situation serait telle que, comme vous le dites, les gens iraient en acheter comme si de rien n'était.

Le président: Monsieur Paproski.

M. Paproski: Merci beaucoup, monsieur le président. A l'appendice J, vous avez ajouté les 4 drogues que vous désirez faire ajouter à la liste des drogues contrôlées. Pourriez-vous nous expliquer en quoi consistent ces drogues?

M. Munro: Oui il y a le LSD, le STP, le DET et le DMT, mais je pense que je dois m'en remettre au Dr Chapman qui vous indiquera les effets nocifs de ces drogues.

Dr Chapman: Monsieur le président, ce sont tous des hallucinogènes, c'est-à-dire, des composés qui produisent des hallucinations, même pris en très petite quantité. Dans ces circonstances ces drogues sont donc dangereuses, et par conséquent, la vente, la distribution, et même la possession de ces drogues doivent être limitées.

M. Paproski: Ces drogues sont-elles largement utilisées maintenant? Et si oui, dans quel domaine?

[Text]

Dr. Chapman: They are not used for medical purposes except in the case of LSD, where provision is now made for investigation of LSD to determine its safety and efficacy in institutions authorized by the Minister. However, we have noted that these drugs are being used to a significant extent in the illicit traffic and this is the reason that they have been placed on this Schedule J.

Mr. Paproski: Can these drugs be obtained under a different name in the pharmaceutical stores?

Dr. Chapman: No, sir.

Mr. Paproski: They have to be asked for by name in order to be obtained. Is this right?

Dr. Chapman: No, sir. They are not available.

Mr. Paproski: They are not available. So there is no way our young people can obtain this unless it is on the illicit market?

Dr. Chapman: That is correct.

Mr. Paproski: Thank you.

Mr. Howe: I have a supplementary question. What is the origin of these drugs? Where do they come from?

Dr. Chapman: Well, as the Minister has already indicated, it is not too difficult to produce LSD if you have the necessary chemical equipment and the starting materials. The result is that these are being produced by illicit laboratories and some of them, I think, are coming in from other countries. Possibly to a limited extent they are being produced in Canada.

Mr. Howe: In other words, you do not know the origin or the beginning of any of these drugs, whether they came from the United States or Italy or Japan or Hong Kong?

Dr. Hardman: The source of supply of most of these now is the United States. LSD, however, is being brought in from Czechoslovakia and Europe on occasion. The fourth product, STP or DLM, is a chemical substance that was produced by Dow Chemical and the chemical formula was bootlegged into the illicit market. All of these are being manufactured by underground manufacturers in back kitchens but they have the equipment and are distributing it through illicit methods.

Mr. Howe: What does Dow Chemical use it for?

[Interpretation]

Dr. Chapman: Elles ne sont pas utilisées à des fins médicales, sauf dans le cas du LSD où des dispositions sont prises pour faire enquête sur ce produit et déterminer son innocuité et son efficacité dans les institutions autorisées par le Ministre. Toutefois, nous avons remarqué que ces drogues sont largement utilisées dans le trafic illicite et c'est pourquoi on les a inscrites à l'annexe J.

M. Paproski: Peut-on obtenir ces drogues sous d'autres noms dans les pharmacies?

Dr. Chapman: Non, monsieur.

M. Paproski: Il faut les demander par ces noms-là.

Dr. Chapman: Non, elles ne sont pas sur le marché.

M. Paproski: Alors les jeunes ne peuvent pas se les procurer à moins que ce soit sur le marché noir.

Dr. Chapman: C'est juste.

M. Paproski: Merci.

M. Howe: J'ai une question supplémentaire. Quelle est l'origine de ces drogues? D'où viennent-elles?

Dr. Chapman: Comme le ministre l'a déjà indiqué, il n'est pas très difficile de produire du LSD, si vous avez les produits nécessaires et l'équipement. Il en résulte que ces drogues sont produites dans des laboratoires illégaux. Certains nous viennent, je pense, d'autres pays. Et d'une façon limitée, elles sont produites ici.

M. Howe: Autrement dit, vous ne connaissez pas l'origine ou les pays d'où proviennent ces drogues, les États-Unis, l'Italie, le Japon ou Hong-Kong?

Dr. Hardman: Voici, la plupart de ces drogues nous viennent des États-Unis maintenant. Le LSD provient de Tchécoslovaquie et d'Europe à l'occasion. Le quatrième produit, le STP ou le DLM est une substance chimique produite par la Dow Chemical et la formule chimique a été passée en contrebande sur le marché noir. Toutes ces drogues sont préparées par des fabricants illicites au fond de leur cuisine où ils ont l'équipement nécessaire et les produits sont distribués de façon illégale.

M. Howe: Quel en était l'usage à la Dow Chemical?

[Texte]

Dr. Hardman: It was originally developed as part of the chemical warfare experimental work. In effect, they were looking for a substance which could disorganize the thought processes for a temporary period of time, sufficient for military action. I do not know that it is a chemical warfare weapon. I do not believe it is because it had a number of side effects, which is what we are concerned about in illicit drug use.

Mr. Paproski: Could any of these products be manufactured in our colleges in the labs, say in the science labs?

Mr. Hardman: Yes, they could. In a university lab with a graduate chemist, you would have enough knowledge and have access to sufficient equipment of the right type to perform this. You will note that we have asked for control not only of drugs but of substances. Some of the precursor substances are used for the production of legitimate drugs. We would like to control the primary chemical manufacturer to a certain extent—his distribution of precursor substances; a least to have him account for them.

Mr. Paproski: Mr. Chairman, would the same thing apply to high schools? Could this also be done at the high school level?

Dr. Hardman: I think it is unlikely at our present level of education.

Mr. Paproski: Thank you.

Mrs. MacInnis (Vancouver-Kingsway): I would like to ask a supplementary question. It arises from the fact of the very widespread use of LSD. People are always saying to me, "Being as widespread as it is, what possibility is there of actually controlling it and keeping it down?" In addition to methods of legal prosecution and so on, is the Department planning any wholesale campaign of education such as has been done in connection with other noxious substances?

Mr. Munro: Yes. As we have indicated, we have set up a drug secretariat although we are considering a new form of activity in the Department rather than that, perhaps having it switched more to a program basis so that we can assume a greater degree of responsibility in an educational way to discourage drug misuse. We are also considering other areas where we can bring together in a more adequate way our research and knowledge in this whole area of drug misuse. We hope we will have something to announce about that fairly shortly. We are giving this area a good deal of thought at the present time.

[Interprétation]

Dr. Hardman: C'était une expérience, en fait, on cherchait une substance qui pouvait désorganiser le mode de pensée de façon temporaire, à des fins militaires. Je ne pense pas que ce soit utilisé comme une arme chimique car elle produit un certain nombre d'effets secondaires, ce dont il est question en ce moment.

M. Paproski: Ces produits peuvent-ils être fabriqués dans les laboratoires des universités, disons dans les laboratoires des facultés de sciences?

Dr. Hardman: Oui, cela se pourrait. Dans un laboratoire d'université avec un chimiste diplômé qui aurait les connaissances voulues, et qui aurait l'équipement nécessaire. Vous remarquerez qu'on a demandé le contrôle non seulement des drogues mais des matières qui les composent. Quelques-unes des substances de base ont utilisées pour produire des drogues bien légitimes. Nous voudrions contrôler dans une certaine mesure les fabricants.

M. Paproski: Monsieur le président, mais est-ce que la même chose pourrait s'appliquer aux écoles secondaires? Est-ce qu'on pourrait en fabriquer dans les écoles?

Dr. Hardman: Cela me semble peu possible, au niveau d'éducation actuel.

M. Paproski: Merci.

Mme MacInnis (Vancouver-Kingsway): Je voudrais poser une question supplémentaire qui découle du fait que l'utilisation du LSD est très répandue. On me dit souvent, comme c'est si répandu, comment peut-on vraiment y exercer un contrôle et en limiter l'usage. En plus des poursuites légales et autres mesures, le ministère songe-t-il à lancer une campagne d'éducation massive comme ce qu'on fait pour d'autres substances dangereuses.

M. Munro: Oui. Comme nous l'avons indiqué, M^{me} MacInnis, nous avons un secrétariat des drogues bien qu'il soit question d'une nouvelle formule dans notre ministère. La mise sur pied d'un programme de base pour que nous puissions assumer une plus grande responsabilité en vue de décourager, par l'entremise de l'éducation, le mauvais usage des drogues. Aussi on songe à d'autres méthodes qui nous permettraient de regrouper de façon plus adéquate, nos connaissances et les recherches faites sur le mauvais usage des drogues. J'espère qu'on aura quelque chose à annoncer à ce sujet. Cette question fait l'objet d'une étude assez sérieuse à l'heure actuelle.

[Text]

The Chairman: Mr. Foster.

Mr. Foster: Mr. Chairman, a few weeks ago we had before us the Hazardous Products Bill. Are you dividing up these hallucinogenic substances on the basis that those taken by mouth will be under the Food and Drug Directorate and the others such as glue that are breathed will be under the Department of Consumer and Corporate Affairs?

Dr. Hardman: No, the division is not of this type. The solvents that are inhaled are products that are already on the market for other purposes. They are, for example, household cleaners and finger-nail polish removers, and it is in order to control them as a product and to ensure adequate labelling that Bill S-26 was introduced by the Minister of Consumer and Corporate Affairs, so that it is not their intent to make an offence the possession as it is here with chemical substances and drugs that are sold for drug purposes.

Mr. Foster: But these are not drugs in the sense that they are used for any medicinal purposes. They are really hazardous products but they are grouped with the drugs.

Mr. Paproski: Mr. Chairman, may I ask a further supplementary here? I do not know how drugs such as LSD are taken. Are they inhaled or are they taken in capsule form or hypodermically?

Dr. Hardman: They are taken in all those ways except inhalation. They are either injected or swallowed. They come as a powder, in capsule, and in tablets, depending on the degree of dependency. The normal method is orally. However, with some of the severely drug-dependent people, they are being injected intravenously.

Mr. Paproski: Mr. Munro, when do you feel that you will put marijuana under the restricted drug...

Mr. Munro: We have now this proposed amendment to the Narcotic Control Act; it is embodied in this bill we are now considering. The Crown has an option to proceed by way of indictment or summary conviction. Presumably, for a first offender for possession of marijuana, if it was felt that it was an isolated act by some young person who was only trying it, the Crown could now, instead of proceeding by way of indictment against that person, proceed by way of summary conviction. But it would still be under the Narcotic Control Act.

It is quite true on the other hand that we could take another step, and it would depend

[Interpretation]

Le président: Monsieur Foster?

M. Foster: Monsieur le président, nous avons étudié, voici quelques semaines, le Bill sur les produits dangereux. Ces substances hallucinogènes, sont-elles divisées selon le principe voulant que celles qui sont prises par voie buccale relèveront de la Direction des aliments et drogues, et les autres tels que la colle qui est inhalée relèvera du ministère des Affaires des consommateurs et des corporations?

Dr. Hardman: Monsieur le président. Non, ce n'est pas ce genre de division. Les produits qui sont inhalés se trouvent sur le marché pour d'autres fins. Il s'agit de détergents, de décapants pour les ongles et c'est pour les contrôler comme étant un produit et pour bien les étiqueter que le Bill S26 a été présenté par le ministre des affaires des consommateurs et des Corporations de sorte que le bill n'a pas pour but de considérer leur possession comme étant un délit comme on le fait pour les drogues ici.

M. Foster: Ce ne sont pas des drogues, dans le sens qu'elles sont utilisées à des fins médicales. Ce sont vraiment des produits dangereux. Ils sont groupés avec les drogues.

M. Paproski: Monsieur le président, je ne sais pas comment on consomme les drogues comme le LSD. Sont-elles inhalées, se présentent-elles sous forme de capsules ou sont-elles injectées?

Dr. Hardman: Elles se consomment de toutes ces façons, sauf par inhalation. On le consomme en poudre, en capsules ou en tablettes, selon le degré de sujétion. La façon normale de l'absorber est oralement, mais il y a aussi les injections intraveineuses, pour les narcomanes avancés.

M. Paproski: Monsieur Munro, quand la marijuana sera-t-elle placée dans cette catégorie des drogues contrôlées...

M. Munro: L'amendement à la Loi sur les stupéfiants est prêt. Il est inclus dans le présent bill. La Couronne a le choix; elle peut porter une accusation pour infraction punissable sur déclaration sommaire de culpabilité ou porter une accusation au criminel. Normalement, lorsqu'il s'agit de la première infraction, possession de marijuana, et s'il s'agit d'un cas isolé, par un jeune qui voulait faire une expérience, on préfère la première à la deuxième. Mais le tout serait en vertu de la Loi sur les stupéfiants. D'autre part, il est vrai qu'on pourrait aller plus loin. Cela dépendrait de l'interprétation, qui serait libérale ou restrictive. A ce qu'on me dit, on pourrait, grâce

[Texte]

on your own interpretation which direction it was in, whether it was more liberal or not. My information is that by Order in Council we could transfer marijuana from the Narcotic Control Act to this new schedule under the Food and Drugs Act. It would be a matter of government decision as to whether in fact this would be done, and whether the Cabinet would want to take this course of action. That decision has not been made one way or another.

Mr. Paproski: Is there a reluctance to do this? And if there is, I would like to know why?

Mr. Munro: One of my officials reminds me that there are certain international obligations, but I think it is more fair to say that the government's position at this time would be—and we are now giving a great deal of consideration to this—we want to develop a means of improving our knowledge in terms of research on the incidence of drug abuse or misuse throughout the country.

In other words, we want to bring together the fund of medical and scientific knowledge as to the physiological harm which is caused by marijuana and LSD and hallucinatory drugs, and we also want to look into the sociological implications of the use of these drugs and bring that research and knowledge together in a more adequate way in the relatively near future before we arrive at any firm conclusions as to what further ways our laws should be amended in this regard.

Mr. Paproski: You have done this with LSD, but there still seems to be a reluctance on the part of the government to do this for marijuana.

Mr. Munro: No, I do not suggest so. In regard to LSD, what we have done, even though we want to go into it a good deal more, we felt it was necessary to pass this particular law because we are thoroughly satisfied about the serious physical harm it can do to human beings who use it. So it was absolutely necessary for us to get some control over it, and therefore we passed this particular legislation.

We already have control over marijuana. So it is not a question of reluctance one way or another. There is a good deal of controversy and conflicting thought now as to what is the best method of discouraging the use of these drugs or marijuana.

There is no question that there are many more constructive ways that just law enforcement to discourage the use. There is no question of that either. But who is prepared to say at this time just what the best methods are, without an intensive study being conducted?

[Interprétation]

à un arrêté en Conseil, transférer la marijuana de la *Loi sur les stupéfiants* à l'annexe de la *Loi des aliments et drogues*. Le gouvernement en déciderait, et on saurait alors si le Cabinet veut prendre ces mesures. La décision, de toute façon, n'a pas été prise.

M. Paproski: Y a-t-il hésitation? Si oui, pourquoi?

M. Munro: On me rappelle que le Canada a certaines obligations internationales à cet égard; cependant, il serait juste de dire que la position du gouvernement serait que nous voulons considérer cela et que nous voudrions mettre au point des méthodes pour accroître nos connaissances, c'est-à-dire faire des recherches sur les cas d'abus ou de mauvais usage des drogues dans tout le pays.

En d'autres termes, nous voulons regrouper nos connaissances scientifiques et médicales afin de connaître les mauvais effets physiologiques et autres de la marijuana, du LSD et autres drogues hallucinogènes. Nous voulons aussi étudier les conséquences sociales de l'emploi de ces drogues. Nous voulons regrouper ces connaissances et ces recherches de façon plus adéquate très bientôt avant d'en arriver à des conclusions fermes quant à modifier nos lois dans ce domaine.

M. Paproski: Vous l'avez fait pour le LSD mais il me semble qu'il y a encore une certaine hésitation de la part du gouvernement dans le cas de la marijuana.

M. Munro: Non, je ne dis pas cela. Ce que nous avons fait avec le LSD était nécessaire, même si nous voulons en connaître plus à ce sujet, car nous sommes convaincus du danger que son absorption présente aux personnes qui s'en servent, de sorte qu'il faut d'abord avoir un certain contrôle. Aussi, nous avons adopté cette mesure législative.

Nous avons déjà un contrôle sur la marijuana. Il n'est donc pas question d'hésitation. Il y a beaucoup de controverse et d'opinions divergentes sur la meilleure façon de bannir l'emploi de ces drogues. Sans doute existe-t-il de meilleures façons que la rigueur de la loi pour obtenir ce résultat, c'est facile à voir, mais quelles sont les meilleures méthodes? Qui peut le dire maintenant sans qu'on fasse une étude approfondie dans ce domaine?

[Text]

As the Minister of National Health and Welfare for Canada, I do not feel that I am in a position to make any recommendations of a firm nature to the government in this area until I have more information at my disposal. I think it would be fair to state also that the officials who have concerned themselves very much with this are of the same opinion. It would be the officials of the Food and Drug Directorate. They have been concerned with the scientific side of these particular drugs. Their mandate has not been to study the sociological implications that certainly have to be considered before we bring in any new laws. We have to bring together the body of knowledge that we have and the social considerations, and come to some conclusions. I agree that this should be done with a fair degree of haste, but we are not at that stage yet.

Mr. Paproski: I agree with you that there is much study to be done, but I feel also that our magistrates and judges are not taking this into consideration. I do not know whether I am for marijuana or against marijuana, or whether it should be on the restricted list.

There are quite a few more people now who are being sentenced on account of marijuana than there were two or three years ago, or even last year. The magistrates and judges are prosecuting under the Narcotic Control Act, and I think it is going to come under your Department to decide whether this is a restricted drug or narcotic, or just exactly what it is.

There seem to be many people across Canada who are concerned about this right now, because of the use of marijuana in all major cities.

Mr. Munro: I agree fully with those observations and share those concerns, and we are not arriving at any firm conclusions one way or another as to just how they should be treated, whether it should be in one area or another. In the relatively near future I hope that we will be in a position to come to some firm conclusions.

We have taken one step, providing at least for now a greater degree of flexibility in procedure for our magistrates and judges. With this further amendment now to be embodied in Bill S-15, we have given the Crown an option to proceed by way of summary conviction or by indictment. So that rather than a mandatory penal term, now other less severe sanctions can be levied against an accused for the use of marijuana.

There is a greater degree of flexibility that has been built in as a result of this act, and I

[Interpretation]

A titre de ministre de la Santé nationale et du Bien-Être social au Canada, je ne crois pas pouvoir faire des recommandations fermes au gouvernement tant que je n'aurai pas plus de renseignements. Et je pense que ce serait juste aussi de dire que les experts qui s'y intéressent sont du même avis. Les hauts fonctionnaires de la Direction des aliments et drogues, par exemple, s'occupent de l'aspect scientifique, mais leur mandat n'est pas d'étudier les conséquences sociales qu'il faut certainement considérer avant de rédiger une nouvelle loi. Il nous faut réunir les connaissances que nous avons, les ajouter aux considérations sociales, et ensuite tirer des conclusions. J'admets qu'il faudrait faire assez vite, mais nous ne sommes pas rendus à ce point-là encore.

M. Paproski: Je suis d'accord avec vous. Il y a beaucoup d'étude à faire, mais d'autre part, j'estime que nos magistrats et nos juges ne tiennent pas compte de ceci. Je ne sais pas si je suis pour ou contre la marijuana, ou si on devrait même en permettre l'usage restreint.

Il y a beaucoup plus de personnes qui sont condamnés pour l'usage de la marijuana qu'il y en avait il y a deux ou trois ans et même l'année dernière. Les juges et magistrats condamnent aux termes de la *Loi sur les stupéfiants*; je pense que c'est à votre ministère qu'il incombera de décider s'il s'agit d'une drogue contrôlée d'un stupéfiant ou quoi d'autre.

Partout au Canada, il y a bien des gens qui sont inquiets, dans le moment, à cause de l'emploi répandu de la marijuana dans toutes les grandes villes.

M. Munro: Je suis tout à fait d'accord avec vos observations et je partage votre inquiétude. Nous n'avons pas tiré de conclusion quant à savoir s'il fallait tolérer ou non l'usage de la marijuana ou sévir d'une façon ou d'une autre. J'espère que d'ici peu de temps nous serons en mesure de tirer des conclusions.

Nous avons fait un pas en avant pour le moment, nous avons permis plus de souplesse dans la procédure devant les tribunaux, pour les juges et les magistrats. Au moyen de ce nouvel amendement, inclus dans le Bill S-15, donne à la Couronne le choix de porter l'accusation au criminel ou de procéder par voie sommaire de culpabilité. Ainsi, plutôt que de condamner l'accusé sans recours à la prison, on peut maintenant imposer des peines moins sévères pour l'usage de la marijuana.

Il y a de plus en plus de souplesse grâce à cette loi. Je pense que cette méthode est assez

[Texte]

think that is a safe enough way to proceed for now. This is a first step until we have more knowledge.

The Chairman: May I point out for the purpose of future discussions that the question of marijuana comes under the Opium and Narcotic Drug Act, so we are not dealing with this question of marijuana here. Mrs. MacInnis.

Mrs. MacInnis (Vancouver-Kingsway): I have one supplementary question on this very subject. There is no subject, I think, that causes more controversy all over the country right now. I wondered whether the Minister would give consideration to perhaps having a study made by the Health and Welfare Committee into this whole matter of marijuana before any firm decision is taken. Young people are approaching me all the time—when I say young I do not mean teenagers, I mean graduates—pointing out that it is no more harmful than tobacco and that there is no evidence to support the fact that it is, and they feel aggrieved.

I think the summary conviction will help quite a bit. But there is on the part of people a very wide idea that this thing is not harmful. A lot of them have kept quiet about LSD because there has been some evidence. Is there any possibility of our getting a study by the Committee or by some other public body where we could get in a public form the evidence brought out all around?

Mr. Munro: Yes, Mrs. MacInnis, a great deal of consideration has been given to the manner and form by which we might undertake such a study. We have not arrived at any conclusions as to what form that study should take and indeed, whether a study should take place at all but a great deal of thought has been given and is being given along the lines of your suggestion. I could not go any further at this time.

The Chairman: Thank you, Mr. Minister. Mr. Osler.

Mr. Osler: Thank you, Mr. Chairman. Under this business of either possession or trafficking, although Mrs. MacInnis says there has been a noticeable slackening off recently but the principle is still there, it seems to me that it is almost trafficking in the accepted sense—and I wonder if it would be desirable to make it trafficking—to allow people to either gain fees or kudos or just a sense of personal power or something by appearing on

[Interprétation]

sûre pour le moment. C'est un premier pas, jusqu'à ce que nous ayons plus de connaissances.

Le président: Permettez-moi de signaler que la marijuana relève de la *Loi sur l'opium et les drogues narcotiques*. Nous n'avons pas à en parler maintenant. Madame MacInnis.

Mme MacInnis (Vancouver-Kingsway): Je voudrais poser une seule question supplémentaire sur ce sujet. En ce moment, rien ne soulève plus de controverse, au Canada, que la marijuana. Je me demande si le ministre voudrait faire faire une enquête par le Comité de la Santé et du Bien-être sur toute cette question de la marijuana, avant qu'on prenne une décision définitive. Des jeunes viennent m'en parler à tout bout de champ; quand je dis des jeunes je ne veux pas dire des adolescents, mais des diplômés d'université. Ces gens me disent que la marijuana n'est pas plus dangereuse que le tabac et que rien ne prouve qu'elle le serait. Ils sont vexés par cela.

Je crois que l'idée de permettre à la Couronne de faire un choix dans ses accusations est salutaire.

La plupart ont l'impression que ce n'est pas nuisible à la santé et se taisent au sujet du L.S.D. maintenant parce qu'on a des preuves. Y a-t-il une possibilité de faire faire une enquête par le Comité ou par un autre organisme public qui permettrait de connaître de façon publique les preuves qui ont été présentées jusqu'ici.

M. Munro: Oui, madame MacInnis, on a longuement songé à la manière et à la forme ou la procédure qu'on pourrait suivre pour entreprendre une telle enquête. Nous n'avons encore rien conclu, sur la procédure que l'on devrait suivre pour effectuer une enquête de ce genre et si on l'effectuera vraiment. Toutefois, je vous signale que l'on a tenu compte et on en tient encore compte de votre proposition. Mais je ne peux pas me prononcer de façon plus catégorique pour le moment.

Le président: Merci, M. le ministre, M. Osler s.v.p.

M. Osler: Merci, M. le président. Aux termes de ce texte visant la possession ou le trafic, madame MacInnis dit qu'il y a eu un relâchement remarquable récemment, mais le principe persiste toujours, il me semble qu'il s'agit presque du trafic dans le vrai sens du terme et je me demande s'il était souhaitable de dire que c'est du trafic que de permettre aux gens d'avoir une certaine gloriole ou le sentiment d'une puissance personnelle s'ils

[Text]

radio and television and saying what appeared to be absolutely fatuous things about some of these drugs.

A lot of the people who hear them are very impressionable people, and I wonder if some thought could not be given to some way being found to broaden the definition of either possession or trafficking to get these people in these modern media? It is insulting to the intelligence of a more sophisticated person to hear some of the things that we heard up to a year ago, anyway. I remember one Sunday night CBC program, I think it was, when a whole circle of so-called eminent people were telling us what a great thing it was to use all these things and that anybody who disagreed was stupid.

Mr. Munro: Well, I think the best way I can answer that is to say that that is why we have been giving some considerable thought to how we can in a more urgent way, bring together the knowledge we have on the subject and arrive at some pretty firm conclusions that would lay the basis of an educational campaign to be initiated by government and all those agencies prepared to co-operate with government. Once we have arrived at those conclusions ourselves, then we can in a more active way try to discredit those people who may be saying things that are at wide divergence with those conclusions.

In the meantime, I do not know how you can combat some of these things that are being said that may not be too accurate other than by mounting a countervailing program of public information which should be done. I think that can be just as effective as any other means in counteracting it.

If you are suggesting that in the law should be broadened in regard to trafficking I would want to look at that very carefully, Mr. Osler, because you could be bordering on a degree of censorship that would be rather repugnant, I think.

Mr. Osler: I agree with you, but the damage that is done must be very great.

The Chairman: Did you want to comment on that?

Mr. McCarthy: Just one additional comment, perhaps, Mr. Chairman. The point that has been raised is like points that were raised when this legislation was discussed at the Senate on different occasions and it related to the business of promotion. There was a suggestion at one time that the legislation should cover this whole aspect of the problem, but it was thoroughly discussed and eventually dropped on the basis that it was

[Interpretation]

apparaissent devant la radio et la télévision pour raconter des histoires absolument ridicules sur ces drogues.

Beaucoup de gens qui entendent ces choses-là sont très impressionnables et bien souvent—et je me demande s'il n'y a pas de façon d'envisager la possibilité d'étendre le sens du mot trafic et de possession parce qu'il faudrait vraiment les rejoindre ceux-là—cela insulte l'intelligence d'une personne assez sophistiquée d'entendre une chose que l'on a entendue jusqu'à l'an dernier en tout cas. Je me souviens qu'un soir à Radio-Canada il y avait, un dimanche soir, des gens bien connus qui vous disaient exactement comment se servir de ces produits et tous ceux qui ne s'en servaient pas étaient des imbéciles.

M. Munro: Je pense que la meilleure réponse serait de vous dire que c'est pour cette raison-là que nous songeons beaucoup à trouver une méthode pour mieux rassembler toutes les connaissances que nous avons sur ce sujet pour en tirer des conclusions solides, qui serviraient de base ou à une campagne d'éducation qui pourrait être lancée par le gouvernement et par tous les organismes qui voudraient bien collaborer avec le gouvernement. Et une fois que nous aurions tiré ces conclusions nous-mêmes, nous pourrions de façon plus active essayer de dénoncer les gens qui s'opposeraient à nos conclusions.

Entretiens, je ne vois pas comment on peut remédier à la situation telle qu'elle est présentée, à moins d'avoir un programme d'information publique comme contrebalance. Ce serait tout à fait efficace, aussi efficace que toute autre méthode pour combattre cela. Mais si vous proposez que l'on devrait étendre la portée de la Loi concernant le trafic je serais un peu prudent, M. Osler, car vous touchez presque à la censure et ce sera assez répugnant, je pense.

M. Osler: Je suis d'accord avec vous, mais les dommages doivent être considérables.

Le président: Vous avez des observations à faire?

M. McCarthy: Un commentaire, monsieur le président. Cet argument ressemble à d'autres qui ont été soulevés au moment où la législation a été discutée au Sénat à plusieurs reprises et on parlait de publicité. On se demandait s'il fallait que la loi embrasse tout l'aspect du problème, mais on a discuté de la chose à fond. On a conclu que c'était une tâche impossible, parce que si vous commencez à définir la publicité et tout ce qui y a

[Texte]

simply an impossible task, because when you begin define promotion, or anything relating to promotion, which such a discussion might be, you almost get into areas which just cannot be defined legally in any prohibitive legislation. For instance, even a discussion by persons completely against the use of marijuana could be construed in some circumstances as, in fact, having the effect of promoting its use.

Mr. Osler: Like Mark Antony's speech.

Mr. Munro: It is a difficulty.

The Chairman: Gentlemen and Mr. Minister, if it is the wish of the Committee, due to the fact that we did not proceed with the Bill this morning, perhaps we could reconvene this afternoon at 3:30 in Room 308. If it is the wish of the Committee, the officers of the Department will be available. Or should we meet this evening?

Mr. Haidasz: There is a vote this evening.

The Chairman: Then, shall we meet at the call of the Chair? We will have another meeting on Thursday, April 24 on the cigarette matter when the Canadian Dental Association will be presenting their brief.

Mr. Haidasz: What time?

The Chairman: The same time; 11 o'clock.

[Interprétation]

trait, on arrive à des sujets que l'on ne peut définir légalement dans n'importe quelle mesure législative. Par exemple, même une discussion par des personnes qui sont entièrement contre l'utilisation de la marijuana peut être interprétée en fait comme une publicité en faveur de la drogue.

M. Osler: Comme le discours de Marc Antoine.

M. Munro: C'est difficile.

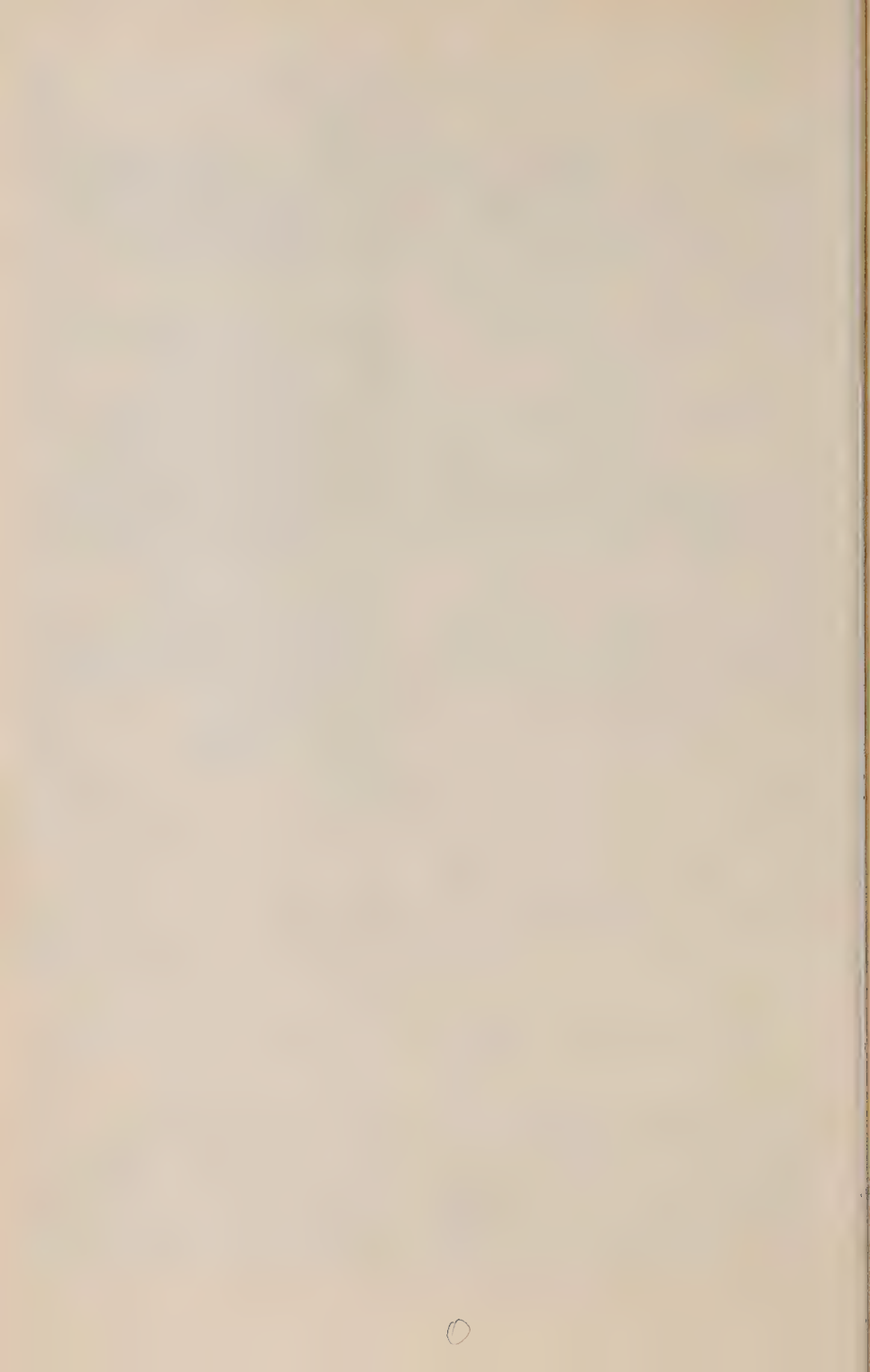
Le président: Messieurs les députés, monsieur le ministre, si le Comité le désire étant donné que nous n'avons pu terminer le projet de Loi ce matin, nous pourrions nous réunir de nouveau à trois heures et demie cet après-midi, à la salle 308. Si cela convient au Comité, les fonctionnaires du ministère reviendront. Ou bien, allons-nous nous réunir ce soir?

M. Haidasz: Il y a un vote ce soir.

Le président: Est-ce que nous nous réunissons à l'appel du président? Nous avons une autre réunion le jeudi, 24 avril, au sujet de la cigarette et l'Association dentaire du Canada présentera son mémoire.

M. Haidasz: A quelle heure?

Le président: A la même heure; à 11 heures.





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